TABLE 1 Patients with various diagnoses

Patient	Sex	Age	Diagnosis	FA	USG	RIS
1	F	88	Disciform macular degeneration with subretinal haemorrhage	NA	-	-
2	M	24	Haemangioma	±	-	-
3	M	66	Naevus or melanoma	±	±	-
4	F	70	Rectinal pigment epithelial hyperplasia	☆	-	-
5	M	47	Retinal pigment epithelial dystrophy	-	-	-

FA=fluorescein angiography. USG=ultrasonography. RIS=radioimmunosintigraphy. NA=not available. ☆=not available due to peripheral localisation.

possibility of a false positive result due to tracer uptake in a naevus should be kept in mind.

- 1 Tullo AB, Dodd CL, Noble JL, Owens S, Rao H. Ocular melanoma. *Br J Ophthalmol* 1989; 73: 771.
- 2 Hungerford J. Ocular melanoma. *Br J Ophthalmol* 1989; 73: 772.
- 3 Schaling DF, Van Kroonenburgh MJPG, Borsje RA, et al. Radioimmunosintigraphy with melanoma associated monoclonal antibody fragments in ocular melanoma. *Graefes Arch Clin Exp Ophthalmol* 1989; 27: 291-4.
- 4 Bomanji J, Nimmon CC, Hungerford JL, Solanski K, Granowska M, Britton KE. Ocular radioimmunosintigraphy: sensitivity and practical considerations. *J Nucl Med* 1988; 29: 1038-44.

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BOOK REVIEWS

Proliferative Vitreoretinopathy (PVR). Eds H MacKenzie Freeman, Felipe I Tolentino. Pp 197. DM 148.00. Springer-Verlag: London. 1988.

In this book, the first devoted entirely to PVR, the editors have assembled 27 papers dealing with the pathology, the management, and current research into this difficult condition. The material is presented under three main headings: an update, a discussion of common concerns, and reports of current clinical and research studies.

After an introductory overview of the general concepts of PVR there follows a number of clinical papers on the management of it in its increasing stages of complexity. These range from clinical and animal studies of the role of scleral buckling, and expansile gases without vitrectomy by Stanley Chang, to Zivojnovic's astounding collection of longstanding retinal detachments in severely traumatised eyes and their near miraculous recovery. The middle section is devoted to an almost verbatim transcript of a round table discussion by a number of well known experts in the vitreoretinal field. The last 17 articles range from a description of the organisation of the multicentre treatment trial which compares the use of silicone oil with that of expansile gases, to purely laboratory studies of drug delivery and the pharmacological manipulation of the cellular processes involved in the pathogenesis of PVR.

This book makes very interesting reading for those concerned in the management of patients with PVR. Being mostly a compilation of papers presented at the 1986 Academy Meeting, it suffers from a certain amount of repetition in the introductions and discussions in each paper. The 'current research studies' are by now over two years old, and much has happened since in the busy research on the intricacies of proliferative vitreoretinopathy.

Z J GREGOR

Human Brain Electrophysiology: Evoked Potentials and Evoked Magnetic Fields in Science and Medicine. By David Regan. Pp 672. US\$140.00. Elsevier: New York. 1989.

This is a single author textbook which is going to provide an important reference source for any electrodiagnostic clinic. Although the author writes from the point of view of the electronic engineer, his scope is wide. The book is in three sections. The first is divided into technical and mathematical considerations, the second is on basic research, and the third is on clinical applications. The main emphasis of the book concerns basic research and research techniques, and, although the clinical section is fairly short, it has been well written. The book is concerned with all forms of evoked potential, including visual, auditory, and somatosensory. The author is a well known authority in the field, and in this work his original textbook has been greatly expanded and updated. It will be welcomed by anyone concerned with the electrophysiology of the brain.

N R GALLOWAY

Clinical Ophthalmology. 2nd Edn. By Jack J Kanski. Pp 491. £75. Butterworths: Guildford, Surrey. 1989.

There is no better testimony to a successful book than the appearance of a second edition within five years after its original publication. In *Clinical Ophthalmology* Jack Kanski demonstrates the art of the master textbook writer: the text is well laid out, brief yet comprehensive. It covers all the important ophthalmic conditions, with the salient features of their clinical histories, physical signs, and management. Although the text is not referenced, there is an adequate list of suggested reading, which is as up to date as any newly published textbook can provide. The illustrations by Terry Tarrant are superb, and they admirably complement the wealth of colour photographs.

It is difficult to fault this excellent book. It has become the standard text for trainee ophthalmologists, both in Britain and elsewhere, and can also serve as a comprehensive reference book for practising ophthalmologists.

Z J GREGOR

Diabetes and Its Ocular Complications. By William E Benson, Gary C Brown, William Tasman. Pp 197. £40.50. Saunders: London. 1988.

This is a beautifully produced book which covers most clinical aspects of diabetic retinopathy. It also has chapters on pathology, together with four chapters on diabetic tissue damage and coagulation changes. There is a useful chapter on differential diagnosis of diabetic retinopathy. The book could be particularly useful to residents wanting to learn about this common condition, which is a major cause of blindness in the developed world.

But there are also many shortcomings. Papers are cited and reviewed without any criticism, and all statements made by different authors quoted are taken at face value, without any indication of which studies are based on too few patients or inadequate statistical analysis. Nor do the authors come up with definite suggestions or conclusion at the end of the chapters; this is most noticeable in chapter 14, on medical treatment of diabetic retinopathy.

A further shortcoming is that, when discussing pathogenic mechanisms, the authors do not mention the tremendous amount of work done in the field of cell culture. The papers quoted are extensive, but there are almost none from 1987 and few from 1986. Thus, although a new book, it is in the non-clinical aspects already out of date. This is really an indication of the rapid expansion of work in the field of retinopathy and the slow production of books.

While the book is a useful addition for residents, I do not think that it is of value to the researcher in the field of diabetic retinopathy.

E M KOHNER

A Colour Atlas of Contact Lenses and Prosthetics. 2nd Edn. By Montague Ruben. Pp 199. £35. Wolfe Medical: London, 1989.

This superb collection of illustrations covers a wide ranging though at times eclectic collection of topics on contact lenses. They demonstrate the author's breadth of expertise in many areas of contact lens practice, particularly in lens materials and design and in the fitting of the abnormal eye. The text is sometimes too concise to illuminate the understanding of the pedestrian reader, though the diagrams do much to overcome this. The book is an entertaining companion to more formal texts on contact lens practice.

JOHN DART

Brain and Reading. Eds. Curt von Euler, Ingvar Lundberg, Gunnar Lennerstrand. Pp 390. £50.00. Macmillan: Basingstoke, Hants. 1989.

The Rodin Remediation Conferences have acquired a reputation for excellent if occasionally eccentric meetings, in which a goodly collection of eminent speakers from a range of disciplines share the stage with a handful of more controversial and shadowy figures from the world of dyslexia research. In the early meetings there was a strong emphasis on visual factors, but this has progressively declined to the point where in these proceedings less than one-third of the papers are concerned with the visual system.

This is not a book for the novice. The papers do not follow a coherent theme, and the editorial contribution is largely confined to

grouping together the papers under general topic headings. Thus within this text we are told both that dyslexia can arise from left hemisphere lesions (Aram *et al*) and that it is a consequence of right hemisphere dysfunction (Stein *et al*). The underlying basis of developmental dyslexia is postulated to be linguistic by many contributors (for example, A Liberman, I Liberman, Lundberg, Kean, Elbro) but visual by others (Stein *et al* Geiger, and Lettvin). It is regrettable that these contradictory claims are barely debated, leaving it mostly up to the reader to resolve the discrepancies, a hard job even for one well versed in the field. It would have been good to see someone from the 'language' camp discussing the 'visual' papers, and vice versa. The closest this book comes to addressing the crucial areas of disagreement is in a nicely argued review by Rayner, an eye movement specialist who accepts that there is good evidence for abnormal eye movements in dyslexics but argues that these are a consequence rather than a cause of reading problems.

Another difficulty for the non-expert to grapple with is the inclusion of several chapters that, on the face of it, appear to have little to do with dyslexia. The expert in reading disorders may be able to deduce the relevance of chapters on such topics as selective attention (Berlucchi *et al*), somatosensory cortex (Whitsel and Franzen), and motor control (Rothwell), but the non-specialist is given little help by either authors or editors in making the theoretical links.

There are, however, compensations. Rapid reproduction methods have made it possible for these proceedings to appear within a year of the conference, so that those chapters reporting recent research are fresh and topical. I was particularly interested in the report of neuroimaging techniques applied to children with developmental language disorders by Tallal and Katz, and in Gathercole and Baddeley's account of their recent research on development of phonological memory. Several of the other papers reviewing past as well as recent research provided valuable summaries of developments in a particular field. In this regard I found the paper by Sherman *et al* (on neuroanatomical anomalies in dyslexia), those by Fant and Lindblom (both dealing with aspects of phonetics), and the aforementioned paper by Rayner (on eye movements in dyslexia) especially useful.

The advent of desktop publishing systems with laser printers means that rapid reproduction is no longer synonymous with poor quality typescripts. However, it remains a costly process that results in a book that is priced so as to make most individual purchasers think twice.

Who, then, will buy this book? I suspect only a minority of readers of this journal will feel impelled to do so. For those with little specialist knowledge of reading, the wide range

of unrelated papers can only be confusing. Those with a special interest in eye movement disturbances in dyslexia will find only four of the 29 chapters concerned with this issue, two of them arguing against the notion that visual abnormalities have a causal role. The four further chapters dealing with eye movements say little or nothing about dyslexia.

In sum, there is much excellent material in this book, but most of it demands a high level of background knowledge of the literature on reading disabilities to appreciate its significance.

DOROTHY BISHOP

NOTES

David Cole travel fellowship

The David Cole travel fellowship, instituted by Merck Sharp and Dohme in memory of Professor David Cole, will assist a visit to a hospital or research centre during the academic year starting 1 October 1990. The award will be equivalent to £2000. Its purpose is to enable the successful applicant to gain experience and knowledge in pursuit of a specific project related to glaucoma.

Glaucoma Group research grant

The Glaucoma Group research grant, sponsored by the International Glaucoma Association, will be available for a research project clinically orientated to glaucoma for 1990. The award will be equivalent to £2000. The grant may be used towards salary or project expenses or for buying equipment. Both these awards are available to medical graduates and non-medical scientists resident in the United Kingdom or Irish Republic. They may be held concurrently with other awards. Further details and application forms are obtainable from Dr S Nagasubramanian, Secretary Glaucoma Group, Glaucoma Unit, Moorfields Eye Hospital, City Road, London EC1 2PD. The closing date for applications is 15 June 1990. The successful candidate will be informed by August 1990.

Diabetic retinopathy

A workshop on 'Diabetic retinopathy: screening, assessment and treatment' will be held at the Hammersmith Hospital, London, on 8-10 October 1990. Its purpose is to establish a protocol for the screening of diabetic retinopathy and the minimal standard

requirements for its management throughout Europe. The workshop has received the endorsement of the WHO/IDF Saint Vincent Declaration Working Group. It will be addressed to ophthalmologists and diabetologists with a specific interest and preferably experience in clinical retinopathy. The number attending will be limited to 50. Selections will be based on order of application, nomination to represent national associations, and country of origin, as the widest possible representation from all countries in Europe would be highly desirable. Further information from Dr M Porta MD and Dr E M Kohner, Diabetic Retinopathy Unit, Hammersmith Hospital, Du Cane Road, London W12 0NN.

Ocular inflammation

The University of Alicante, Spain, and the Hadassah University, Israel, will sponsor the International Symposium on Ocular Inflammation in Alicante on 23-26 May 1990. The symposium will cover both clinical and research aspects of ocular inflammation and will include a basic sciences course. Call for free papers is open. Further information from Donoso Cortés, 73-1º, 28036 Madrid, Spain.

Intraocular trauma

An Intraocular Trauma Course will be held on 1-3 October 1990 at Provinciehuis, Antwerp, Belgium. Further information from Mrs Dorine Verhoeven, Department of Ophthalmology, A Z Middelheim, Lindendreef 1, 2020 Antwerp, Belgium.

IAPB Fourth General Assembly

The International Agency for the Prevention of Blindness (IAPB) will hold its Fourth General Assembly in Nairobi, Kenya, on 11-16 November 1990. The theme will be 'Sustainable strategies - agenda for the 1990s.' Those wishing to attend should register before 1 September 1990. They should send name, affiliation, address, telephone and fax numbers, and registration fee (payable to IAPB Kenya) to IAPB Coordinating Committee, c/o Ad-Venture Promotions Ltd, PO Box 11505, Nairobi, Kenya. The registration fee is US\$175. The fee pays for attendance at the General Assembly, transport to and from the airport, lunches and teas each day, the opening reception, and the concluding banquet. Members should add US\$15 for each guest they wish to bring to the reception and/or banquet.