
Reply
Sin,-I agree that the possible adverse effects of this drug must be carefully weighed against the potential benefits and moreover that the efficacy of the drug requires a full critical evaluation.

However until this evidence is forthcoming I consider that methylprednisolone does have a role in treatment of certain cases of temporal arteritis.

While methylprednisolone is a commonly used drug the number of serious side effects reported is low. Conversely there is a significant morbidity and mortality consequent upon bilateral visual loss in the elderly.

Thus I consider use of methylprednisolone is justified when blindness is threatened, for example, in patients who develop second-eye symptoms when already taking a significant dose of oral prednisolone or for patients who delay presentation until after the second eye has failed.

Total blindness is a catastrophic complication of temporal arteritis. The potential prevention of this outcome would seem to justify utilisation of a relatively safe if unproved therapy.

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BOOK REVIEWS


I was particularly delighted to review this book because when I was in the early stages of converting to phacoemulsification for the management of cataract patients this was a book I purchased and consumed both with pleasure and benefit. It is a slim volume designed specifically to encourage and assist the surgeon undergoing the process of converting to phacoemulsification. This process can be uncomfortable and painful from time to time and encouragement and assistance are both very welcome. The author’s style is distinctly chatty but is always very much to the point.

In its 12 short chapters it covers every aspect of the procedure and the important points are illustrated by simple line drawings. No important technical point is omitted. I should, however, point out that in my experience no textbook can replace the value of an instruct-
tional course when it comes to phacoemulsification. This is a subtle surgical procedure requiring skill and care and it is much less comfortable to discover its pitfalls by unguided surgical experience than to have been forewarned and forearmed against them. The greatest strength of this little book is its encouraging tone and the author’s unswerving belief that what he has to say is true to both the surgeon’s and the patient’s best interests. It is his weakness in that it does not take account of some of the more recent developments in cataract management, particularly capsulorhexis and phacoemulsification within the capsular bag. These, however, techniques which a converting cataract surgeon does need to acquire quite early. I hope that future editions of this volume will cover this omission.

A D MCG STEELE


This book is dedicated to the use of sodium hyaluronate in all aspects of intraocular visocurgery. It is edited by a team of well known American and Italian ophthalmologists, and the manufacturers of the product appear to have played a prominent part in the production of the book.

The text is relatively short but clear. The introductory section deals with the chemistry, physics, and physiological properties of sodium hyaluronate. This is followed by four chapters about the clinical applications of this undoubtedly useful substance. Having discussed its use in surgery of the anterior segment and glaucoma, the editors devote the largest section of the text (and the largest volumes of sodium hyaluronate) to surgery of the posterior segment. There are many colour paintings which make the procedures look deceptively simple and free of complications.

All in all this is a beautifully illustrated book which is easy to read, but unless there is a sudden change in the price of sodium hyaluronate it is likely to be limited value to most readers in Britain.

Z GREGOR


This book is an excellent production comprising more than 600 pages and 32 chapters on up-to-date methods of investigation in our speciality. The range of topics covered is wide, varying from magnetic resonance imaging through holographic contour analysis of the cornea to scanning laser and image analysis of infrared choroidal angiography.

Many of the contributors are scientists and not clinical ophthalmologists, but their chapters are full of interest though several admit the clinical application of their expertise awaits analysis. Most chapters end with some paragraphs on the present clinical application of the method described and also look into the future regarding potential developments. The references provided are full and frequent sugges-
tions for further reading are included. Many of these references are in non-ophthalmic journals and monographs and the reader cannot fail to recognise the tremendous contributions being made to the advancement of knowledge by scientific workers in our field.

The whole book is fascinating and of immense value to those in the clinical field who may have access to the expensive research instrumentation and the expert knowledge of the research workers who also need to know how to manipulate the software and hardware required.

I have the feeling though, that, rather like encyclopaedias, the information will rapidly become dated as new devices are developed. I wonder if the editor might consider producing an update at periodic intervals to permit this current publication to remain as the authoritative textbook of noninvasive techniques as cleverly defined in the foreword.

I will enjoy having access to this beautifully presented book with its fascinating photographs and hopefully the possibility will arise of the clinical application becoming available to an increasing number of workers as time and finance become available.

WILLIAM M DOIG

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NOTES

International Society of Ocular Trauma

The Society will hold its 2nd International Symposium on Ocular Trauma on 2–3 April 1992 in Geneva, Switzerland. Further details from: The Secretariat, 2nd International Symposium on Ocular Trauma, c/o Kuoni Travel Ltd, 7 Rue de Berne, CH-1211 Geneva 1, Switzerland (tel: 41 22 732 0888; fax 41 22 731 5078; th: 412831).

Welsh Cataract Congress 1992

The Welsh Cataract Congress will be held on 10–12 September 1992. Further information from: Eula Mae Childs, Cullen Eye Institute, Baylor College of Medicine, 6501 Fannin (NC200), Houston, TX 77030, USA. Tel: 713-798-3941.

Biomedical Optics ’92

The International Society for Optical Engineering will hold a symposium under this title on 19–24 January 1992 at Los Angeles Airport Hilton Hotel. Details from the Society at PO Box 10, Bellingham, Washington 98227-0010, USA.

64 Letters to the editor. Book reviews. Notes