
This notable work by Dr. Bailliart consists of 388 pages, with numerous illustrations of which a number are coloured. It is concerned with the retinal circulation from a physiological and from a pathological standpoint, but not only so for it also deals with a number of diseased states in which retinal haemorrhages occur, and with the treatment, both local and general, of these diseases. It is divided into three parts:

The first part of the book is given to the anatomy and physiology of the circulation in the eye, to the action of certain drugs, and to embryology. Much space is naturally given to the method of determining the systolic and diastolic pressure in the vessels, and to its variation in various physiological states, such as age, position, etc. Twenty pages are given to the venous circulation, but the capillary circulation receives rather cursory treatment.

The second part is given to functional diseases. Local hypertension and hypo-tension are dealt with, and a chapter is given to the consideration of angio-spasm.

The third part is given over to pathological organic conditions and to treatment. It forms the largest part of the work and is divided into twelve chapters. Abnormal conditions of congenital origin are considered, and here Coppez's figure of what are well known as "angeoid streaks" is given as an abnormal vascular arrangement; dilatations, constrictions of the vessels, and aneurysms are figured. Much space is given to disease of the retinal vessels as a manifestation of arterio-sclerosis, but it is rather striking that although there are a number of figures representing this condition in none of them, we think, is the sigma-like curve of a vein under a thickened artery, which is so characteristic a sign of arterio-sclerosis, shown or mentioned.

Chapter twelve is given to thrombosis of the retinal veins. In chapter thirteen retinal haemorrhages are dealt with, the different forms are mentioned, the changes which they undergo as absorption occurs, and the source of them is considered. The intraocular circulation in glaucoma, the occurrence of arterial pulsation, and the relation between the general and local blood pressure and their relation to the intraocular tension, are well discussed. Renal retinitis, diabetic retinitis, the circulation in diseases of the heart, and of the blood all come in for notice. Lastly, the wide question of treatment is discussed.
It is inevitable that in a book of these dimensions and on such a subject there will be statements which are controversial, but Bailliart’s work is so well known and so highly estimated that his views will be eagerly studied. The type is good, the figures are a little unequal in value, but for the most part well illustrate the text, and an index of contents and of authors is given.


An excellent preface appears in this new edition which every student who wishes to become proficient in ophthalmic surgery should read carefully. The translation has been entrusted again to Dr. Sweet of Philadelphia, who has performed his task admirably. There are 74 more pages than in the second edition, and 46 more illustrations. The paper, illustrations, and type are a very marked improvement on both the 1908 and the 1912 editions.

The most important addition to the new volume is a short account, four and a half pages, of Elliot’s operation of trephining for glaucoma. This operation is very unpopular on the Continent and Dr. Meller’s opinion can be judged from the following quotation from page 263:

"Trephining operation. Trephining is to be justified only in those cases of glaucoma in which the ordinary iridectomy cannot be performed without extreme difficulty or danger as in high degrees of tension, in extreme shallowness of the anterior chamber and other unfavourable conditions, such as advanced age and serious general disease; also in instances in which other operations have been done without result and another attempt is to be made to prevent complete loss of sight from increased tension. Because of the danger of late infection the operation is contra-indicated in young persons or if the patient has only one eye. The danger of late infection must be regarded as one of the serious sequels of the operation. The latest researches show that in about 40 per cent. of the eyes a free fistula is formed and the aqueous oozes continuously from the anterior chamber into the conjunctival sac either spontaneously or when pressure is applied to the eye. Fistulation beneath the conjunctiva into the sub-conjunctival space is obtained only exceptionally, although it was the result originally expected from the operation."

The obvious conclusion from the above is that Continental operators give too thin a covering to the trephine hole. In this country late infection is so rare that it can be disregarded. MacCallan reports 5,017 operations in Egypt in twelve years with 17 secondary infections = 0.35 per cent.
CORRESPONDENCE

Except for the above criticism we have nothing but praise to give, and we have no hesitation in recommending the book to those interested in ophthalmic operations.

CORRESPONDENCE

POSTPONEMENT OF THE INTERNATIONAL CONGRESS, 1925.

The following communication has been sent to us by the General Secretary of the Société française d’Ophthalmoologie requesting us to publish it.

In the May, 1924 (p. 252), number of the British Journal of Ophthalmology a communication from Professor Uhthoff (Breslau) is published concerning the proposition of the German medical corporation not to treat any French or Belgian patient. He says: "This interpretation is misleading. All that the French press has published as a general principle on the part of German doctors is nothing but a misrepresentation of a protesting and demonstrative measure taken by German medical men at the time of the 'Ruhr Invasion.'"

The French ophthalmologists have had nothing to interpret. They only spoke of a decision which was published in the German press. Here are two original trustworthy papers about which no mistake is possible.

First of all, the great medical journal Münchener Medizinische Wochenschrift, February 16, has published a paper from Munich, February 14, 1923, in which is said:

"The German doctors have placed themselves, too, on the lines facing the disturbers of peace. Two great medical associations the "Arztevereinbund" and the "Hartmannbund" beg of the German doctors to act on our side against the French and Belgians who have disobeyed the rules and laws of humanity in the struggle. Let us refuse any kind of assistance to Frenchmen and Belgians. Neither advice nor help before the occupied regions get free. . . . With such enemies, no consideration; using all the weapons we have yet, is a duty for every German."