Book Reviews

Multiple Choice Questions in Ophthalmology D. F. P. Larkin

Multiple choice papers are an important part of all the written examinations of the College of Ophthalmologists, and candidates will therefore find it useful to have a selection of questions written in the format used by the College. This collection of 300 questions and their answers, covering various aspects of the basic sciences, optics and ophthalmology will provide valuable practice for aspiring ophthalmologists.

Barrie Jay

Thyroid Eye Disease—2nd Edition

Devron H. Char

In an age of multi-author textbooks which are so often "good in parts" it is a pleasure to read this excellent monograph on Thyroid Eye Disease. The book is an authoritative account written by a clinician with wide experience of the disease and an enthusiasm for the subject. Most aspects of thyroid disease are clearly described and the book is written in a very readable style.

Eight of the twlelve chapters deal with the medical aspects of thyroid disease and thyroid ophthalmopathy. The account of eye signs and clinical diagnosis is perhaps the most valuable of these chapters and includes the use of CT and MRI imaging. The author's comments on the comparative value of CT and MRI illustrate the insight he has as a result of personal experience. Although there is a paucity of MRI data on thyroid ophthalmopathy the delineation of compressive optic neuropathy is easier with MRI than CT. On the other hand a few incorrectly diagnosed patients have been seen and thought to have orbital apex tumours on the basis of axial MRI. This has occurred because MRI cannot be reconstructed and presents a problem analogous to that which originally occurred using CT when an enlarged inferior rectus muscle was occasionally diagnosed as an apical tumour. There is a further excellent and well balanced chapter on the use of diagnostic tests in euthyroid Graves' disease though some may not agree that the increased sensitivity of modern TSH assays has entirely replaced the TRH test. Under the heading Mechanisms of Hyperthyroidism the author makes a brave attempt to draw together the enormous volume of work on the autoimmune pathogenesis of hyperthyroidism. In spite of the seemingly endless abnormalities of the immune system which have been described the precise mechanisms of hyperthyroidism and thyroid ophthalmopathy remain an enigma. It is of interest, however, that the autoimmune theory has recently been expanded to encompass the possible role of a retro-virus. Perhaps further research into a dual role of viruses and the immune system may finally resolve the cause of Graves' disease. A minor criticism of the chapters on medical aspects is the lack of emphasis on thyroid ophthalmopathy as part of a systemic disease. There is, for example, no reference to thyroid acropachy or pretibial myxoedema in Graves' disease and there is only a passing reference to the association of thyroid disease with myasthenia gravis. The latter is not purely of academic interest because of the problems in diagnosis and management which may arise in patients who have both thyroid disease and myasthenia. The judicious use of Edrophonium injection may occasionally solve the problem of apparently variable eye movement disorder in patients with thyroid ophthalmopathy. In spite of these reservations it should be said that all the chapters in this book are very well referenced, most sections including between fifty and two hundred separate references.

Chapters on the use of radiation therapy, steroids and the surgical management of ophthalmopathy are perhaps more controversial. Some readers may feel, for example, that the

BOOK REVIEWS 645

case for radiotherapy may be overstated but perhaps this reflects the fact that the author is not only Professor of Ophthalmology but also Director of the Ocular Oncology Unit in the University of California. Patients with compressive optic neuropathy are managed in the author's department with steroids and irradiation prior to orbital decompression if this becomes necessary. I suspect that in most Centres irradiation is not used in this situation as a prelude to surgery. In fairness the chapter on radiotherapy is followed by three separate chapters on the surgical management of evelid retraction, orbital decompression and the surgery of ocular myopathy. These chapters are very well illustrated with line drawings. The account of eye muscle surgery includes a reference to the use of botulinum toxin but the crucial importance of orthoptic assessment in the timing of surgical intervention is curiously omitted.

Minor criticisms of this book do not detract from the fact that it is an admirable and unique account of thyroid eye disease. As such it can be recommended not only to ophthalmologists but to all physicians and surgeons who are involved in the management of patients with this disease whose chronicity and variability makes it at once frustrating and fascinating to deal with.

N. E. Lawton

Practical Management of Squint

Graham Pittar

The author challenges traditions of examination. "Throughout this book critical comments have been made about the discipline of Orthoptics". The introductory chapters are written in a pugnacious style which risks alienating even the most open-minded of readers. Yet it is refreshing to analyse the factors in the history and examination of a patient which influence management. Patient management is dealt with in a clear and decisive style supported by flow charts. The author is not convinced of the value of formal classifications—this chapter is brief and at the end of the book. Chapters are written in a wellreasoned manner with references and a "RECAP" summary at the end of each. The author's view on orthoptic practice will cerainly stimulate lively discussion but the

management approach is not as controversial and is well reasoned, making it a most worthwhile read.

Isabelle Russell-Eggitt

Review of Video: Cataract Surgery Alternative Small Incision Techniques

This video has a number of contributors each describing different small incision techniques for cataract surgery. The scleral pocket incision and its closure are demonstrated along with common errors. A number of different methods of dividing the nucleus are described. Each commences with hydrodissection of the lens within the capsular bag followed by subluxation of the superior pole. The nucleus may then be divided by various bimanual techniques or with a disposable snare. The nuclear fragments are then removed individually using forceps or a vectis.

The quality of the video and sound-track are good throughout. Undoubtedly there are a number of new ideas and techniques demonstrated in the video which will be of interest to those surgeons keen to move towards small incision cataract surgery, particularly if they have reservations about conversion to phakoemulsification. However, it is clear that most of these techniques are still at an early stage in their development and many will be regarded as controversial. Long-term follow-up is awaited particularly with regard to their effect on the corneal endothelium.

K. Bates

Scanning Laser Ophthalmoscopy and Tomography

J. E. Nasemann and R. O. W. Burk (Quintessenz Verlag) Munich 1990

'I have no doubt there are new worlds being conquered even as I write, which had not been part of our original imaginings.' The statement in Robert Webb's introduction to this book on scanning laser imagery crystallises the problems that influence all authors who write on new techniques that are developing rapidly. Scanning laser ophthalmoscopy represents an old idea that has suddenly been rediscovered and modernised through the application of high technology. Like anything that is minimised, digitalised and computer-