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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-