

drawings and diagrams to supplement the text but more would have been helpful. The book is divided into fifteen chapters covering most of the basics in clinical ophthalmology including practical chapters on clinical assessment and the management of surgical in-patients which will be much appreciated by busy ophthalmic SHOs. The chapter on ocular motility and strabismus concentrates almost exclusively on paralytic squints and one has to look in the chapter on paediatrics for details of non-paralytic squints, binocular single vision and the cover test. The chapter on paediatric ophthalmology also deals with the visual assessment of children and with the child with poor vision and these aspects are useful. However, many subjects in this chapter such as electro-diagnostic tests, ultrasound, cellulitis and glaucoma are also covered elsewhere in the book whereas childhood uveitis is omitted altogether. There is only sparse coverage of cataract and the ocular effects of systemic diseases and these areas would seem to be particularly relevant to ophthalmic junior staff. Nevertheless these drawbacks are only minor and it must be said that Nicholas Evans has written a good book which will be particularly useful to new entrants to hospital ophthalmology and is to be recommended.

Robert F. Waltern

Eye Diseases in Hot Climates

By John Sandford-Smith
Second Edition

Wright: London Boston Singapore Sydney, Toronto, Wellington.

This book is written as a guide to those intending to practice ophthalmology in tropical countries—both the non-specialist already there and the specialist unfamiliar with the tropics. It succeeds on both counts and it is very pleasing to see it in its second edition. The sections on trachoma and onchocerciasis have been updated and the quality of the illustrations is excellent.

There are a few points that could be stressed—the increased safety of using a dry preparation of fluorescein rather than drops for corneal staining the advisability of giving prophylactic Vitamin A to all children with measles, the use of suturing as a safer procedure than strapping for protecting the cornea, are examples.

Nevertheless this is an extremely useful book with the added advantages of being both easy to read and easily portable and I have no hesitation in recommending it to those working in developing countries.

Marion C. Handscombe

Manual of Visual Fields

Elliott B. Werner
Churchill Livingstone

This is a concise book covering visual field assessment and diagnosis and the modern instrumentation available. The fundamentals of field technique using the Goldmann Perimeter are well discussed though much of the book relates to autoperimetry using the Octopus and Humphrey Field Analysers.

In the historical review of field testing, campimetry technique using the Bjerrum Tangent Screen is rather glossed over, even though its continuing usefulness is referred to later in the text, especially in the context of functional disease. There is passing reference only to the Tubinger instrument, and slight reference to the computer of Heijl, and the screening devices of Freidman, and Hansen, as also the computer display method of Damato.

Nevertheless the book gives an excellent description of the principles of dynamic and static field testing using threshold and suprathreshold determinants, and the handling of the physical units involved is well presented. In this respect the concept of differential retinal sensitivity and threshold are logically and carefully expounded in a clear and readable manner. The comparative methods and testing logic of the three important perimeters (Goldmann, Octopus, and Humphrey) are nicely collected here in one book which allows easy cross reference of their equivalence.

The illustrations and diagrams are all derived from clinical material and are excellent. The statistical analysis software (Octosoft, Statpac Humphrey), are well explained.

In the clinical section there are chapters on field defects with media opacities, retinal and choroidal lesions, glaucoma, optic nerve, chiasm, and retrochiasmal pathways. There are clear diagnostic criteria as well as useful hints. The pitfalls of autoperimetry are also indicated.