Book Review

Systemic Diseases and the Eye: Signs and Differential Diagnosis

Jack J. Kanski, M.D.

London, Mosby, 2001; $79.95, 249 pages.

This beautifully illustrated atlas of systemic diseases by the well-known British ophthalmologist, Jack Kanski, is a very complete guide to most of the systemic diseases that include eye findings with the exception of some rare pediatric conditions/syndromes that may not be of interest to general physicians.

The book is divided into three parts: Differential Diagnosis of Eye Signs; Differential Diagnosis of Systemic Signs; and Systemic Features and Eye Signs. The first section presents Eye Signs divided by site and presents the possible systemic disease that may be associated with that sign. For example, under the section on eyelids, the sign of eyelid retraction is shown to be associated with the systemic conditions of thyrotoxicosis and Parinaud dorsal midbrain syndrome. Each is illustrated in color and a few associated signs to look for are listed. (In the case of thyrotoxicosis, they include thyroid enlargement, fine tremor of the hands and tachycardia/atrial flutter.) In this manner, each part of the eye is presented with signs that may relate to a systemic disorder.

In the second part, systemic signs are listed for each part of the body and related to possible eye involvement. For example, under Hands, the sign of long fingers is listed and associated with Marfan syndrome or Homocystinuria. It is suggested that one look for dislocated lenses and retinal detachments.

The third section lists each of the systemic conditions in alphabetical order and then lists and illustrates the systemic features and eye signs. Overall, it is a very complete listing of disorders and all are appropriately illustrated in color.

This is a very nice reference book that would be of interest to any training program to show students a quick summary of the systemic and eye signs of most diseases that they might come across in their reading in ophthalmology. It is not meant to replace a more extensive book on systemic disease with more than an outline of information. It is very reasonably priced for the number of color illustrations and would be a good addition to most ophthalmology libraries.

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Book Review

Eye Muscle Surgery: Basic Data, Operative Techniques, Surgical Strategy

Andre Roth and Calude Speeg-Schatz, Editors

Translated from the French by Susan E. Houghton

Swets & Zeitlinger, Lisse, The Netherlands, 2001; $125.00, 406 pages.

This book was originally published in French in 1995 and has been translated into English by Ms. Houghton, an orthoptist. Professor Roth has been a well-known strabismologist in Geneva, Switzerland and Professor Speeg-Schatz is at
the Medical School in Strasbourg, where she is also head of the Orthoptic Training program. In her Preface to the English edition, Dr. Suzanne Veronneau-Troutman, points out that Professor Roth was among the first to advocate the use of the operating microscope in muscle surgery and has been extremely interested in all aspects of muscle surgery.

The book consists of three sections. The first, Basic Data in Eye Muscle Surgery, consists of five chapters dealing with all aspects of anatomy, physiology, and even the psychological context of strabismus surgery. I found it to be amazingly complete and a superb reference for topics from modeling of the oculomotor system to the basic exam with examples of the charting done by them on their patients. Many of the examination techniques reflect the European schools, which may not be familiar to North American readers. However, they are of interest to see how these approaches may vary.

The second section, Operative Techniques, describes in exquisite detail each of the many methods of weakening or strengthening each of the ocular muscles. These are accompanied by both black and white photographs and line drawings to assist the reader. The attention to detail as to how to, for example, place the sutures, tie them, and be concerned about the exacting position of the muscle at the end of the case is very interesting. The author insists that the measurement for the recession procedure include the distance from the insertion the suture has been placed so as to include the minimal amount of resected muscle that occurs. So, if the suture is back 0.5mm from the insertion, one adds that to the measurement of the recession, if 1.0 mm from the insertion, then an additional 1.0 mm is added to the planned recession. I think most strabismus surgeons I know do not make changes in their planned recession based on this detail, but, instead, consider the suture placement to be fairly consistent and incorporate it into their surgical plan.

The authors prefer muscle plication to resection based on the preservation of the anterior ciliary arteries by this procedure. Professor Roth was among the first to suggest techniques to preserve the anterior ciliary arteries and advocates their preservation in all cases that it is possible to do so.

I found the historical aspects of the text to be very interesting, as well. Did you know that Jameson was the first to advocate recession of the rectus muscles and did not do so until 1922, thus making it the most recent of the major surgical techniques to be introduced?

The third section of the book, Surgical Strategy, discusses the surgical treatment of a variety of conditions including Concomitant Strabismus, Nystagmus, Paralytic Strabismus and Restrictive, Neuro- myogenic and Myogenic Disorders. Each topic is carefully discussed and patient examples are shown.

Overall, this is a fine book that covers strabismic surgery in great detail. It is valuable as a reference and covers both historic and modern scientific advances in the field.
Book Review

The History of Strabismology

Gunter K. von Noorden, M.D., Dr.h.c., Editor

Oostende, Belgium, J.P. Wayenborgh, 2002; $145.00, 305 pages.

The History of Strabismology is volume nine in the History of Ophthalmology series edited by Julius Hirschberg. A total of 21 volumes are anticipated with five more listed as “in preparation.” The first eight volumes include such topics as “The Eye and Man in Ancient Egypt,” “The Ophthalmoscope,” “Ophthalmology of the Ancients,” etc. Those “in preparation” include one by Dr. Eugene Helveston on “The Treatment of Strabismus” said to be due in 2003. I had not been familiar with these volumes before receiving the current History of Strabismology but hope to learn more about them, and I look forward to the volume on strabismus treatment.

In order to cover the topic of strabismology and its history, Dr. von Noorden has enlisted contributors from around the world and asked them to write about the history of strabismology as it relates to their part of the world. So, for example, Joseph Lang authors the chapter on “The History of European Strabismology” and Dr. Shinobu Awaya and Yoshimasa Watanabe author “The History of Strabismology in Japan.” Gillian Roper-Hall, D.O.B.(T.), C.O. was asked to write the chapter on “The History of Orthoptics: A World View.” The other chapters include historical discussions of strabismology . . . From its Beginnings to the Middle of the 19th Century, (Hans Remky), in the United States (Eugene Helveston), Mexico (Alberto Brown-Limon and Emma Limon de Brown), South America (Henderson Almeida and Geraldo de Barros Ribeiro), and Australia and New Zealand (William E. Gilles).

Each of the chapters dealing with a specific area of the world has a wealth of information about the people and their contributions to our knowledge in this field. The history of the various organizations that are devoted to strabismus are also included in each area. The history leading to the formation of the European Strabismus Association (ESA), the International Strabismus Association (ISA), the American Orthoptic Council (AOC), the American Association of Certified Orthoptists (AACO), and the American Association for Pediatric Ophthalmology and Strabismus (AAPO&S) are all detailed.

A significant effort was obviously made by the authors to find photographs or illustrations of the important contributors to the field.

I found the book to be fascinating and a “good read.” I imagine it will be of greatest interest to the older members who will undoubtedly remember many of the people that are referenced, but it should also be of interest to our younger colleagues who will want to know more about their heritage in strabismology. Dr. von Noorden and his coauthors should be congratulated on their contribution to our specialty!

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I really enjoyed reviewing this textbook. It is stuffed with practical information and has quite an interesting layout. If you are into learning style differences you will be impressed with the variety of differently formatted material on the written page. It is well worth familiarizing yourself with the style of the book prior to embarking on a complete reading or even before seeking information on a particular topic within a chapter.

The text itself is divided into five major parts [I–V], each with one to five chapters and an abundance of subheadings replete with graphs, anatomic drawings, and schematic diagrams. Many chapters have lengthy text tables including such things as the risk groups and mechanisms, causes, ophthalmoscopic and clinical findings, imaging features, and symptoms and management relating to a particular topic. Highlighted boxes are a nice addition to the chapters reviewing such topics as “Snellen Distance Visual Acuity Testing,” “Using the Pinhole,” and “Confrontation Field Testing for Hemianopic and Altitudinal Defects.” The chapter on “Pupillary Reactions” has a series of such highlighted summary boxes: “Swinging-light test: proper technique” followed by “Swinging-light test: errors in technique” and “Swinging-light test: quantifying the results.” Decision making schemata of differential diagnosis and management of specific entities also form an important part of many chapters and include such topics as “Management of papilledema,” “Evaluation of bilateral central scotomas,” “Screening for alexia,” and “Screening for cerebral achromatopsia.” The style of prose is clear and concise with rationale for performing specific tests, explanations of different diagnoses, examples, questions, and discussion as to how to proceed in a very systematic approach. Each section ends with a short summary of salient points to consider. There are a generous number of illustrations, photographs both black and white and in color, MRIs and copies of visual field tests, all of which nicely compliment the text. Each chapter ends with extensive references and includes many publications not often read by many of us, such as Brain, Neurosurgery, Annals and Archives of Neurology, and the Journal of Neurology, Neurosurgery and Psychiatry, as well as the expected publications in ophthalmology and neuroophthalmology with which we are familiar.

I have to say that I was surprised and disappointed that this text had such a paucity of information on amblyopia.

A final section of the book, Part VI, has two chapters: one with case histories and questions in multiple choice format and a second of answers which not only give the correct answer but also include an explanation as to why each of the foils is not the correct response. These cases are a wonderful teaching/learning tool used to incorporate didactic learning and clinical teaching and they refer the reader back to specific pages in the preceding text. The index is well cross-referenced and permits one to find things quite easily.

Medical students as well as residents and faculty in ophthalmology and neurology will appreciate Neurology of Vision. As an orthoptist or orthoptic student,
many sections will be new and useful: the text clearly describes and illustrates such difficult topics as the occipitoparietal and occipitotemporal pathways, and such interesting topics as the difference between illusions and hallucinations. Other sections that will be of particular interest include: “optical components of how the human visual system works,” “pupillary reactions,” testing and interpretation of visual fields, visual acuity, color vision, dark adaptometry, ERG, VEP, and the discussion about “non-organic visual disturbances.” Although most of these sections will be familiar topics, some of the descriptions and ways of interpreting the tests have a slightly different approach. Check out the pupil-splitting prism test.

Jonathan Trobe continues to be an excellent teacher who makes Neurology of Vision an interesting and exciting topic for all who will read it.

Leslie Weingeist France, C.O.