

between ophthalmology and neurology, is of particular interest and relevance. Overfilling of the veins is stressed as the most important single evidence of early papilloedema, hyperaemia and blurring of the disc margins on their own being unreliable criteria. By the time the disc is elevated it is stated (rather surprisingly) that haemorrhages and exudates are invariably present, making the diagnosis of papilloedema certain. There are some splendid photographs to show the value of fluorescein fundus studies. The various forms of pseudopapilloedema that cause diagnostic difficulty are described in the next chapter, which deals with congenital anomalies; and in this section, as well as in the next on hereditary and degenerative diseases, there is much material of interest to the paediatrician.

Volume two covers many subjects germane to, but reaching well beyond the confines of, neuro-ophthalmology, particularly in the chapters on metabolic and toxic diseases as well as infective, vascular, and myopathic disorders.

The third volume is largely devoted to space-occupying intracranial lesions and tumours within the orbit, which, although infrequent, are of considerable neuro-ophthalmological interest. The photographs are illuminating and occasionally gruesome. And there are final chapters covering trauma, psychoneurosis, and neurotoxic affections, which share the thoroughness and readability that characterizes the whole book. The price of this work is indeed formidable, but it is undoubtedly the best in its field.

P. D. TREVOR-ROPER.

As Old as One's R-E System

The Immunologic Theory of Ageing. Roy L. Walford. (Pp. 248; illustrated. Dan. Kr. 97.50.) Copenhagen: Munksgaard. 1970.

What is ageing that it deserves an "immunologic theory" to explain it? If it is a definable entity why does the author not define it? Instead he contents himself with dismissing the Gompertz equation as "simply descriptive" and as an "approach that has not led to a meaningful experiment." Is it really plausible that a single theory can explain the wide variety of ways in which so complex a piece of machinery as the animal body can fail?

The theory itself is not stated until the very end of the book: "Ageing is due to somatic cell variation, particularly of those factors which determine self-recognition patterns among cells. In higher animals the cells of the reticulo-endothelial system are especially involved . . . The initial cause of the somatic cell variation . . . may be further stimulated by auto-catalytic processes etc." There is seemingly a wide gap between this theory and "ageing" as the term is used in common parlance, and the author only partly succeeds in bridging this gap. Nevertheless, he provides a readable, well-documented, and maturely critical text that succeeds in being informative and thought-stimulating because it is written from an unusual viewpoint.

FRANCIS J. C. ROE.

Magnification for Neurosurgery

Microsurgery: Applied to Neurosurgery. M. G. Yasargil. (Pp. 230; \$13.50.) Academic Press. 1970.

Although the operating microscope has been part of the standard equipment of otological surgeons for many years, it is only quite recently that magnification has been used for neurosurgery. At the present time the possibilities of these new techniques are still being explored, not only for established procedures such as trans-sphenoidal hypophysectomy, but for the whole range of intracranial and spinal operations. Apart from increased delicacy of manipulation and increased precision in dealing with small nerves and vessels, one of the chief advantages is the brilliant and even illumination of the operative field, however small or deep the area of access may be. Furthermore, the use of television, cine and still cameras, or viewing tubes makes it possible for others to see what is being done and to make a record of the procedure.

Although the pioneer work in microneurosurgery took place in America, Zürich was soon established as the European centre to which neurosurgeons come to learn and study developments. This book summarizes what they come to see. It begins with a description of the microscope and instruments, and explains the adaptations which have been made necessary by circumstances peculiar to neurosurgical conditions. It continues in the manner of a course of instruction by introducing methods by which microtechniques can be learnt on animals before applying them to man.

Some of the operations considered in detail have yet to be proved to be worth wider adoption, but anyone with an open mind can see the potential for the development of new areas of research, new methods, and the treatment of conditions which are not now amenable to therapy. Vascular surgery is given two chapters and is followed by others on intracranial and intraspinal tumours and other lesions. Trans-sphenoidal operations and operations on the seventh and eighth nerves are described. The book ends with a chapter on anaesthesia in microneurosurgery and an appendix containing valuable information about the source of instruments and materials that are used in Zürich.

PETER H. SCHURR.

Lecture Notes on Gynaecology

A Synopsis of Gynaecology. By Kelvin A. McGarrity, F.R.C.O.G. (Pp. 381+viii; 69s. 6d.) London: Angus & Robertson. 1969.

Yet another textbook of gynaecology appears on the scene, this time from Australia. The author has utilized lecture notes from a long and successful teaching career to make a comprehensive synopsis of the subject suitable for undergraduates and as a quick reference book for postgraduates not specializing in gynaecology.

In 31 chapters the book covers every aspect of gynaecology from a short chapter on cytotoxic drugs to an excellent and up-

to-date one on hormones. The index runs to 22 pages, which shows the detail included in this synopsis. There is one striking omission, however—the complete lack of any drawings; an unusual omission when visual aids are now so extensively used in teaching. Lists, however complete, make for heavy reading. It is much easier to see a Hodge pessary in situ than to read a description of it and its mode of insertion and action. Brevity can occasionally lead to misunderstanding as in the chapter on disorders of menstruation. It is here remarked that uterosalpingography will demonstrate, among other lesions, carcinoma of the cervix and body of uterus; this could be but a short step to the unwary reader believing that a hystrogram and not curettage is used to diagnose carcinoma of the uterus.

This book will help many students in preparation for their final examinations. It suffers, however, from a too literal transference of the lectures to the page, losing in transition the variety of expression of the spoken word. This is the first edition, however, and as several now-accepted classics started in a similar fashion these criticisms may well be overcome in subsequent editions.

D. L. MORRISON.

Selection and Interpretation of Laboratory Tests

Guide to Clinical Laboratory Diagnosis. John A. Koepke. (Pp. 310; 60s.) Butterworths. 1970.

The author's aim in writing this book is to help the student to select and interpret laboratory tests intelligently. It is therefore written from a "patient-oriented" approach, rather than from the more traditional one based on underlying systems or physiological mechanisms. Chapter headings name a symptom and the laboratory investigation of this is discussed; since all branches of clinical pathology are covered, and since a short clinical differential diagnosis is also included it is, perhaps, inevitable that the quality is rather patchy, and that some of the statements made are open to question.

The idea of a book of this kind is admirable, but in practice its execution is difficult. The author must either assume knowledge of the theoretical background of the investigations, or must depart from the purely differential diagnostic approach by including a discussion of this. If such a discussion is included it should probably be in a separate section. In this book an attempt is made to amalgamate theory and differential diagnosis, and this leads to some uneasy partnerships. For instance, the chapter on "Chest Pain" contains a discussion on all diagnostic enzymology, starting with serum alkaline phosphatase, while that on "The Acute Surgical Abdomen" starts with gastric analysis.

The author's strictures on the necessity of interpreting tests in the context of the clinical condition of the patient, and on the dangers of discarding unexpected results as "laboratory errors," as well as his "Epilogue"—"When you hear hoof beats think of horses, not zebras"—are necessary