
In the past decade ophthalmology has seen a change in cataract surgery away from the intracapsular method back to the extracapsular but with all the advantages of operating microscopes and sophisticated technology now available. This change has been prompted by the need for good fixation for lens implants which the extracapsular method provides. This slim volume is aimed primarily at the practicing surgeon who wishes to make this change (and a very painful one it can be!) but is also of value to the senior resident more likely to have been brought up on extracapsular surgery. The author is a meticulous and skilled surgeon with a large experience of the extracapsular technique and he has spent a lot of time teaching other surgeons. This experience shows up to advantage in the book he has written. A separate chapter is devoted to each stage of the operation and emphasis is correctly placed upon the importance of performing each step correctly in order to prevent complications later on in the procedure. Thus, a chapter is devoted to anterior capsulotomy, another to removal of the nucleus, removal of the cortex and so on.

Descriptions of the finer points of technique are exhaustive and the illustrations (all in black and white) by the author himself are excellent. Anybody starting to undertake the extracapsular technique should read this book and surgeons who are having problems with their technique can be assured that all the hazards involved are discussed in detail and a remedy given.

A book such as this must of necessity be a personal view and this one is no exception. No mention is made of mechanical methods of cortex removal and there is little description of lens types. One of the difficulties in writing books about a field which is advancing as rapidly as implant surgery is that certain parts of the technique may change between the book being written and published. In the last four years much emphasis has been placed upon the importance of fixation of the implant loops within the capsular bag. Both clinical and histological evidence support the view that fixation in the bag rather than in the ciliary sulcus gives better long term results by preventing ciliary erosion and the complications thereof. Small but important changes in method have therefore been introduced by way of the so called ‘inter capsular’ technique whereby the capsule is left almost intact until after the insertion of the implant and a capsulotomy is performed at the end of the operation. This method is not discussed beyond the statement that the author prefers ciliary sulcus fixation and this is a serious omission. However, in spite of these quibbles most of this book is still completely relevant. One or two of the chapters, such as the one on removal of the cortex, are quite excellent. It can be thoroughly recommended to the surgeon wishing to begin extracapsular surgery or who is having difficulties with the technique (and that includes most of us). The modest sum involved might save many sleepless nights.

A. Lyne
Kingsley House I, Barnaek, Stamford, Lincs PE9 3ED.


This is the third volume of a series designed to look critically at important issues in transplantation, and the editors have selected topics of current interest written by authoritative workers.

The first contribution is devoted to chemical immunosuppression, obviously of central importance in all organ transplantation except between identical twins. The subject is handled sensibly although I was surprised to see a whole page devoted to nitidazole, one of many drugs that was hoped to be useful but found to be ineffective.

The second chapter is specifically concerned with cyclosporin measurements and their interpretation in relation to efficacy and nephrotoxicity. The subject is critically reviewed and the authors conclude that even when all the technical difficulties of blood level measurements are overcome, the information derived is only one indicator and that the whole clinical picture is the most important background from which to plan cyclosporin therapy.

The next chapter is more theoretical: a discussion of activation and expression of allograft immunity by Lafferty and colleagues. The significance and importance of many of the in vivo models of transplantation immunity are difficult to visualise separated from the whole living organism. A reaction that may seem to be predominant in vitro may be unimportant in the behaviour of the patient towards his graft. Nevertheless, basic models without the interference of other reactions may shed light and this chapter is certainly of interest to the practical transplanter as well as the more basic scientist.

In some patients antibody rejection of grafts predominates over cell mediated reactions and the fourth chapter is concerned with the relevance of antibodies in transplantation.

There are then two chapters on pancreas transplantation; the vascularised pancreatic graft where clinical results are beginning to improve and the islet and