## PRIMARY ANGLE CLOSURE GLAUCOMA

A S M Lim, R S Lowe 1988. P G Publishing

Primary Angle Closure Glaucoma often referred to as "Acute Glaucoma" occurs commonly in Singapore. As it is an ocular emergency, it is imperative that medical practitioners are able to recognise this eye condition. Failure to do so can result in blindness. In this respect, the authors, Dr. R Lowe and Dr A Lim have provided a book which deals with this subject in a clear and concise manner. The photographs are superb and makes reading, particularly to the non- ophthalmologist, so much more meaningful. For the trainee and junior ophthalmologist, the practical tips on the surgical techniques are extremely helpful. The authors are to be congratulated for a beautiful production. For the general practitioners it may be too detailed. Nevertheless, the essentials of this "blinding" eye disease are easily grasped. For eye trainees and ophthalmologists, I highly recommend this book to them.

Dr V S H Yong

## **INTRODUCING DIAGNOSTIC RADIOLOGY** F Y Khoo 1988 P G Publishing.

This small book with 178 pages is easily readable because there are many photographs of X-rays so that the text is quite short. Although photoradiographs do illustrate the points made in the text and the descriptive legend accompanying each figure, some are poorly reproduced; for example, figures on pages 45 to 47 trying to show the calcified pineal gland, chest radiographs on page 85 trying to point out a resected rib with utter failure and on page 86 hoping to demonstrate what miliary pulmonary tuberculosis should look like. I am sure it is no fault of Dr Khoo and his X-ray films but trying to reproduce good X-ray films onto slides for projection is often already an unrewarding endeavour, what more of printing out X-ray films? Perhaps subtle abnormalities showed be arrowed to catch the reader's attention.

What is an orthopantomograph? Did you know that a set of 14 films is required to show all the teeth? Why is the chest X-ray on page 95 reversed? What is a pantomograph? Then, there are so many eponyms which could fill a glossary page - Caldwell, Reid, Water, Law, Towne, Stenver, Thoms, Colcher-Susman, etc. Being an introductory book, no index is provided. However, in its place there appears an appendix listing the various views of shooting X-rays. But the usefulness of this appendix may be enhanced if there is some advice to the practising clinician as to when to order what views. Perhaps this could be tabulated by clinical specialty, eg. ENT surgeon would most likely order the following views for the following reasons. Could metacarpal index be explained, please? Another usefulness of this book is as revision for the undergraduate and some postgraduate exams where radiographs may be flashed on the screen and the candidate is supposed to spot abnormalities. Certain "spot" films are beautiful, others a little "archaic" but still worth noting and preserving in the memory.

A little chapter on X-ray pearls and pitfalls would be worthy of consideration given the author's wealth of experience. What is senile emphysema? And is it not most unusual to diagnose a Pancoast's tumour in a female only 27 years old (page 107) or a patent ductus arteriosus in an old man of 72 years (page 102)? Pancreatic calcifications are common in Indians but is it because of alcohol or the race?

Annotated line diagrams are easy to comprehend but unfortunately these only appear on one page – page 75. More would be didactic especially if illustrative arrows are considered inappropriate in some situations.

Overall, the book is affordable and well-targetted as it says in the preface, to students, medical officers, radiographers, nurses and physiotherapists. Nonetheless, more senior staff can still glean insights to common X-ray abnormalities. Specialized radiology is omitted on purpose. Reading lists provided are worthy of consideration. The typographical errors here and there do not detract from the noble aims of the book which are, to a large extent, accomplished.