

## BOOK REVIEWS : BOEKBESPREKINGS

### HIPERTENSIE

*High Blood Pressure*. 2nd ed. By G. Pickering, Kt. F.R.S., M.D., F.R.C.P. Pp. viii + 717. Illustrated. £6.0 0. London: J. & A. Churchill. 1968.

Die tweede uitgawe van hierdie leersame werk oor die aard, komplikasies en terapie van hipertensie tref weer eens deur breedvoerigheid getemper met helderdenke en ondersteun deur soms briljante studies in kliniese fisiologie.

Die agtergrond tot die werk is natuurlik die skrywer se opvatting dat hipertensie 'n kwantitatiewe afwyking van die norm is en dat die oorerflikheid van die toestand aan poligenetiese faktore onderworpe is. Hieruit vloei dit dan ook heel spontaan dat die patofisiologie van die verloop van hipertensie kwantitatief aan die bloeddruk gekoppel is. Die gunstige verhouding tussen die insidensie van komplikasies en effektiewe terapie word beklemtoon in sowel die benigne as die maligne fases van die toestand. Die farmakologiese en chirurgiese behandeling van spesifieke tipes sekondêre hipertensie word ook nou in perspektief geplaas met ootmoed gebore uit onderwinding. Die skrywer oortuig met sy stelling dat effektiewe terapie, van watter aard ook al, deurslaggewende resultate lewer.

Die huidige omvang van ons kennis word op so 'n manier hier uitgestal dat die praktiserende geneesheer op 'n prakties wetenskaplike manier 'n begrip van die prognose en terapie van hipertensie kan vorm. Verder is daar ook vir die patoloog, die genetikus, die fisioloog en die ewigdurende student veel grond vir bepeinsing.

A.R.B.

### DIABETES

*Diabetes and the Eye*. By F. I. Caird, D.M., M.R.C.P., A. Pirie, M.A., Ph.D. and T. G. Ramsell, M.A., M.D., D.O., F.R.C.S. Ed. Pp. x + 230. Illustrated. £3.3.0. Oxford: Blackwell Scientific Publications. 1968.

This nicely produced and well-illustrated volume seems a little too cursory for the expert and too detailed for the casual reader. For instance, the paragraph on racial differences in diabetic retinopathy is extremely sketchy and uncritical. The authors do not hesitate to express their opinion on controversial issues, even when the data they survey are, of necessity, not their own. They dogmatically aver that retinopathy is a true complication of diabetes and not an integral part of the diabetic syndrome, doing scant justice to the opposite view. They are clear that good control of diabetes reduces the likelihood of retinopathy developing (especially good control in the early years), but that the standard of control for lens extraction makes no difference to the complications of the procedure.

The chapter on the natural history of retinopathy is clear and valuable, containing some original work. The chapter on the metabolism of the lens is also very good and summarizes recent work suggesting that accumulation of sorbitol is the damaging factor in diabetic cataracts. There are ample references though several are omitted.

In all, I believe that ophthalmologists and physicians with particular interest in diabetes might like to have this book, and it should certainly be acquired by all medical libraries.

W.P.U.J.