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## Preface

Pediatric retinal disorders include a wide range of highly diverse disease processes. They range from the relatively straight forward, such as non-accidental trauma, to the very complex and confusing array of hereditary dystrophies. Few clinicians deal with all of these entities on a frequent basis, yet ophthalmologists who care for children will undoubtedly encounter nearly all of them occasionally. This fact makes a single comprehensive resource especially valuable. We believe this book represents that resource.

In developing a design for this text, we wished to address several points. The first issue was this need for a single comprehensive resource. But in dealing with this diverse pathology over the years, it was apparent that there often seemed to be a pediatric trained perspective distinct from the view of the retinal surgeon. Material written by authors from one group might be quite different from that written by members of a different group. We also noted that little published material attempted to synthesize basic science with clinical information. We wanted to create a text that would focus as much on pathogenesis as on natural history and that could merge laboratory and clinic. Thus the aim of this text is to provide a comprehensive single resource for all these diverse entities that would unite the different perspectives of pediatric and retinal surgeon, laboratory and clinic, and pathogenesis and clinical presentation.

We have attempted to accomplish this broad goal by careful author selection. Our contributors are a solid mix of pediatric and retina trained individuals. We also brought together many well known and well trusted clinicians, surgeons and clinician scientists with major laboratory research programs.

Each author or group of authors was given wide latitude in how they approached their assignment. Superficial consistency designed to make the chapters look alike was neither desired nor obtained. We did encourage comprehensiveness and real science. We appreciated uniqueness. This emphasis of substantive unity over the superficial has produced a book with chapters of quite different looks. As an example, Dr. Gallie and company have produced a retinoblastoma chapter dramatically different from the norm. Each chapter will stand on its own. The book may be read cover to cover, but we expect few people will do this. We think most texts are used sporadically and in piecemeal fashion. Readers want to know about one disease at a time. And they would like to find it all in one place, including the wider primary references.

Even though our overriding concern was comprehensiveness, this was not always feasible. The critical reader will notice a difference in depth among the chapters. This is partly explained by the inclusion of material that focuses on a primarily adult disease, such as diabetic retinopathy, in order to be comprehensive in breadth rather than depth. The breadth of the book is obviously also purposeful. We include conditions

ranging from the optic nerve to uveitis as well as extensive chapters on embryology, anatomy, physiology, and electrophysiologic testing.

We hope the reader will use this text as a frequent companion. If we have achieved our goals of a comprehensive text in both depth and breadth, of unifying the lab and the clinic, and in uniting the pediatric and retinal specialists' perspective, the reader should come back again and again.

We would like to extend our thanks to all of our contributors. It has been a long, winding road and they have done a great job. We also appreciate the staff at Springer who have been extremely supportive. Our families deserve a thank you for supporting, or at least tolerating, the additional time demands of an academic career. Finally, we would like to acknowledge the work of our ever present and never complaining assistant, Mrs. Elaine Taylor. Without her capable and dependable talent, this book could not have been done. She has always been our right hand. Thank you all.

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