#### From academe to the bushveld

**Hope Beyond the Shadows.** By Ian Spencer. Pp. 238. R59,95 + VAT. Westville, RSA: Forest Publishers. 1992.

Professor Ian Spencer was the first professor of community medicine at UCT, and this is his story. One of medicine's 'rolling stones', he had a varied and colourful career in medicine ranging from the groves of academe to the depths of the bushveld. Few doctors can have amassed his wealth of experience or managed to remember and write it

down so well.

His book is by turns funny, sad, hilarious, tragic and thought-provoking. It brought home to me just how much young doctors are missing if they have never been faced with the practice of medicine in a rural setting with little other than their own quick wits and common sense to help them. Once survived, such an experience will confer a measure of self-confidence to last for the rest of life, not to mention providing an inexhaustible supply of after-dinner anecdotes or, as in this case, material for a book.

N. C. LEE

### Healthy running

Lore of Running. 3rd ed. By T. Noakes. Pp. xiv + 734. Illustrated. R95. Cape Town: Oxford University Press. 1992.

I had originally intended to send this book to another reviewer, possibly someone who knew a little more about running and keeping fit than I do, since I am unfortunately (as I now realise), one who gets up in the morning and runs around the block before pushing the block back under the bed. But as I browsed through it, I found myself getting more and more absorbed in it, mainly because of its sheer readability, and having found that over an hour had slipped by, I decided to review it myself.

The secret of this book's attraction is revealed by Tim Noakes in his preface to this third edition of his classic, in which he tells us that he is not a doctor or scientist writing about running, but rather a runner who has become a doctor and scientist because of his love of running. His enthusiasm for what is clearly his way of life shines through every sentence he writes. He is informative and entertaining, but never boring, and although he gives us a great deal of anecdotal information, it never overwhelms the soundness of his underlying physiological and medical approach.

If I wish anything about this book, it is that it will be read and acted upon by those responsible for the physical training of our young people who so often do considerable damage with their 'no gain without pain' philosophy. They should rather consider the dictum of Sir William Osler who once observed that the most that any teacher could hope for was to generate enthusiasm for the subject among students; and that is what this book is really all about enthusiasm. Far better to generate enthusiasm for running and physical health that will carry on through life than to force youngsters to train until they drop so that they cease all exercise the day that they leave school. As G. K. Chesteron once wrote, if a thing is worth doing, it's worth doing badly, so - see you on the road.

N. C. LEE

# Claims for compensation

Compensation Claims: Insurance, Legal and Medical Aspects. By Dr M. Sim. Pp. 250. \$30. Victoria: Emmess.

This highly useful book was written by a Canadian psychiatrist with many years of practical experience of assessing claims for compensation, diagnosing disability and testifying in court. The book contains 27 chapters on a wide variety of subjects that possibly defy classification in an altogether logical system, but are set out in three main sections, namely: (i) insurance, (ii) legal aspects of compensation, and (iii) medical aspects of compensation.

The author not only describes practice as he has encountered it over the years, but also offers a good deal of constructive criticism, particularly of the legal system, legal procedures and lawyers' attitudes and practices. He has not hesitated to draw attention to abuses in regard to compensation claims, of which lawyers and doctors make them-selves guilty. The book contains a number of interesting philosophical thoughts on the interrelationship of law and medicine.

The book will be of direct practical interest to doctors and psychiatrists called upon to examine patients who are claimants for compensation, be it under insurance policies, workmen's compensation or third-party schemes - such as is provided for in South Africa by the Multilateral Motor Vehicle Accidents Fund Act of 1989 - or for personal injuries caused by the perpetration of civil wrongs ('torts' in English-law terminology, 'delicts' in South African terminology). The author has given many useful tips on the proper approach to a case, the avoidance of pitfalls, and giving expert evidence in court. The key to successful practice, apart from the obvious requirements of thoroughness

and sound knowledge, is to maintain objectivity at all times.

The adversary system practised in countries where (English) Common Law civil procedure prevails, and especially aggressive cross-examination, which is a feature of that system, may induce expert witnesses to become too partial to the side that calls them. Cautions the author, wisely: 'To be engaged by a lawyer does not mean that one has sold one's soul . . . It is nowhere written that once a doctor enters court that she must abandon her professional

integrity' (p. 197)

The South African reader in using this book should bear in mind that there are substantial differences between Canadian law (the system essentially commented upon by the author) and South African law. To mention only a few: we have no juries; theatrical performances by a lawyer in court will have no effect; our lawyers are not entitled to work on a contingency basis as far as fees are concerned; we do not as yet have any 'professional' medical expert witnesses; our courts are (sensibly) conservative when it comes to the making of awards; punitive damages are not awarded in personal injury suits brought on the basis of negligence; we do not have no-fault 'product liability' in our law of delict; in principle there is no liability for personal injury unless fault is proved, and the onus of proof rests upon the plaintiff.

A feature of this book which will delight feminists is that the author decided to use the feminine 'she' or 'her' instead of the usual masculine when referring to lawyers, judges,

doctors, plaintiffs and defendants.

S. A. STRAUSS

### Endoscopy

Techniques in Therapeutic Endoscopy. 2nd ed. By J. E. Geenen, D. E. Fleischer and J. D. Waye. Pp. 250. Illustrated. \$119. London: Gower Medical. 1992.

Since the first edition of this book on the practical aspects of therapeutic endoscopy 4 years ago, the field of interventional endoscopy has expanded enormously. Improvement in both endoscopy and auxilliary equipment has allowed leaders in this field to explore new areas such as the pancreas and small bowel.

This book is aimed soley at the practical aspects of interventional endoscopy, and is covered superbly in text and illustration by some of the most experienced gastro-enterologists in the USA. Seven subjects are covered, including two new additions on interventional procedures on the pancreas and the technique of enteroscopy. What makes this book particularly useful is the detailed description of 'how to do it' complemented by graphic illustrations. The authors also go further than just describing the step-by-step procedural technique by giving invaluable hints on how to overcome technical problems, based on their vast experience. To keep the book practical, the authors deliberately avoid detailed descriptions of results and references.

Although this category of book will never replace handson experience supervised by expert mentors, it certainly will facilitate the acquiring of new skills in this technically demanding field of gastro-enterology. It is strongly recommended for the trained diagnostic endoscopist who is embarking on the field of therapeutic endoscopy. Even experienced interventional endoscopists should benefit greatly from this state-of-the-art book.

P. C. BORNMAN

# GIT motility disorders

Motility Disorders of the Gastrointestinal Tract: Principles and Practice. By Sinn Anuras. Pp. xii + 465. Illustrated. \$122,50. New York: Raven Press. 1992.

The motility of the gastrointestinal tract is a field characterised by poor correlation between science and clinical practice. This book does an admirable job in bringing the

two together in a clearly written, comprehensive account of the underlying physiological processes and practical reviews of motility problems as diverse as inherited visceral neuropathies and peptic ulcer disease.

The first section of the book discusses the underlying physiological processes and gastrointestinal motility without losing itself in a quagmire of detailed motility recordings which confuse all but the true enthusiast. Included in this section are authoritative views of methods for measuring motility from simple barium studies to complicated electrographics recordings. A good background is given to enable clinicians to decide which tests they should be doing, their reliability and the pitfalls of their interpretation when investigating motility disturbances. In the section on motility diseases the breadth of review is impressive. Among the diseases reviewed are congenital abnormalities, connectivetissue disorders, irritable bowel syndrome, diabetes mellitus, neurological diseases, viral infections of the gastrointestinal tract, constipation, and the normal fare of motility clinics - oesophageal disorders.

In summary, this book is highly recommended to everyone involved in practical gastroenterology, and the dedicated motility expert who might well find the chapter on motility disorders of the biliary tract a challenge to his recording abilities.

J. P. WRIGHT

### CT in urology

Computed Tomography in Urology. By H. H. Schild, F. J. Schweden and E. K. Lang. Pp. xviii + 381. Illustrated. DM180, Stuttgart: Georg Thieme Verlag. 1992.

While the strongest aspect of this book is its replication of many superb CT scans with easy-to-follow legends, the authors try to do much more. Chapter one on CT technique is a good introduction on the principles of computerised tomography for the non-radiologist. The third chapter on CT anatomy is perhaps the best, demonstrating well the normal anatomy seen at various levels. In fact it is so good that it may startle readers not familiar with CT imaging of the abdomen, and will certainly allow the reader to look at CT scans intelligently. Hereafter, each organ is covered in detail with, once again, superb figures demonstrating a great variety of pathological conditions.

Extensive discussions on clinical and pathological aspects and treatment modalities for urological conditions are presented, replete with references. This part of the text is generally well up to date and easy to read. However, perhaps they try to do too much, in that the book cannot, and should not, replace a standard urology text. An example of this would be the section on clinical aspects of benign prostatic hyperplasia where simplistic statements relating symptoms to the 'extent of organ enlargement' would surely be questioned by most urologists.

However, this book deserves a place in university libraries and radiology departments of teaching and service hospitals. It must be viewed as a reference book. Although the examples shown will be of interest to the keen general practitioner, allowing the untrained to enjoy interpreting the CT X-ray plates, rather than just reading the radiologist's report, it is doubtful whether the expense can be justified.

Perhaps a danger of this book is that the reader may conclude that CT is the primary diagnostic modality for a number of conditions for which there are simpler, less expensive and sometimes more reliable investigations. A rather extreme example of this would be CT diagnosis of hydroceles! In conclusion then, I can recommend this book to radiology and perhaps urology registrars and departments with an interest in the subject.

#### F. J. ALLEN

Seldom can it be said by the reviewer of a medical work 'I could hardly put it down', but this book is an exception. It is written mainly by past and present staff of the radiology

and urology departments of the Johannes Gutenberg University at Mainz. The mutually profitable relationship between the two departments and the research and development sections of major firms are apparent from the excellence and diversity of the information offered and images displayed.

To set the scene, some technicalities behind CT imaging are explained simply enough for the average clinician to comprehend. Then follows a useful chapter devoted to anatomy relevant to CT techniques.

Subsequent chapters examine the role of CT in solving diagnostic and therapeutic problems, but the contributors are never oblivious to its limitations, and alternative diagnostic procedures are suggested when appropriate.

As with many books produced by German publishers, there is a set format to each section. The introduction provides a succinct clinical description of the disorder in accord with current orthodox urological concepts. Then follows a brief outline of the diagnostic and imaging issues, and the section dealing with CT itself illustrates every aspect with a huge selection of images from around the globe. There are enough fascinating rarities to satisfy the CT voyeur, without compromising fundamental imaging issues. Finally, valuable suggestions are offered to aid the clinician make a diagnosis and plan treatment.

All the chapters are good, but those dealing with cystic renal disorders, renal tumours (adults and children), and CT in the diagnosis of retroperitoneal and nephrological disorders are outstanding. Two short, instructive sections devoted to interventional CT and CT in postoperative problems are informative but the cost of CT has not encouraged its use for these purposes locally. CT in gynae-cology and a well-constructed chapter on the still-evolving role of magnetic resonance imaging in the practice of urology are useful inclusions.

The occasional spelling error in no way detracts from the sheer pleasure of handling and reading this quality work. It should be regarded as essential reading and an indispensable reference for urologists, nephrologists and radiologists. If you are serious about the quality of your practice, this one's for you!

H. M. DU PREEZ

## Ear and temporal bone surgery

Surgery of the Ear and Temporal Bone. Ed by J. B. Nadol jun. and H. F. Schuknecht. Pp. xi + 480. Illustrated, \$206.50. New York: Raven Press. 1992.

The writings of Professor Schuknecht are legend and his published studies of the microstructure of the ear in health and in disease are pillars of otological knowledge. In this textbook, which he edits with Professor Joseph Nadol, are descriptions of the surgical techniques and the clinical and pathological fundamentals essential to modern ear surgery. Eleven sections cover a total of 39 specific topics concerning otologic examination, surgery of the external ear, tympanic membrane, middle ear cleft, facial nerve and lateral skull base, and the surgical managements of conductive and sensorineural deafnesses, vertigo, temporal bone trauma and tumours, and congenital malformations of the ear. The succinct text is liberally supported by explicit photographic and line-drawn illustrations, many of which are in colour.

It is difficult to fault this work, for what it lacks in specific information is countered by liberal referral of the reader to published material. The preface explains that this is an attempt: 'to document a tradition and school of otologic surgical management that has evolved at the Massachusetts Eye & Ear Infirmary'. As such, there are what others elsewhere might consider textural deficiencies, for example posterior canal surgery for benign positional vertigo. Irrespectively, this work will be a very valuable addition to any otologist's personal library, especially that of the aspirant younger surgeon, for on the subject of ear surgery he will not purchase a better book or receive a better gift.

### Anti-epileptic drug prescribing

A Practitioner's Guide to Optimum Use of Antiepileptic Drugs. By R. Miller & M. L. McFadyen. Pp. v + 90. Randburg: Medical Education Services on behalf of the Medicine Group (sponsored by Parke-Davis). 1992.

This pocket-size handbook is the work of two pharmacologists whose theoretical knowledge has been tempered by extensive practical experience in clinics for the management of persons with epilepsy. Their short treatise contains a wealth of information about the drug treatment of epilepsy and should be of immense value to clinicians.

The first chapter deals with general therapeutic principles. The authors caution against the hasty institution of anticonvulsant medication after an initial seizure. They also condemn the precipitate introduction of a second drug when full seizure control is not achieved with one anticonvulsant. Information is provided about interaction between anticonvulsants and oral contraceptives and the use of anticonvulsants during pregnancy and lactation.

The second chapter is devoted to the pharmacokinetics of anticonvulsant drugs. Terms such as 'bioavailability', 'volume of distribution', 'steady state' and 'half life' are defined and their relevance to dosage and dosing interval explained. A discussion of therapeutic drug monitoring is followed by instruction, with formulae and examples, in the calculation of loading and maintenance doses of anticonvulsants.

The third chapter contains detailed information about the individual properties of the eight anticonvulsant drugs now available on the South African market.

This is not a book for the medical school library or even the academic's bookshelf. It is intended for quick reference in the clinical setting, and so belongs in the consulting room top desk drawer of every doctor who has patients with epilepsy. Adherence to the guide-lines it provides cannot help but improve their quality of life.

P. M. LEARY

#### Neurology

Neurologic Differential Diagnosis. 2nd ed. By M. Mumenthaler. Illustrated. Pp. ix + 178. DM68. Stuttgart: Georg Thieme Verlag. 1992.

Clinical neurological diagnosis is a prerequisite for the proper interpretation of the many tests, which, in its absence, threaten the management of patients and reduce the status of the profession. As a potential contributor towards this praiseworthy end, this book is to be welcomed, but I found early discouragement in the opening sentence of the opening description of syndromes: 1.1 Cerebral syndromes: Table I A lists symptoms and signs that indicate a localised process, disease, or dysfunction of the brain. The next sentence lacks clarity and the third invites us to compare Table I B with Table I A, in which we are reminded that hemisymptomas (sic) are 'consistent with hemisphere disturbance'. The items on these lists are expanded in several paragraphs which lead us, haltingly, to Table II.

English-speaking readers will be surprised at some of the anatomical terms whereby, for example, the globus pallidus is squeezed into the mesencephalon, whereas we equate that structure with the mid-brain, and the G. parahippocampus rubs shoulders with the occipitotemporal G., thereby transgressing current attitudes to nomenclature. Oculomotor apraxia is difficult enough without being printed upside down, but there are useful notes in this and other sections, and the many illustrations are clear, informative, and clinically useful. This does something to retrieve this monograph from the abyss into which the opening paragraph appears to be leading — but I nevertheless cannot recommend it to English-speaking students for enjoyment and clarity ('Weakness can be a generalised manifestation of asthenia'). Expressions abound which leave us somewhat uncomfortable, such as 'a subacute injury is the antecedent' (of tetanus); or 'granulomas (of sarcoidosis) may clinically involve muscles'; or again 'the jumping Frenchman of Maine' would jump if the patient stretched (p. 129), whereas the condition was characterised by a marked and violent jump 'in response to sudden noise or startle', presumably a translator's error in confusing schrecken (startle, alarm) with strecken (stretch).

D. V. PHILCOX

### Temporal bone surgery

Anson-Donaldson: Surgical Anatomy of the Temporal Bone. 4th ed. By J.A. Donaldson, L.G. Duckert, P.M. Lambert and E.W. Rubel. Pp. xv + 546. Illustrated. \$162.50. New York: Raven Press. 1992.

The first edition of this now classic work was hailed as an oustanding contribution to the literature related to otological surgery. Twelve years have passed since publication of the third edition, which has now been further expanded to include additional sections on neuro-otology and on skullbase surgery. Only parts of the previous text have been altered and many of the old line drawings, so familiar to practising otologists have been retained, some with added accentuation of colour or contrast. The same three main parts of, 'The temporal bone', 'Developmental anatomy' and 'Adult anatomy' have been retained, but a fourth part, 'Dissection Guide', with step-by-step instructions in various surgical exercises has been added. Relevant as dissection is to the understanding of human anatomical topography, is such a dissection manual required or desired by every purchaser of this textbook?

For the older, experienced surgeon, who possesses a previous edition of this work, ownership of the latest edition is not vital to his practice. However, those who are treading early and faltering footsteps along the difficult and treacherous pathways of the temporal bone are strongly advised to purchase this latest edition. The final words of my own SAM7 published review of the last edition read '... this book has much to offer and should remain indefinitely as an invaluable source of information, at least to the practising ear surgeon'. Additions to this fourth edition have further increased its value.

S. L. SELLARS

# Declaration of Olympia on nutrition and fitness

The 2nd International Conference on Nutrition and Fitness met in Athens, Greece, in May 1992 under the patronage of WHO, FAO, and the International Olympic Academy, Ancient Olympia, to develop a declaration of aims and objectives resulting from the conference. This is an abbreviated version of the declaration. For more information: Artemis P Simopoulos, MD, The Center of Genetics, Nutrition and Health, 2001 S St NW, Suite 530, Washington, DC 20009; 202/462-5062.

- In developed countries, technological developments have minimised physical activity, whereas variety and availability of foods make dietary choice a personal but not always well-advised decision.
- In most developing countries, the nutrition problems are quite different. Dietary fat is already low and unrefined carbohydrate high, but the intake of energy, protein, and micronutrients is often inadequate. A bountiful, sanitary supply of all the foods that are traditional in these cultures