

## BOOK REVIEWS : BOEKRESENSIES

### THE CASUALTY DEPARTMENT

*The Casualty Department.* By T. G. Lowden, M.A., B.M., B.Ch., F.R.C.S. Pp. 278+viii with 170 illustrations. 37s. 6d. Edinburgh: E. & S. Livingstone Ltd. 1955.

*Contents:* 1. Sepsis and Antibiotics. 2. Common Septic Conditions. 3. The Septic Hand. 4. Skin Conditions. 5. Uncommon Septic Conditions. 6. The Closed Soft-Tissue Injury. 7. Soft-Tissue Injuries with Breach of Surface. 8. Skin Deficiency. 9. Burns and Scalds. 10. The 'Cold Case'. 11. Anaesthesia. 12. Organisation. 13. The Financial and Temperamental Background. 14. Disposal. 15. Legal Responsibilities. 16. Legal Protection. Conclusion. Appendices. Index.

In this book Mr. T. G. Lowden has succeeded in relating his vast experience of managing a Casualty Department in a clear, well-illustrated, concise book.

The author, through careful study and follow-up of cases, has formulated sound treatment for the various minor surgical complaints encountered in the average casualty department. The treatment suggested is based on sound principles, always with the aim in mind of practising correct surgery which will enable the patient to regain maximum function of the diseased or injured part in as short a time as possible. This is of the utmost importance in labourers attending with sepsis of the hand or soft-tissue injuries.

The author strongly deplors the routine use of antibiotics, which are so often administered to 'cover' bad surgery, and aptly points out that 'antibiotics are not intended to make it any easier for the surgeon, but are intended to make it better for him'.

Useful advice is also given on the organisation of a casualty department and the legal responsibilities of a casualty officer.

The management of a casualty department is often left in the hands of a young doctor with limited surgical experience. This book should act as a useful guide to such doctors, enabling them to practise correct surgery. It will also be of great help to the average general practitioner who is often called upon to deal with minor surgical complaints in his surgery, especially to those practitioners in country towns where the resources of a hospital casualty department are not so readily available.

The book is strongly recommended for students, house surgeons, casualty officers and general practitioners.

J.H.L.

### MODERN TRENDS IN OPHTHALMOLOGY

*Modern Trends in Ophthalmology.* Edited by Arnold Sorsby. Third Series. Pp. 346+xiv with 111 illustrations. London: Butterworth & Co. (Publishers), Ltd. S.A. Office, Butterworth & Co. (Africa) Ltd.

*Contents:* 1. Microscopy. 2. The Measurement of Aqueous Flow in the Experimental Animal. 3. Some Newer Aspects of Binocular Vision. 4. Some Current Biochemical Problems. 5. Optical Aberrations. 6. Diagnostic Criteria of Genetic Affections. 7. Slit-Lamp Microscopy of the Posterior Segment of the Eye. 8. Measurement of Diplopia Fields. 9. Various other Procedures. 10. The Nature of Malformations. 11. Current Aspects of Ocular Pharmacology. 12. Action of X-Rays and Radioactive Substances on Ocular Tissues. 13. Other Aspects. 14. Muco-Cutaneous Ocular Syndromes. 15. Ocular Aspects of Diffuse Collagen Disease. 16. Allergy. 17. Some Newer Clinical Entities. 18. Streptomycin and the Newer Antibiotics. 19. Cortisone and ACTH in Diseases of the Eye. 20. The Treatment of the Virus Diseases. 21. The Treatment of Hypertensive Retinopathy. 22. Present Status of Corneal and Retinal Surgery. 23. Vertical Muscles. 24.

Contact Lens Fitting—Limitations and Difficulties. 25. Some Surgical Technicalities. 26. Blindness in England and Wales. 27. The Visually Handicapped. 28. Trachoma as a Mass Problem. Index.

It is only 8 years since Arnold Sorsby edited the last of this series of Modern Trends in Ophthalmology, but the considerable developments in Ophthalmology during this period have made it necessary to publish again.

This volume is little more than half the size of the earlier two. In just over 300 pages a very wide range of subjects is covered, as indicated in the 28 chapters listed above. It is therefore not surprising that, in spite of the fact that each chapter is written by an expert of international repute, one is left wishing that some of the articles were a little fuller. On the whole, however, one is bound to admit that a great deal of comparatively recent information of a practical as well as theoretical nature has been crammed into these 300 pages. There is a small selected bibliography after each chapter which points to the major original works on each subject being discussed.

In the chapters on Optical Aberrations it is interesting to learn that night myopia to the extent of .2 diopters can occur in an emmetrope who becomes myopic in the dark.

In Current Aspects of Ocular Pharmacology, the mechanism of action of many of the newer drugs is discussed. Among these, attention is drawn to the fact that eserine, if instilled into an eye before D.F.P., will block the latter's action whereas, if the DFP is instilled first, a combined activity is obtained. In other words, the sequence in which certain drugs are used is important if a synergistic effect is to be obtained.

The use of radio-active isotopes in the localization of intraocular tumours is referred to.

It is interesting to read in sequence one chapter on Abnormalities of the Vertical Muscle by the English authorities, Lyle and Cross, followed immediately by an article on Surgery of the Oblique Muscles by Fink the American, whose fine dissections and technique for oblique surgery have earned him a prominent position in the field of vertical squint.

Other surgical matters of interest are: a brief description by Scheepers of his most useful binocular operating ophthalmoscope for retinal detachment surgery; chapters by Stallard on Corneal Sutures and Corneal Grafting; by Shapland on Lamellar Sclerectomy; by Harold Ridley on Intra-Ocular Acrylic Lens Implant; by Frederick Ridley on Contact Lenses; and so forth.

Enough has been said to indicate that this book can be recommended as a worthy addition to one's reference library.

R.L.H.T.

#### SIDE EFFECTS OF DRUGS

*Reactions with Drug Therapy.* By Harry L. Alexander, M.D. Pp. 301+xii with 33 illustrations. Philadelphia & London: W.B. Saunders Company. 1955.

*Contents:* 1. Introduction. 2. Mechanisms. 3. Dermatologic Manifestations. 4. Systemic Patterns. 5. Anti-Infectious Drugs. 6. Anti-Infectious Drugs (continued). 7. Anti-infectious Drugs (continued). 8. Antiarthritic Drugs. 9. Drugs Used in Cardiovascular Disorders. 10. Sedative Drugs. 11. Antithyroid Drugs. 12. Antihistamine Drugs. 13. Organ Extracts. 14. Vitamins. 15. Serums and Vaccines. 16. Plant Products. 17. Local Anesthetics. 18. Miscellaneous Drugs. Index.

A great responsibility rests on those who have to deal with drugs; and not only on those who give them to patients, but also on the few whose duty it is to teach scientifically about them. Hardly a week goes by without an account being published of an unusual experience with drug therapy. Most journals carry almost regularly some article indicating the possible side-effects of drugs. The incidence of drug reactions has multiplied in recent years as more and more people are exposed to drugs that can result in sensitization. Serious accidents and numerous fatalities have been reported. The literature dealing with these problems is extensive and widespread. For this reason and others the book under review is most valuable. It presents a concise account of the untoward reactions produced by most modern drugs; poisoning from overdosage is not included, nor such pharmacological reactions as are to be expected. The book deals therefore with 'drug hypersensitivity', and this is considered in detail the different lesions that may be produced by drugs in common use being carefully described, with explanations of the mechanisms involved. Ample illustrations and lists of drugs indicating the relative capacity to produce reactions are provided, and each chapter is

documented with numerous references. This is obviously a book that every doctor should read and have available for reference. N.S.

#### ADVANCES IN PEDIATRICS

*Advances in Pediatrics.* Edited by S. Z. Levine. Volume VII. Pp. 351 with illustrations. \$8.00. Chicago: Year Book Publishers, Inc. 1955.

*Contents:* 1. On Fibrous Defects in Cortical Walls of Growing Tubular Bones. 2. The Urinary Tract in Childhood. 3. Malnutrition in Infancy and Childhood, with Special Reference to Kwashiorkor. 4. Phonocardiography in Children. 5. Infantile Cerebral Palsy. 6. Mucoviscidosis. 7. Congenital Megacolon.

This volume contains 7 authoritative monographs on subjects of contemporary paediatric importance. All are well written, concise and up-to-date and this book should appeal not only to paediatricians but also to all practitioners who are interested in children.

The first article is written by that well-known paediatric radiologist, Caffey, who records the course and variations in development of asymptomatic cortical bone defects in children. This is an original contribution based on serial radiological observations of a large number of cases; the article is profusely illustrated with X-ray plates and some micro-photographs, and the differential diagnosis is discussed in detail. Then follows a concise but very adequate résumé of paediatric urology with special reference to obstruction and infection, congenital anomalies, and neuromuscular uropathy; treatment is featured and there are excellent plates, diagrams and classification tables for ready reference. In the article on phono-cardiography consideration is given particularly to physiological systolic murmurs, congenital heart anomalies and the heart in rheumatic fever. Perlstein outlines the modern concept of cerebral palsy, its symptomatology and management. The book contains, too, an excellent monograph on the surgical treatment of congenital megacolon.

Two subjects remain, both of nutritional interest: mucoviscidosis and malnutrition. The syndrome of mucoviscidosis is fully dealt with and admirably presented. All aspects are considered and emphasis is placed on unusual clinical features, conflicting data, laboratory diagnosis, and therapy. An interesting observation is that evidence is accumulating which suggests that it may be possible to make the diagnosis on the basis of sweat electrolyte abnormality. South African practitioners will no doubt be especially interested in the article on malnutrition and kwashiorkor. Gomez and his co-workers review all aspects of these conditions and contribute their observations on the clinical picture, pathology and biochemistry of malnutrition based on a large number of Mexican cases. These authors refer to a 'nutritional recovery syndrome' which apparently appears about 3 weeks after treatment has commenced. Not everyone will agree, however, with the dictum that the term 'kwashiorkor', if used at all, should be limited to African (Native) malnutrition cases with skin and hair changes, or with the statement that supplementary vitamin therapy is entirely without benefit in malnutrition.

W.E.

#### PSYCHO-ANALYSIS

*The Technique of Psycho-Analysis.* By Edward Glover, M.D. Pp. 404+x. 35s. London: Baillière, Tindall & Cox. 1955.

*Contents:* Part I. 1. Preamble to Analysis. 2. The Opening Phase (1). 3. The Opening phase (2). 4. Defence-Resistance (1). 5. Defence-Resistance (2). 6. Counter-Resistance and Counter-Transference. 7. The Transference-Neurosis (1). 8. The Transference-Neurosis (2). 9. The Terminal Phase (1). 10. The Terminal Phase (2). 11. Active Technique. 12. The Analyst's Case-List (1). 13. The Analyst's Case-List (2). 14. The Analyst's Case-List (3). Part II. 15. Introductory. 16. Interpretation (1). 17. Interpretation (2). 18. Interpretation (3). 19. Interpretation (4). 20. Transference and Routine (1). 21. Transference and Routine (2). 22. Transference and Routine (3). 23. Termination. 24. Psychotic Cases. 25. Relation of Theory to Practice. 26. Summary of Report. Part III. 27. The Therapeutic Effect of Inexact Interpretation: A Contribution to the Theory of Suggestion. 28. On the Theory of the Therapeutic Results of Psycho-Analysis. 29. Therapeutic Criteria of Psycho-Analysis. Index.

The technique of psycho-analysis is notoriously a difficult subject to condense into one book and consequently the study of the subject necessitates delving into innumerable articles scattered throughout the literature. Dr. Glover in 1928 wrote a shorter treatise on the technique of psycho-analysis, and the first part of the present volume—an expanded and revised edition of this earlier work—covers a great deal of ground in a relatively detailed way. It

reflects the change in emphasis which has taken place, from libido analysis to ego analysis and the analysis of the defences, and the greater recognition which to-day is given to the importance of counter-transference. The second half of this section, 'The Analyst's Caselist,' is an attempt to divide cases which are accepted for analysis into 3 classes—accessible, moderately accessible, and intractable. He discusses ways in which analytic technique may be modified in dealing with these respective types.

Part 2 consists of a research originally published in 1940, based on a questionnaire to a considerable number of analysts, regarding certain practical points of technique, and how they dealt with them. A summary of the replies is given and discussed. In dealing with these continually recurring problems, which are as much the subject of discussion today as then, it is evident that there was considerable difference of opinion, and that there was no rigid set of rules to which everything must be made to fit, but much variation in meeting the individual requirements of patients.

Part 3 consists of 3 papers previously published in the International Journal of Psycho-analysis, in which the nature of the therapeutic effect of psycho-analysis is examined.

This book was written chiefly for analysts, and particularly candidates commencing their clinical work. The author uses technical phraseology, and in order to follow him a considerable detailed knowledge of psycho-analytic ideas and methods is required. Even then, though the style is clear and thoughts very happily expressed, the need to conserve space leads to a paucity of illustrative case-material and lack of explanation, which at times makes his meaning obscure—a practical difficulty on which Dr. Glover comments in his preface. However, in spite of the fact that he has had to condense so much into one volume, a large amount of valuable information has been presented and many important points discussed in a stimulating way. His book will form an important addition to any analytic library.

W.A.S.

## PERIPHERAL NERVE INJURIES

*Peripheral Nerve Injuries.* By The Nerve Injuries Committee of the Medical Research Council. Pp. 451+xvi. With illustrations £2 15s. London: Her Majesty's Stationery Office. 1954.

*Contents:* Part I. Methods of Investigating Nerve Injuries. 2. Rates of Regeneration. 3. Vasomotor and Nutritional Disturbances. Following Injuries to Peripheral Nerves. Part 2. 4. Lesions in Continuity. 5. Nerve Injuries and Fractures. Part 3. 6. Histopathology of Nerve Injury. 7. Histopathology of Nerve Grafts as Determined by Animal Experiment. Part 4. 8. Causalgia—A Review of 48 Cases. Part 5. 9. Neurovascular Lesions. Part 6. 10. Electrical Diagnosis of Peripheral Nerve Injury. 11. Electromyography. Part 7. 12. Factors Influencing Functional Recovery. Part 8. Results of Nerve Suture. Part 9. Nerve Grafting and Other Unusual Forms of Nerve Repair. Part 10. Open Wounds of the Brachial Plexus. Acknowledgements. Bibliography. Index. Bibliographical Index.

This most admirable book is the outcome of work over a number of years at five Peripheral Nerve Centres in Britain during and after the last war. It is not often that one can say that there is no section of a book that is not up to the highest standards demanded by medical investigations, but the authors here, under the guidance of Prof. H. J. Seddon, have produced such a volume. The work described varies from a review of methods of investigation to histopathology and the long-term results of operative treatment. Amongst the most interesting points brought out in the clinical assessment of nerve injuries is the unreliability of the older methods of electrical testing. Electromyography has clearly proved itself to be a most useful method of investigating nerve recovery, and the earliest signs of motor recovery after nerve injury are obtained by electromyography, but Dr. A. E. Ritchie suggests, on the basis of thorough and painstaking work, that the usual galvanic-faradic apparatus used in neuro-muscular disorders should be replaced by a simple stimulator delivering two different lengths of shock, of approximately 1 and 300 m.sec respectively. Those who have at times been misled by the older methods will welcome this suggestion.

Professor Seddon's opening chapter gives a useful summary of anomalous muscle actions and anomalous nerve supplies, and from the clinician's point of view Dr. Barnes' chapter on Causalgia is of outstanding interest, although one must be disappointed that the treatment of this condition remains so problematical.

It is perhaps a little disappointing that in this excellent book on Nerve Injuries there is no chapter devoted entirely to the assessment of individual muscle action, so that the volume must be read in conjunction with the M.R.C. War Memorandum No. 7, which was of such great use to the profession during the last war.

The present work is not light reading by any means, nor is it

intended as such, but it is the most valuable source book on peripheral nerve injuries that has been written, and contains many excellent illustrations and a very full bibliography. No one interested in a clear, scientific approach to nerve injuries can afford to miss this book.

J. Mac W. Mac G.

## CARDIOGRAPHY

*Cardiography.* By William Evans, M.D., D.Sc., F.R.C.P. Second Edition. Pp. 212+xiii, with 378 figures. London: Butterworth & Co. (Publishers) Limited. South African Office: Butterworth & Co. (Africa) Limited, Durban. 1954.

*Contents:* Part I. *Electrocardiography.* 1. The Cardiographic Leads. 2. Deviation of the Normal Electrical Axis. 3. Ventricular and Atrial Preponderance. 4. The Physiological Electrocardiogram. 5. Altered Rhythm. 6. Congenital Heart Disease. 7. Pericardial Disease. 8. Mitral Valvular Disease. 9. Aortic Valvular Disease. 9. Aortic Valvular Disease. 10. Cardiac Infarction. 11. Hypertension. 12. Pulmonary Heart Disease. 13. The Electrocardiogram in Endocrine Disease. 14. The Electrocardiogram in Certain Other Conditions. 15. Test Electrocardiograms. Part II. *Phonocardiography.* 16. Heart Sounds. 17. Heart Murmurs. Index.

This very useful book is unusual in that it combines the study of Electrocardiography and Phonocardiography. However, the author has very definite views of his own and, although many do not agree with him, one cannot say that his views are not provocative.

His well-known insistence that the CR leads are more useful than the conventional uni-polar leads VI to V6 is certainly not accepted by most authorities working in this field.

A more useful chapter is that on IIR (lead III with respiration) of which the author has made a special study. He also attempts to elucidate the well-known difficulty in distinguishing the S-T segment depression in ischaemia of the myocardium from other causes of S-T depression by describing the ischaemic depressions as either Sickle, Claw, Plane, or Wing depressions. However commendable this effort may be, too often, there are mixtures of Sickle & Claw or Trough & Plane or any combination, and difficulties are bound to arise.

The Phonocardiographs are good but one certainly cannot agree with the statement in the captions to the lower drawing on Page 90, that the tricuspid opening snap is responsible for the third sound in Pericarditis. It is very doubtful indeed whether the Author is justified in putting 3 after S.

The book can be recommended with confidence but the reader should rather accept the majority opinion that the V chest leads have replaced the CR leads other than in exceptional cases.

M.N.

## ANTENATAL AND POSTNATAL CARE

*Antenatal and Postnatal Care.* By Francis J. Browne, M.D. (Aberd.), D.Sc., F.R.C.S. (Edin.), F.R.C.O.G., and J. C. McClure Browne, B.Sc., M.B., B.S., F.R.C.S. (Edin.), F.R.C.O.G. Eighth Edition. Pp. 672+viii with 94 illustrations. 37s. 6d. London: J. & A. Churchill Ltd. 1955.

*Contents:* 1. The History and Development of Antenatal Care. 2. Diagnosis of Early Pregnancy. 3. Examination of the Patient. 4. The Hygiene of Pregnancy. 5. The Influence of the Emotions upon Pregnancy and Parturition. 6. Maturity and Postmaturity. 7. Abnormal Presentations and Positions. 8. Multiple Pregnancy. 9. Abnormalities in the Quantity of Amniotic Fluid. 10. Haemorrhage in Early Pregnancy. 11. Haemorrhage in Early Pregnancy (continued). 12. Haemorrhage in Early Pregnancy (continued). 13. Unsuccessful Pregnancy. 14. Congenital Malformations and their Inheritance. 15. The Rhesus Factor and Erythroblastosis (Haemolytic Disease of the New-Born). 16. Haemorrhage in Late Pregnancy. 17. Haemorrhage in Late Pregnancy (continued). 18. Contracted Pelvis and Disproportion. 19. Displacements of the Uterus in Pregnancy. 20. Vomiting in Pregnancy. 21. The Toxaemias of Late Pregnancy. 22. Diseases and Disorders of the Digestive System in Pregnancy. 23. Acute Infectious Fevers in Pregnancy. 24. Diseases of the Circulatory System in Pregnancy. 25. Diseases of the Circulatory System (continued). 26. Diseases of the Nervous System in Pregnancy. 27. Diseases of the Nervous System (continued). 28. Diseases of the Nervous System (continued). 29. Diseases of the Ductless Glands in Pregnancy. 30. Diseases of the Ductless Glands in Pregnancy (continued). 31. Diseases of the Respiratory System in Pregnancy. 32. Diseases in the Urinary Tract in Pregnancy. 33. Affections of the Skin in Pregnancy. 34. Tumours complicating Pregnancy, Labour and the Puerperium. 35. Venereal Diseases in Pregnancy. 36. The Uses and Value of Radiology in Obstetrics. 37. Postnatal Care. Appendices. Index.

This classic has reached an 8th edition and has been translated into Chinese and Spanish. The promise of immutable consistency is strengthened by the son's joining in authorship with his father. To F. J. Browne belongs the credit of raising British obstetrical writing from its rude state for, when the first edition of this work

appeared in 1935, the only scholarly works in the field were American or foreign. This edition should be studied faithfully by all undergraduates, and a reviewer reads it for his instruction. It has been revised throughout and is up-to-date.

About the time of Homer, King Solomon preached: 'Of making many books there is no end; and much study is a weariness of the flesh.' In accordance with these thoughts one feels that the most refreshing of books is the monograph which contains not so much original work as original thought. A book devoid of the last is still-born, and whoever brings together inside its cover diverse information and argument must exhibit some depth of thinking on the subject. It is fashionable for professional writers merely to add recently published matter to their previous editions.

Browne, however, is a thinker in addition to being a scholar, and his book is a precious possession. He has been regarded as the world's greatest authority on antenatal matters. He has made a great contribution as a pioneer of the new Obstetrics. Such is his authority that there is the occasional danger that his advice may unintentionally mislead many obstetricians; e.g. his statement about reducing the incidence of forceps delivery where cardiac disease is present. The simple-minded have also failed to detect his evasion of the important problem of uncomplicated hypertension in the toxæmia of pregnancy.

The curious thing about this brilliant book is that its title is no longer appropriate. The author does not devote over-much attention to actual practice in the prenatal field; he certainly does not know how a really good clinic should be conducted nor why the clinics of the western world are so unsuccessful. Because of an admiration for this book, and because heart disease today is the greatest killer in all but the best hands, one makes bold to suggest that the author should get an expert to write the section on heart disease. To preserve the balance the expert contribution on 'the emotions', and possibly even the one on radiology might be dispensed with.

O.S.H.

## INTERNAL MEDICINE

*Fundamentals of Internal Medicine.* By Wallace Mason Yater. Fourth Edition. (Pp. 1276 + xxx, with illustrations.) New York: Appleton-Century-Crofts, Inc. 1954.

*Contents:* 1. Diseases of the Heart. 2. Diseases of the Blood Vessels. 3. Diseases of the Kidneys. 4. Diseases of the Blood and Blood-Forming Organs. 5. Diseases of the Respiratory System. 6. Diseases of the Digestive System. 7. Diseases of the Locomotor System. 8. Diseases of the Endocrine Glands. 9. Diseases of the Spleen and Reticuloendothelium. 10. Diseases of the Metabolism. 11. Diseases of Allergy. 12. Diseases due to Intoxications. 13. Diseases Due to Physical Agents. 14. Diseases Due to Vitamin Deficiency and Malnutrition. 15. The Infectious Diseases. 16. Diseases of the Nervous System. 17. Mental Diseases. 18. Diseases of the Skin. 19. Diseases of the Ear. 20. Diseases of the Eye. 21. Diets. 22. Antibiotic Therapy Including the Sulfonamide Compounds. 23. Symptomatic and Supportive Treatment. 24. Inhalational Therapy. 25. Clinical Values and Useful Tables. 26. The Physician Himself. Index.

This text-book of medicine aims at presenting the fundamentals of medicine in simple and concise yet comprehensive form, and in the main it has succeeded. It certainly is comprehensive, for it includes *inter alia* chapters on the eye, the ear, dietics and dermatology. At times it is a little too concise, for there may be only a list of names of different diseases with just enough descriptive literature to make one recognize the disease. Other parts of the book get rather more than their share. For example, there are 54 pages dealing with electrocardiography compared with 64 pages on the remainder of the diseases of the heart. But on the whole the material is fairly chosen, adequately described and accurately set out. Treatment is well discussed. The practice of dealing with the treatment of a lot of similar diseases at the end of a chapter has much to commend it and might be followed by other authors. There are many tables of differential diagnosis which are bound to be popular with the student, more especially those with their eyes on forthcoming examinations.

There is much to criticize and much to praise. Proprietary names of drugs are commonly mentioned without their official equivalent. The discussion on digitalis alkaloids is well set out but no mention is made of the different rates of excretion of the different preparations. Nor can one agree that the use of digitalis glycosides is 'more scientific' than the use of powdered leaf. The discussion on the clinical diagnosis and treatment of cardiac asthma could be improved. While the description of pernicious anaemia is good and up-to-date, sickle-cell anaemia and the other hereditary haemoglobinopathies are not nearly so well

discussed. The prognosis of polycythaemia vera is unnecessarily gloomy and most workers have long since abandoned phenylhydrazine therapy for this disease as they have also abandoned the extract of yellow bone-marrow for agranulocytosis. Haemophilia is no longer believed to be due to an increased resistance of the blood platelets to disintegration. An initial dose of 6 g. of sulphadiazine in lobar pneumonia is unnecessarily heroic therapy. The statement that flat or inverted T waves in lead I or II of the electrocardiogram are frequently found in persons with neuro-circulatory asthenia cannot be allowed to pass without comment. Nor should it be said that 'systolic murmurs without other evidence of heart disease do not allow the diagnosis of heart disease to be made', even though 'they are looked upon with suspicion'. The nitroglycerin test for migraine could hardly be described as useful in atypical cases. Will not 0.6 mg. of nitroglycerin produce headache in many non-migrainous subjects? While the newer drugs used in the treatment of epilepsy are well described one misses a mention of paraldehyde in the treatment of status epilepticus. On the other hand the sections on diseases of the endocrine glands and those dealing with ACTH and cortisone are good; they are worthy of special mention.

There are many contributors to this volume. More and more the modern text-book of medicine is following this pattern. It has much to commend it for, despite the criticisms of detail in this review, this book still remains a reasonable and well set-out presentation of medicine as it is practised in the United States of America.

C.M.

## CLINICAL CHEMISTRY

*Clinical Chemistry in Practical Medicine.* By C. P. Stewart, D.Sc. (Dunelm.), Ph.D. (Edin.) and D. M. Dunlop, B.A. (Oxon.), M.D., F.R.C.P. (Edin.), F.R.C.P. (Lond.). Fourth Edition. (Pp. 320 + vii, with figures. 21s.) Edinburgh and London: E. & S. Livingstone Limited. 1954.

*Contents:* 1. Introduction. 2. The Collection and Preservation of Samples. 3. Water and Electrolyte Metabolism. 4. Neutrality Regulation. 5. Carbohydrate Metabolism. 6. Tests of Renal Function. 7. The Proteins of Blood Plasma. 8. Tests of Gastric Function. 9. Tests of Pancreatic Function. 10. Tests of Hepatic Function. 11. The Cerebro-Spinal Fluid. 12. Assessment of Thyroid Function. 13. Calcium and Phosphorus. 14. Hormone Abnormalities. 15. Nutritional Deficiencies. Appendix I. Appendix II. Index.

This classical publication has been revised as compared with its 3rd edition of 1949. The excellent standard of previous editions is maintained, and the practical nature of the book for daily reference is unaltered.

For the intern it is essential. For the general practitioner it is a necessity—if only for chapter II, which gives a clear account of the proper collection and preservation of specimens. For the various specialities the 4th edition is a readable account of the recent advances as well as the established practices in Clinical Chemistry.

Three new chapters are added, viz. Assessment of Thyroid Function, Hormone Abnormalities, and Nutritional Deficiencies. The chapter on miscellaneous items has been abolished. These new chapters give a brief and modern account of their subject matter.

Minor criticism may be levelled at particular points. In chapter II there is no mention of the use of sodium fluoride tubes for the preservation of cerebrospinal fluids, on which 'sugar' determinations are often requested after a delay of 24-48 hours in postage. One would like to have seen it made clear that urea concentration or urea range tests should not be undertaken unless previous examination has established the blood-urea concentration level.

Chapter XII suggests that chemical analysis of protein-bound iodine (as opposed to radio-activity methods) are not suitable for routine use. This reads somewhat 'Irish' as a subsequent paragraph indicates. Furthermore, an accurate chemical analytical method which may be adopted for routine use in the bigger laboratories is the alkaline incinerator technique of Salter and McKay.

The Appendix I has been rewritten so as to be a more comprehensive account of technical methods. There is an unwise trend to describe principles of some procedures without detailing the practical techniques.

The publishers are to be commended for their fine workmanship. The book is produced with the optimal criteria for reference purposes, the size being demi-octavo, the print 11 on 12 Baskerville type and the set, to 24 pica ems.

R.S.