

## REVIEWS OF BOOKS : BOEKRESENSIES

### BLACK MAGIC AND WHITE MEDICINE

*Black Magic and White Medicine.* A Mine Medical Officer's Experiences in South Africa, the Belgian Congo, Sierra Leone, and the Gold Coast. By Michael Vane. Pp. 254. 5 Illustrations, 16s. London and Edinburgh: W. & R. Chambers Ltd. 1957.

Contents: South Africa. Belgian Congo. Sierra Leone. Gold Coast.

The author has had an immense amount of experience in examining and treating African labourers in South Africa, the Congo, Sierra Leone and the Gold Coast. In all these places he shows himself to be a humane and observant doctor who overcomes his difficulties with good humour and imperturbability. He tells of amusing encounters with malingerers, of witch doctors, and of the strange and inexplicable effects they produce in African patients even by 'remote control'.

His comments on the unreliability of Native nurses and nursing orderlies, culled as they are from 4 widely separated parts of Africa, seem to stress the similarity of the Natives' way of thinking and are not by any means unique. He points out how well the routine work is carried out if properly supervised but how disorganization takes place should an emergency arise.

The book emphasizes the long way the black man still has to go before he can hope to undertake the responsible tasks of the white man with success.

The difficulties of administration and the trials of having to persuade a primitive people that certain forms of therapy are necessary will be familiar to most South African doctors.

This book provides further evidence (if this be needed) of the lack of integration of the Bantu mind with modern thought.

S.T.

### ORTHOPAEDIC MEDICINE

*Text-Book of Orthopaedic Medicine. Volume I. Diagnosis of Soft Tissue Lesions.* By James Cyriax, M.D. (Cantab.), M.R.C.P. (Lond.). Pp. xiv + 711. 36 Plates, 131 Figures. 45s. London: Cassell and Company Ltd. 1957.

Contents: Preface. List of Plates. I. Medical Fallacies. II. Traumatic Inflammation. III. Referred Pain. IV. Neuritis and Pressure on Nerves. V. Non-specific Arthritis. VI. Diagnosis of Soft Tissue Lesions. VII. Head, Neck and Scapular Area. VIII. Thoracic Outlet. Jaw. Sterno-clavicular Joint. IX. Shoulder. Part I. X. Shoulder. Part II. XI. Shoulder. Part III. XII. Elbow. XIII. Wrist and Hand. XIV. Thorax and Abdomen. XV. Lumbar Region. Part I. XVI. Lumbar Region. Part II. XVII. Lumbar Region. Part III. XVIII. Lumbar Region. Part IV. XIX. Sacro-iliac Joint, Buttock and Hip. XX. Knee. XXI. Leg and Ankle. XXII. Foot. XXIII. Anaesthesia and Analgesia. XXIV. Psychogenic Pain. XXV. Physician and Physiotherapist. Index.

Dr. Cyriax is one of the doyens of physical medicine, and his book, in its 3rd edition, reflects all the attributes of a pioneer; across every page blazes the zeal and fervour of the missionary seeking to convert the 'medical heathens'. He is also an iconoclast, and it afforded the reviewer pleasure to read the denunciation of 'fibrositis' and 'rheumatism' as the diagnoses of the intellectually destitute. Consequently, it is not surprising that the decided views

the author has about most soft-tissue lesions are stated vigorously and dogmatically. These are couched in terms new and often difficult to understand. What is meant, for example, by the 'vibrant twang of muscle spasm' (p. 106)? He states that the head and face are formed from the upper two cervical segments; this is embryologically meaningless.

There is universal agreement that hydrocortone is a valuable ancillary weapon in the armamentarium of the orthopaedic surgeon and the specialist in physical medicine. The reviewer, unfortunately, has not had the same striking successes as claimed by Dr. Cyriax. Hydrocortone, however accurately given, cannot possibly cure the surrounding thickening, occasionally almost cartilaginous, of teno-vaginitis of any standing. The author states that the diagnosis between monarticular infective arthritis and tuberculous infection is sometimes difficult and yet he advocates the injection of hydrocortone intra-articularly where myocrisin fails. Where the diagnosis is in doubt, the use of intra-articular hydrocortone is a dangerous practice which can produce and has produced catastrophes.

One of the many surprising statements made is that the subscapularis muscle must be weakened and the infrapinatus muscle strengthened to prevent recurrent dislocation of the shoulder. The basic defect is known to be a tear in the anterior glenoid labrum, which can only be repaired by operation. The Bankart procedure or Putti-Platt capsulorrhaphy is successful in over 80% of cases.

The chapter on the lumbar region contain many new and unusual concepts. The inclusion of a bibliography would have enhanced the value of the book for reference purposes.

This book, the most comprehensive of its kind so far, will be used extensively by those who intend to specialize in physical medicine.

M.S.

### MEDICAL SIGNS AND SYMPTOMS

*Symptoms and Signs in Clinical Medicine.* Sixth Edition. By E. Noble Chamberlain, M.D., M.Sc., F.R.C.P. Pp. vii + 508. 374 Illustrations, 19 in colour. 35s. post 1s. 6d. Bristol: John Wright & Sons Ltd. Medical Publishers. 1957.

Contents: I. The Routine of Interrogation and Examination. II. External Characteristics of Disease. III. The Respiratory System. IV. The Cardiovascular System. V. The Urinary System. VI. The Digestive System. VII. The Haemopoietic System. VIII. The Nervous System. IX. The Nervous System (continued). X. Fever. XI. The Examination of Sick Children. XII. Medical Operations and Investigations. XIII. Radiology. XIV. Clinical Pathology and Biochemistry. Glossary. Index.

Dr. E. Noble Chamberlain's introduction to medical diagnosis requires no introduction to medical students, for whom it is primarily intended. The popularity of this book is indicated by the fact that since its first appearance in 1936, 6 editions and 7 reprints have been issued.

The present edition follows the familiar pattern, with some revision to bring up to date particularly the sections on the cardiovascular and nervous systems. The first part of the book is concerned with history-taking and physical examination, and with

the aid of numerous photographs, most of which are of good quality, this field is very adequately covered. The emphasis is on physical signs and in this regard the photographs serve a useful purpose in assisting the memory and judgment of the student. Individual systems are discussed under the headings of symptoms, signs, and diagnosis. A certain amount of repetition is thus inevitable but this is desirable in a book intended to enable a fourth-year student to co-ordinate clinical teaching with text-book information. The chapter by Professor Norman B. Capon on the examination of sick children constitutes a useful attempt to bridge the gulf which exists in the mind of the student between adult and paediatric medicine.

This book can be highly recommended to all medical students as an assimilable and attractive introduction to their training in the medical wards.

A.S.

## SPORTS INJURIES

*Sports Injuries—Their Prevention and Treatment.* By Donald F. Featherstone, with a Foreword by Sir Arthur Porritt, K.C.M.G., K.C.V.O., C.B.E. Pp. 204. 48 Illustrations (26 as plates). 35s. post 1s. Bristol: John Wright & Sons Ltd. 1957.

*Contents:* Preface. Foreword by Sir Arthur Porritt, K.C.M.G., K.C.V.O., C.B.E. I. The Incidence and Type of Injury. II. The Prevention of Injuries. III. Examination and Diagnosis. IV. Methods of Treatment. V. Techniques of Treatment. VI. Injuries to the Knee-joint. VII. Foot and Ankle Injuries. VIII. Muscular Strains. IX. The Treatment of Contusions. X. Fractures and Dislocations. XI. The Miscellaneous Injuries of Sport. XII. Conclusions. Appendix: The Formation of a Treatment Room. Index.

This book by Donald Featherstone deals with sport injuries in a concise and workmanlike manner. It is a strange phenomenon that in this country of ours, where sport plays such a prominent part, we find so few books which deal specifically with this subject.

A point which strikes one immediately on reading this well-printed book is the fact that the author never tries to belittle the medical man. To him the doctor or orthopaedic surgeon is the master who controls the diagnosis and treatment, and the physiotherapist carries out this treatment and gives excellent and practical advice.

Mr. Featherstone is obviously an ardent follower of Dr. Cyriax' methods of treatment (like most medical men and orthopaedists who deal extensively with sport injuries). He favours the injection of local anaesthetic and early active and passive movements, and his suggestions of treatment have been found by the reviewer to be most effective.

Another point ably made is the value of quadriceps exercises in knee injuries and, above all, the need for getting the player on to his feet as quickly as possible in all injuries and for encouraging active exercises and, so far as possible, participation in games with his fellow players.

Psychology plays a big part in his treatment of injuries. His case histories are well set out and show the rapid recovery of the professional player who depends on his fitness for his bread and butter, whilst at times the amateur is inclined to exaggerate the seriousness of the injury. He also stresses the value of the doctor's telling the player the probable diagnosis immediately, and instituting treatment as soon as possible.

The foreword is by Sir Arthur Porritt, F.R.C.S., himself a fine sportsman and one of those who, in the past 25 years, have put St. Mary's Hospital on the map.

L.B.

## HALE-WHITE

*Hale-White's Materia Medica Pharmacology and Therapeutics.* Thirtieth Edition. By A. H. Douthwaite, M.D. F.R.C.P. (Lond.). Pp. viii + 499. 24s. net. London: J. & A. Churchill Ltd. 1957.

*Contents:* Definitions. Pharmacy. Pharmaceutical Processes. Weights, Measures, Symbols. Pharmacopoeial Preparations. Administration of Drugs. Prescribing. Dangerous Drugs Act 1951, and Poisons Rules (1935). Pharmacological and Therapeutic Actions. 1. Demulcents, Emollients, Oleates and Dusting Powders. 2. Bitters. 3. Volatile Oils. 4. Digestive Ferments. 5. Purgatives. 6. Vegetable Astringents. 7. Cholagogues. 8. Anthelmintics. 9. Antiseptics. 10. Colouring Agents. 11. Substances whose Action is Physical. 12. Dyes. 13. Charcoal. 14. Water and Salt. 15. Sugars and Flavouring Agents. 16. Alkalies, Hydrates and Carbonates, Acetates and Citrates, Ammonium. 17. Saline Diuretics. 18. Calcium and Barium. 19. Acids. 20. Urea and Suramin. 21. Carbon Dioxide, Oxygen and Helium. 22. Iodides and Other Iodine Compounds. Drugs Acting

on the Nervous System. 23. Bromides. 24. Alcohols. 25. Volatile Anaesthetics. 26. Hypnotics. Barbiturates and Other Drugs used in the Treatment of Epilepsy. 27. Opiates. 28. General Cerebral Stimulants. 29. Parasympatholytic Drugs. 30. Drugs acting chiefly on Autonomic Ganglia and Voluntary Muscle. 31. Local Anaesthetics. 32. Parasympathomimetic Drugs. 33. Sympathomimetic Drugs. 34. Sympatholytic Drugs. 35. Nitrates. 36. Antipyretics. 37. Cinchona, Pamaquine, Mepacrine. Drugs used in the Treatment of Malaria. 38. Salicylates and Benzoates. 39. Chemotherapeutic Agents. 40. Drugs used in Leprosy. 41. Antibiotics. 42. Digitalis, Strophanthus, Ouabain. 43. Emetics and Expectorants. 44. Drugs used in Amoebiasis. 45. Hydrocyanic Acid and Thiocyanates. 46. Colchicum, Phenylbutazone, Cinchophen, Probenecid. 47. Histamine and Antihistamines. 48. The Heavy Metals. 49. The Metalloids. 50. Hormone Preparations. 51. Antitoxins and Toxins. 52. Vaccines. 53. Vitamins. 54. Anticoagulants. 55. Insecticides and Insect Repellants. 56. Nitrogen Mustards. Appendix, Latin Phrases used in Prescriptions. Index.

This text-book has served many generations of students and practitioners since 1892; the original editor (Hale-White) was responsible for the first 19 editions, and the subsequent editor (Douthwaite) for 11 editions. In a book of this kind, special care is required in revision and with the accelerated changes that have taken place in pharmacology there is a great danger of incorrect facts being overlooked. In the present edition there is, as before, a great deal of information, particularly with regard to B.P. and B.P.C. drugs, systematically presented under individual titles, which will be of great value to those seeking data on official and approved drugs.

Among criticisms that must be made are the following: The classification and arrangement of drugs into satisfactory groups is not easy, but the close association of urea and suramin, of acetazoleamide and chemotherapeutic agents, of pethidine, methadone, and cannabis under page-titles of opiates is not good, nor is the subdivision of hormone preparations into class A and class B very helpful. The sub-title of action of drugs on nerve 'endings' is misleading. Two important typographical errors are stimulating for simulating (p. 123) and pyrosidine for pyridoxine (p. 452). The recommendation of strychnine for post-influenza low blood pressure and as an aphrodisiac belongs to a past era. It should be emphasized that the symbols in the prescription on p. 17 are also obsolete.

The book has been maintained in its handy size and price.

N.S.

## MATERIA MEDICA

*The Essentials of Materia Medica Pharmacology and Therapeutics.* Seventh Edition. By R. H. Micks, M.D., F.R.C.P.I. Pp. x + 432. 28s. net. London: J. & A. Churchill Ltd. 1957.

*Contents:* I. General Principles. II. Narcotic Action. III. Opium and Morphine. Other Potent Analgesics. IV. Non-Volatile Narcotics and Hypnotics. V. Anticonvulsants. VI. General Anaesthesia and Anaesthetics. VII. Convulsants and Analeptics. VIII. Adrenaline and Sympathomimetic Drugs. IX. Acetylcholine. Cholinergic Drugs. Neostigmine and Physostigmine. Organic Phosphorus Compounds. X. Acetylcholine Antagonists. Antispasmodics. Muscle Relaxants. Ganglion Blocking Drugs. The Treatment of Hypertension. The Chemistry of Muscle Relaxants and Ganglion Blocking Drugs. XI. The Antihistaminics. XII. Local Anaesthetics. XIII. Salicylates and Other Mild Analgesics. XIV. Drugs used in the Treatment of Heart Failure. XV. Diuretics. The Treatment of Oedema. XVI. Purgatives. The Treatment of Peptic Ulcer. XVII. Thyroid. Iodine. Antithyroid Drugs. Radio-active Iodine. XVIII. Calcium. Phosphorus. Parathyroid. Vitamin D. XIX. The Treatment of Anaemia. XX. Blood Clotting and Anticoagulant Therapy. XXI. Vitamins A, E and the B Complex. XXII. Gonadotrophic and Sex Hormones. Posterior Pituitary. Ergot. XXIII. Water and Electrolyte Depletion. XXIV. Insulin and Diabetes. XXV. Corticotrophin and Adrenal Cortical Steroids. XXVI. The Antibiotics. XXVII. The Sulphonamides. XXVIII. The Use of the Antimicrobial Drugs. XXIX. Metalloids and Heavy Metals. XXX. Antimalarial Drugs and Amoebicides. XXXI. Anthelmintics. XXXII. Cytotoxic Drugs. XXXIII. Prescribing. Index.

This book has proved popular in many quarters, because it deals in pleasant style with a limited number of important drugs and their application to therapeutics. The inclusion of a drug has depended on its value in the treatment of disease. It follows that many drugs are not considered and general information on drugs of traditional and wider use will need to be sought elsewhere. The text has been rewritten so as to give correct emphasis and perspective on therapeutic advances. A number of new drugs not described in previous editions are now presented, including such recent arrivals as oral hypoglycaemic drugs and 'academic' agents such as lysergic acid diethylamide. A strange name is that of 'hiconstarch', a combination of isoniazid and thiosemicarbazone built up on a carbohydrate polymer for the treatment of tuberculosis. For those responsible for intravenous infusions revised and (as is so often implied) lengthier information is provided on disturbances of water and electrolytes. There is a new chapter on anticonvulsant drugs.

With a pleasant format and easy style the book is even more than before a valuable clinical guide for the choice and use of drugs, with emphasis on the principles of pharmacology.

N.S.

## PEPTIC ULCER

*Gastro-Duodenal Ulcer. Physio-Pathology, Pathogenesis and Treatment.* By J.-Jacques Spira. Pp. xvi + 549. 27 Figures. 82s. 9d. + 1s. 9d. delivery. London: Butterworth & Co. (Publishers) Ltd. South African Office: Butterworth & Co. (Africa) Ltd., P.O. Box 792, Durban. 1956.

*Contents:* Preface. Introduction. *Part I. Physiological Considerations.* 1. Motor Activities of the Stomach and Duodenum. 2. Secretory Activities of the Stomach and Duodenum. 3. Co-ordination of Motor and Secretory Functions of the Stomach. 4. The Law of Isoperistalsis and its Corollaries. *Part II. Pathological Considerations.* 5. Pathological Anatomy of Peptic Ulcer. 6. Haemorrhage and Perforation. 7. Pain in Relation to the Peptic Ulcer Problem. 8. The Experimental Ulcer and its Significance in Relation to the Aetiology. *Part III. The Pre-Ulcerative Stage.* 9. The Significance of the Variations of the Gastric Secretions. 10. The Inflammatory Reaction of the Gastric Mucous Membrane. *Part IV. The Pathogenesis of Chronic Peptic Ulcer.* 11. The Theories of Chronic Ulcer Formation. 12. The Acid Factor in the Causation of Chronic Peptic Ulcer. 13. Factors Preventing Healing. 14. The Syndrome of Hyperfunction. 15. The Clinical Evolution of the Chronic Ulcer. 16. The Bile Factor in the Causation of Chronic Ulcer. 17. Author's Theory of Chronic Ulcer Formation. 18. The Role of Fat in the Economy of the Organism. 19. The Vitamins in Relation to Fat. 20. The Deleterious Effects of Fat. *Part V. Clinical Considerations.* 21. The Incidence of Peptic Ulcer. 22. Diagnosis. 23. Critique of Orthodox Treatment. 24. Treatment of Perforation and Haemorrhage. 25. The Author's Standard Treatment. Appendix. X-rays. References. Index.

It is Dr. Spira's belief that chronic peptic ulcer is caused by the combination of biliary regurgitation into the stomach and gastric hypersecretion. The former, he states, is due to an excess of fat in the diet, and his treatment of peptic ulcer is based on limitation of that substance. For this he claims excellent results, but his diet is bland and his standard programme includes the use of alkalies and sedatives, decreased physical activity, total avoidance of alcohol, and moderation in smoking.

The vast bulk of the book is a review of the literature of peptic ulcer; very little is devoted to the author's own opinions. The list of references takes up 170 pages. The text does not read easily because so much of it consists of quotations or paraphrases of statements that Spira feels tend to support his conclusions. One is struck by the lack of original work by the author, who nowhere lists the results of treatment of his own cases.

He lays greater stress on 'gastritis' as a pre-ulcer lesion than most modern workers would consider justified. Nor would all agree that acute and chronic ulcers are completely different in their development, or that gastric and duodenal ulcers are expressions of the same disease differing only in the site of the lesion. Inadequate attention is paid to the role of hormonal influences on gastric secretion and ulcer formation. The author does not belong to the psychosomatic school when it comes to the aetiology of ulcer.

One finds it difficult to believe, on the evidence presented, that Dr. Spira has in fact discovered the cause and the cure of chronic peptic ulcer.

D.M.K.

## SURGICAL ANATOMY

*A Synopsis of Surgical Anatomy.* Eighth Edition. By A. Lee McGreggor, M.Ch., F.R.C.S. With a Foreword by Sir Harold J. Stiles, K.B.E., F.R.C.S. (Edin.). Pp. xii + 808. 766 Illustrations by Dr. E. A. Thomas. 32s. 6d. post 1s. 2d. Bristol: John Wright & Sons Ltd. 1957.

*Contents:* Preface to the Eighth Edition. Preface to the First Edition. Foreword. Introduction. *Part I. Anatomy of the Normal.* I. The Scalp. II. The Meninges and Cerebrospinal Fluid. III. The Anatomy of the Normal and the Enlarged Pituitary Body. IV. The Thyroid and the Parathyroid Glands. V. The Tonsil. VI. The Breast. VII. The Umbilicus. VIII. The Gut. IX. The Peritoneal Fossae. X. Accessory Peritoneal Bands. XI. The Biliary Passages. XII. The Kidneys and Adrenals. XIII. The Triangle of Marçelle. XIV. The Inguinal Region. XV. The Prostate. XVI. The Ischio-rectal Fossa. XVII. The Anal Region. XVIII. The Vertebral Column. XIX. The Anatomy of the Child. XX. Nerves. XXI. Muscles. XXII. Fasciae. XXIII. Bones. XXIV. Joints, Tendon-Sheaths, and Bursae. XXV. Ligaments. XXVI. Veins. XXVII. Lymphatics. XXVIII. Fat. XXIX. Lengths. XXX. Important Anatomical Levels. XXXI. Important Relations. *Part II. Anatomy of the Abnormal.* XXXII. The Anatomy of Congenital Errors. XXXIII. The Anatomy of Nerve Injuries. XXXIV. Bodily Habitus. XXXV. Anatomical Angles. Stiff Joints. XXXVI. Sphincters. XXXVII. Collateral Circulations. XXXVIII. The Teeth. XXXIX. The Limbs of Infantile Paralysis. 'Snapping' Joints. XL. The Pathology of Bone in Terms of Anatomy. XLI. Rectal and Vaginal Examination. XLII. Anatomical Bases of Clinical

Tests. XLIII. The Anatomy governing the Surgery of the Lymphatics. LXIV. The Anatomy governing the Surgery of the Sympathetic. XLV. The Anatomy of Certain Diseases. XLVI. The Anatomy of Surgical Procedures. XLVII. The Anatomy of Surgical Approach. Index.

This book was first published in 1932 and now the 8th edition has appeared. For an anatomy book this is indeed a remarkable record, but not one will find this surprising, because there are few surgeons who have not used this book with great benefit during their preparations for postgraduate degrees and afterwards.

The book is too well known to warrant a detailed description of its contents. Its object is to present anatomical facts of practical value without attempting to deal exhaustively with the anatomy of the whole body, and in this it succeeds admirably.

In this edition the book has been revised to bring it into line with present concepts; this is particularly noticeable in the sections on diaphragmatic hernia and the surgery of the sympathetic. Many additions have also been made, such as sections on paragangliomas, adrenalectomy and injuries to the large lymph ducts—these are written in the same lucid manner as the rest of the book.

There is no doubt that this book will (and should) continue to enjoy its tremendous popularity and it can be recommended confidently to all senior students and postgraduates in surgery. But more than that, every practitioner will find in this book valuable and interesting information and will be well rewarded by using it for occasional reading, for which it is so well suited.

D.J.duP.

## LIVER DISEASE

*Practical Diagnosis and Treatment of Liver Disease.* By Carroll Moton Leevy, M.D. Pp. xii + 336. 84 Illustrations, including 23 in full colour. \$8.50. New York: Paul B. Hoeber, Inc. 1957.

*Contents:* Foreword. Preface. 1. A Composite Approach. 2. Clinical Diagnosis. 3. Biochemical Liver Function Studies and Special Laboratory Procedures. 4. Anatomic Diagnosis. 5. Differential Diagnosis. 6. General Principles of Therapy. 7. Liver Disease Due to Nutritional Deficiency and Metabolic Disturbances. 8. Toxicopathic Liver Disease. 9. The Liver in Circulatory Disturbances. 10. The Liver in Biliary Obstruction and Infection. 11. Neoplastic Disease of the Liver and Liver Trauma. Index.

This attractive volume reflects a heroic effort. The author has fitted his own store of clinical and laboratory data (derived over a period of years from a thousand patients with liver disease) into a background of the recent literature on the subject; out of this are evolved a manifold concept of liver pathology, a diagnostic compendium correlating bedside, biochemical and histological items, and a busy clinician's guide to the practical management of every type of listed disorder.

Like Berlioz in another sphere, the work falls short of greatness. In part this is due to an unexciting, compact style in a dominantly statistical key; but the writing is lucid and direct, and its succinctness is attained without solecism.

Errors of spelling or printing, trivial perhaps individually, occur in such profusion that irritation mounts in the pedantic reader, causing him at best to wonder how such a well-dressed book can be rushed through production so fast as to escape a final scrutiny, or at worst whether its very content can be entirely dependable. A list of such mistakes should interest the publishers rather than the prospective reader; but special comfort might be extended to several authors in the otherwise full and up-to-date reference-lists whose names receive a mauling, including Adlersberg on page 230, Budtz-Olsen (page 105), Dissè (page 302), A. B. Gutman (page 102), Himsforth (page 286), Niemann (page 225), and Thannhauser (page 231) who is said to have written 'Lipidosis' (ed. 2). In reference 26 on page 230 radio-iron is misspelt, and so is naphthalene on page 272. Syphilis suffers on page 270, and the discovery a few lines later of 'Chlonorchis senesis' vaguely suggests an elderly trematode rather than the Chinese liver-fluke which is meant.

Elsewhere in the text one flinches past 'hydrochloretics' and 'chloretics' (page 161) to describe drugs affecting bile-production, and three drugs in Table 16 (where toxicopathic appears with an extra 'o') are also wrongly spelt. Towards the end the eruption of errors included pruritus masquerading as an inflammation (page 265), wrong vowels in residuum and vitamin (pages 268 and 279), periarteritis nodosa neutered in Fig. 45, caput medusa for caput medusae (page 282), and phosphorus looking like an adjective on page 238.

The index shares in this needless mutilation by having con-

sistently, in addition to several mis-spellings, the English amoebiasis where the text shows North American amebiasis, from which pattern it only departs to permit amoebiasis on page 324.

The substance of the book (lest the foregoing should savour of carping criticism) contains much that is useful. It is modern in its scope, slick yet searching in its academic chapters, and realistic in diagnostic and therapeutic programmes. Mention may be made of a pleasant section on hepato-renal relationships; of the emphasis placed on intolerance to surgical operations in those with impaired liver reserves; of the careful description of needle biopsy technique; and the uses and limitations of the procedure in many diseases involving the liver, including its value in the recognition of military tuberculosis. If the author is somewhat undiscerning in his account of anti-amoebic therapy, or of surgical procedures for oesophageal varices, he is encouraging in his personal experience of corticosteroids in the treatment of acute virus hepatitis, of certain instances of toxopathic liver disease, and of primary cholangiolar disease with threatening biliary cirrhosis not apparently due to infection. Students and practitioners, whose needs of the moment sometimes outweigh the luxury of enjoyment while reading, will find easy access to much organized material in this crisp monograph.

R.S.M.

## REFRACTION

*Practical Refraction.* By B. C. Gettes. Pp. vi + 170 with 58 diagrams and illustrations. \$6.50. New York: Grune & Stratton, Inc. 1957.

*Contents:* Preface. 1. Preliminaries to Sight Testing. 2. Astigmatism. 3. Astigmatism (Continued): Methods of Correction. 4. Accommodation. 5. Cycloplegia. 6. Subjective Methods of Testing. 7. Subjective Methods of Testing (Continued). 8. Hypermetropia. 9. Refraction of the Aphakic Patient. 10. Myopia. 11. Presbyopia. 12. Ophthalmic Lenses. 13. Contact Lenses. 14. Aids for Subnormal Vision. Index.

In concise, lucid terms, the author has in the compass of this short book succeeded in describing the art of refraction. Though intended for the instruction of the beginner with little or no previous experience, it nevertheless contains much of practical value and interest for the more advanced. Very correctly, the author has omitted the discussion of the geometry and physics of optics and the theory of retinoscopy that usually appear in a text-book on this subject, but has concentrated entirely on the practical side of refracting and the prescribing of spectacles.

He details the various procedures such as fogging, the use of the cross cylinder and so forth, and stresses the importance of the use of drugs when accuracy is essential, and for the pre-school and older child. Homatropine is a very unreliable and inconsistent cycloplegic and a good case has been made out for the use of cyclogyl. While agreeing that there is no reason why a myope should not have his full correction for constant wear, he recommends that bifocals are indicated regardless of age if that myope finds full, visual acuity essential for distance and full correction not tolerable for near.

For this country, his table of presbyopic aids appears too low. There is probably a climatic or racial reason for this, for it is well known that presbyopic symptoms develop later in life in inhabitants of the northern climates in comparison with those in the tropics. Apparently ophthalmic surgeons require presbyopic corrections early.

This book, then, while not as complete as, for instance, Duke-Elder's small book on 'The Practice of Refraction', serves a very useful purpose and makes a difficult subject appear extremely simple indeed.

L.S.

## CANNED FOODS

*Canned Foods—An Introduction to their Microbiology.* Fourth Edition. By J. G. Baumgartner and A. C. Herson, B.Sc., A.R.I.C. Pp. 291. 35 Illustrations. 21s. net. London: J. & A. Churchill Ltd. 1956.

*Contents:* I. Bacteria. II. True Fungi. III. Control of Spoilage. IV. Containers. V. Outline of Canning Operations. VI. Sources and Control of Contamination. VII. Principal Spoilage Organisms in Canned Foods. VIII. Effects of Heat on Micro-Organisms. IX. Principles of Canned Food Processing. X. Types of

Spoilage. XI. Microbiology of Sound Canned Foods. XII. Bacterial Food-Poisoning. XIII. Laboratory Examination of Canned Foods. XIV. Examination of Raw Materials, Plant and Miscellaneous Methods. XV. Examination of Cans. Appendix. Index.

One is delighted to see this new edition of Baumgartner's 'Canned Foods'. It is the 4th edition of this excellent work, which was first published in 1943, under the authorship of J. G. Baumgartner, then senior bacteriologist of Messrs. Crosse and Blackwell Ltd., of London. In his new edition, Mr. Baumgartner, now factory control manager, is assisted as joint author by Mr. A. C. Herson, the present senior bacteriologist of the Company. Since its earlier edition, the work has undergone considerable revision, and the authors are to be congratulated on the concise manner in which they have dealt with the relevant material.

Industrial and medical microbiologists, factory control chemists, factory managers, medical officers of health, health officials and students of food technology, will find sufficient information in the pages of this book to provide them with an excellent background to canned foods, their processing, and the microbiological spoilage which they from time to time undergo.

For factory control personnel, the chapters dealing with control of micro-organisms, containers, the outline of canning operations, and the control of contamination, are recommended. For the microbiologist, the chapters dealing with the type of spoilage, the microbiology of sound canned food, bacterial food poisoning, and the laboratory examination of canned food, provide a valuable reference. The chapters dealing with the examination of cans as well as the summary of common seam defects will be of considerable value to all workers.

The authors have also dealt with the development of the aseptic method of canning, with the application of antibiotics, and with ionizing radiation in food processing, and they have reviewed the new techniques for heat processing.

In my opinion this book is a 'must' for all persons interested in the field of food canning.

W.R.M.

## DISTURBANCES OF WRITING AND READING

*Die Störungen der Schriftsprache (Agraphie und Alexie).* Von Prof. Dr. A. Leischner. viii + 288 Seiten. 47 Abbildungen. DM 30.-. Stuttgart: Georg Thieme Verlag. 1957.

*Inhaltsverzeichnis:* Einleitung. Die Störungen des Schreibens. I. Die Entwicklung der Schrift. II. Die Einteilungen der Agraphien. III. Das klinische Syndrom der Agraphie. IV. Die Kasuistik der eigenen Beobachtungen zur Störung der Schriftsprache. 1. Teil Agraphie. V. Übersicht über die eigenen Erfahrungen im klinischen Erscheinungsbilde der Agraphie. VI. Die Topik der Störbarkeit des Schreibens nach dem Schrifttum. VII. Die Untersuchung des Schreibens. Die Störungen des Lesens. VIII. Die Einteilung der Alexien. IX. Die Symptomologie der Alexien. X. Die Kasuistik der eigenen Beobachtungen zur Störung der Schriftsprache. 2. Teil Alexie. XI. Übersicht über die eigenen Erfahrungen im klinischen Erscheinungsbilde der Alexie. XII. Die Lokalisationsfrage der Alexie nach dem Schrifttum. XIII. Die Lokalisation der Schädigungen der Schriftsprache beim eigenen Krankengut. XIV. Die Untersuchung des Lesens. XV. Die Ätiologie der Störungen der Schriftsprache. XVI. Die Behandlung der Störungen der Schriftsprache. XVII. Das Wesen der Schriftsprache und ihrer Störungen im Spiegel des Schrifttums. XVIII. Eigene Stellungnahme zum Wesen der Agraphie und Alexie und zur Möglichkeit, diese Störungen zu lokalisieren.

This book treats of agraphia—loss of the faculty of writing—and alexia—failure to understand the written word.

The author has written a very comprehensive book about the subject, which has been, and still is, most controversial. He enumerates the classifications which various workers have put forward, and points out that the best classification is the one which takes into consideration that writing is a secondary cerebral function of fairly late development resulting from surroundings and education.

He sets out the clinical symptomatology of the agraphias, and then discusses 30 cases of his own and comes to the conclusion that a pure agraphia does not exist. The attempts by various workers to define a centre in the brain for this disturbance are, in his opinion, erroneous, because writing is phylogenetically a very young entity and by no means universal, consisting of a great number of different elementary components, with different cortical localization.

The part of the book devoted to the disturbances of reading again deals with classification, symptomatology, experiences with a number of the author's own cases, and a review of the probable localization. The author comes to the conclusion that there are primary and secondary brain functions. The primary

functions are contained in the original build of the brain and have their own excretory organs. The secondary functions are accessory brain functions which only developed at a time when the development of the brain had already been completed. These therefore only have a loose connection with special areas—a relative localization which is dependant on education. Reading and writing are typical secondary brain functions.

The book is well written and not only gives the author's views on this debatable subject but also a very exhaustive survey of the literature. It is recommended for anyone who is particularly interested in the neurological aspect of this subject.

H.deV.H.

#### MAINGOT'S ABDOMINAL OPERATION

*The Management of Abdominal Operations.* Vols. I and II. Second Edition. Edited by Rodney Maingot, F.R.C.S. Pp. xvi + 1,432. Illustrations 540, with 444 figures. £8 net. London: H. K. Lewis & Co. Ltd. 1957.

*Contents: Volume I. Preface. Part I. General Considerations.* 1. Conditions affecting the Operative Risk for Abdominal Cases, by F. Avery Jones. 2. Preparation of the Good-Risk Patient, by Rodney Maingot. 3. Preoperative Treatment of the Acute Abdomen, by Rodney Smith. 4. Anaesthesia for Abdominal Operations, by J. Alfred Lee. 5. Remarks on Postoperative Care after the Uncomplicated Abdominal Operation, by Rodney Maingot. 6. Principles and Practice of Blood Transfusion, by R. J. Drummond. 7. Surgical Shock, by Rodney Smith. 8. Venous Thrombosis and Pulmonary Embolism, by Sol M. Cohen. 9. Fluid and Electrolyte Balance (Water Balance), in Surgical Patients, by L. P. le Quesne. 10. Postoperative Chest Complications, by Norman R. Barrett. 11. Complications of the Wound, by Ronald Reid. 12. The Use of Chemotherapeutic and Antibiotic Drugs in Abdominal Surgery, by William A. R. Thomson. 13. The Role of Vitamins in Abdominal Surgery, by Fred Wrigley. 14. Postoperative Parotitis, by Cecil Wakeley. 15. Genito-Urinary Tract Complications following Abdominal Operations, by J. C. Ainsworth-Davis. 16. Uraemia in Abdominal Surgery, by Clifford Wilson. 17. Alkalaemia and Acidaemia with Special Reference to Abdominal Cases, by Graham M. Bull. *Part II. Regional Considerations.* 18. Cancer of the Stomach, Cardia and Oesophagus, by John Borrie. 19. Lesions of the Oesophagus and Cardia, excluding Cancer, by John Borrie. 20. Gastric and Duodenal Ulcer, by Rodney Maingot. 21. The Complications and Sequelae of Gastric Operations, by Rodney Maingot. 22. The Treatment of Patients with Ulcer Haemorrhage, by Norman C. Tanner. 23. Acute Perforated Ulcer, by Norman C. Tanner. 24. Vagotomy, by H. Daintree Johnston. 25. Postgastrectomy Syndrome, by William W. Hallwright. *Volume II. Part II. Regional Considerations (Continued).* 26. Infantile Pyloric Stenosis, by David Levi. 27. Duodenal Ileus: Gastric Volvulus: Gastric and Duodenal Diverticula, by Rodney Maingot. 28. The Management of Biliary Tract Disease, by Rodney Maingot. 29. The Care of the Jaundiced Patient, by Ian Aird. 30. The Management of Cirrhosis of the Liver, by L. J. Witts. 31. Surgical Diseases of the Liver, by Cecil Wakeley. 32. The Surgical Aspects of Pancreatic Disease, by E. G. Muir. 33. Surgery of the Spleen, by R. Milnes Walker. 34. Inguinal Hernia, by A. K. Monro. 35. Strangulated Hernia, by A. K. Monro. 36. Intestinal Obstruction, by G. Qvist. 37. Chronic Appendicitis, by Rodney Maingot. 38. Acute Appendicitis, by A. J. Cokkinis. 39. Peritonitis: Primary and Secondary, by A. J. Cokkinis. 40. Post-operative Ileus, by A. J. Cokkinis. 41. Subphrenic Abscess, by H. R. S. Harley. 42. The Management of Surgical Lesions of the Colon, Rectum and Anus, by Henry R. Thomson. 43. The Management of Abdominal Injuries in Warfare and in Civil Life, by Gordon Gordon-Taylor. 44. The Management of Abdominal Operations in Children, by Denis Browne. *Part III. Special Considerations.* 45. Normal Values in Clinical Biochemistry, by D. N. Baron. Index of Names. Index of Subjects.

This, the 2nd edition of this well-known work, has been greatly improved by the substitution of two volumes for the original somewhat ungainly tome which made its appearance in 1953. Without exception, the authors are experts in their fields and have maintained a uniform standard of excellence under the editorship of Mr. Rodney Maingot. The surgeon of to-day has perforce to be no mean physiologist and the major portion of the first volume deals almost exclusively with the various physiological considerations relating to the proper care of the abdominal case both before and after operation. Fluid and electrolyte balance is of course dealt with in some detail, but it is surely not necessary

to explain the significance of milli-equivalents in three different chapters. If the reader does not get the idea the first time, there is no reason to suppose that he will be any more successful on subsequent occasions. The chapters dealing with venous thrombosis and anaesthesia for abdominal cases are especially excellent, while the section concerned with chemotherapy and the antibiotics is noteworthy for its failure to deal with the danger of staphylococcal enteritis following the indiscriminate use of the antibiotics. The 2nd volume deals with regional considerations, and in this part the indications for various operative procedures are discussed, and an account given of the different operative techniques employed. Since this is a book dealing essentially with the care of the patient before and after operation, surgical technique is not described in any detail and the impression is gained that, in a work of this nature, it might with advantage have been dispensed with almost entirely. These are however minor criticisms. The book is a mine of information and well deserves a place on the bookshelf of the up-to-date surgeon and surgical trainee.

S.B.B.

#### RELIGIOUS FACTORS IN MENTAL ILLNESS

*Religious Factors in Mental Illness.* By Wayne E. Oates. Pp. xv + 239. 16s. net. London: George Allen & Unwin Ltd. 1957.

*Contents: Preface. Acknowledgements.* 1. The Hindering and Helping Power of Religion. 2. Self-Deception and Self-Encounter in the Religion of the Mentally Ill. 3. Religions Culture in the Making and Breaking of Personality. 4. Some Differences Between Healthy and Unhealthy Religion. 5. Interpersonal Relatedness and Religious Experience. 6. The Positive Work of Religion in the Therapy of Mental Illness. 7. The Psychiatrist's Approach to Religious Experience in Mentally Ill Patients. 8. Therapeutic Problems in Relation to the Religion of the Mentally Ill. Appendix: Standards for Clinical Pastoral Education Adopted by the National Conference on Clinical Pastoral Training October 1, 1952.

People who have to deal with mentally disordered patients frequently encounter problems in which it is difficult to say whether they are dealing with psychiatric or religious questions, and find it difficult at times to decide at what point a religious idea becomes abnormal or whether the rather peculiar religious ideas harboured by some individual can be regarded as acceptable to his church or denomination.

In this book Dr. Oates sets out to answer these problems. He differentiates between true religion and religious ideas used as 'a self-concealment device'. He points out, too, the fallacies and misinterpretation of ideas that are found in the religious life of many who must be regarded as normal.

Dr. Oates makes a strong plea for better co-operation between the medical profession and the clergy, and in doing so he discusses the attitude of various psychiatrists towards religion and that of certain ministers of religion towards psychiatry. He gives very fair and careful consideration to defining the respective fields of influence and so avoiding trespass on each others preserves, but even so he advocates pastoral psychotherapy to a much greater degree than we are accustomed to or than we should expect from a non-specializing minister. Nevertheless Dr. Oates puts up a very good case for more intelligent co-operation between the doctor and the parson, in which each recognizes the other's qualifications and respects his clinical ability and insight rather than exhibiting a polite and benevolent tolerance of each other.

Unfortunately the psychological technicalities so often found in American works of this type make the reading of this book a difficult and involved matter.

D.S.H.