

Dr. Philip Gosse loves the English eccentric, and in *Thicknesse* he has collected a particularly fine example. Soldier, traveller, and journalist, he ranged widely through the eighteenth-century scene, cherishing affronts, provoking insults, and making enemies of his friends. A critical versifier wrote of him:

They say I'm a quarrelsome Fellow,
God rot it, why how can that be?
For, I never quarrel with any
But all the world quarrels with me.

The ripples of daily existence were by his passionate behaviour whipped to a tempest, and when he encountered a man of like temperament to himself, as he did in James Makittrick Adair, a Scots physician practising in Bath, the battle was violent and lifelong. They dedicated books to each other and their dedications were as bludgeons. Adair was a "base defamer, vindictive libeller, a scurrilous, indecent, and vulgar scribbler" with "a lewd and wanton daughter"; Thicknesse, "a celebrated Gout Doctor, Rape and Murder Monger" who "scatters his dung with an air of Majesty."

Now and again, this ardent controversialist was disappointed in his adversary, and how effective are the soft answer and the other cheek in such quarrels can be seen in his encounters with Thomas Gainsborough, with Dr. Moore the Archbishop of Canterbury, with Lord Bateman, and with the Prince de Ligne. Our biographer admits that his hero was an opium addict, a blackmailer, and a crook who cheated his own son. He might have forgiven his son the inheritance through his mother of a peerage and £2,000 a year, but he could never forgive him for being the victim of a father's swindle, and on the title-page of his book, *Memories and Anecdotes*, he describes himself as "late Lieutenant Governor of Land Guard Fort and unfortunately Father to George Touchet, Baron Audley."

Unshaken by such iniquities, Gosse describes him also as a man of character and intelligence, as a husband who lived devotedly with three successive wives, as a kindly and observant traveller, as a humane commander who allowed no flogging of his soldiers, and as the discoverer of the genius of Thomas Gainsborough. Philip Gosse is not a moralist who condemns or a psychologist concerned with the springs of human behaviour, but he is a fine naturalist who portrays the human character as skilfully as his grandfather painted his sea-anemones. This is a book to buy if your guineas are ample, and, if not, one for the top of the library list.

D. V. HUBBLE.

ANTIBIOTIC THERAPY

Antibiotic Therapy. By Henry Welch, Ph.D., and Charles N. Lewis, M.D., with a foreword by Chester F. Keefer, M.D. (Pp. 562; illustrated. \$10.) Washington: The Arundel Press. 1951.

In the earlier chapters of this book the authors describe the principal antibiotics in the order of their discovery, each chapter being prefaced by a biographical note and a portrait of the discoverer. The only other illustrations are diagrams representing absorption, circulation, and excretion, and purporting to represent the sensitivity of different genera or species to each drug. These diagrams are unhelpful, since they show only ranges over which sensitivity varies, the extremes being obviously abnormally high sensitivity and a high degree of acquired resistance. Thus the inhibitory concentration of chloramphenicol for "*Escherichia*" is given as 0.2–250 µg./ml. (and for *Clostridia* as 0.1–500 !), whereas it would have been more useful to say that most strains of *E. (Bact.) coli* are inhibited by about 5 µg./ml.

Few of these findings are referred to in the text, and the true susceptibility of various micro-organisms to each drug can therefore only be inferred from the clinical chapters which follow. In these the authors discuss individual diseases or groups of infections, and include descriptions of clinical features, methods of diagnosis, and general treatment which seem out of place. Thus the chapter on

tuberculosis begins: "Tuberculosis is an infectious disease caused by the tubercle bacillus," and continues for six pages before chemotherapy is mentioned. There are well-documented accounts of the results obtained with each antibiotic, but when several are applicable the authors rarely commit themselves to a preference for any one of them. Dosage is carefully specified for each condition. Much space could have been saved by describing systems of dosage in a separate section and referring to them thereafter by symbols, but perhaps this would have been inconsistent with the mixed metaphorical promise on the dust cover: "Allowances for the individual patient are tailored for the reader in a direct signposted path from the disease to the prescription."

It may seem ungracious so to criticize a book which is for the moment the best source of information on its subject, but it could be so greatly improved by deletions and condensation of some parts, and by expansion of those which deal with the choice of an antibiotic for a particular purpose. Its most useful features are a profusion of clinical information about the newer antibiotics, accounts of results obtained in many uncommon diseases, and descriptions of several antibiotics almost unknown outside the United States.

L. P. GARROD.

THYROTOXICOSIS

Thyreotoxikosen und Antithyreoidale Substanzen. By Professor Hans Wilhelm Bansi. (Pp. 100. M. 11.40.) Stuttgart: Georg Thieme. 1951.

It seems strange to be reviewing a book from the pen of a professor of medicine at Hamburg, the cleavage having been so complete for so many years. The subject being thyrotoxicosis and antithyroid substances, it is appropriate that the first sentence acknowledges the pioneer work of our Boston colleague, Astwood, and the bibliography shows a good knowledge of Anglo-American literature. There is nothing especially new for English readers. The recommended control tests of repeated blood counts, basal metabolism, and cholesterol have not been assiduously practised outside hospitals, and the first rarely permits anticipation of agranulocytosis, which comes like a bolt from the blue. It is of interest that American workers have found that agranulocytosis may respond to A.C.T.H. The author discusses on clinical lines the evaluation and limitations of thiouracil therapy and the indications for surgery. The book will serve a useful purpose and constitutes a reliable and not unduly verbose treatise on the subject.

S. LEONARD SIMPSON.

PLASTIC SURGERY FOR NURSES

Plastic Surgery: An Introduction for Nurses. By C. R. McLaughlin, M.B., Ch.B., B.Chir., F.R.C.S.Ed., with special sections by other members of the Queen Victoria Hospital Staff and illustrations by R. H. Dale, M.A., M.B., B.Chir., F.R.C.S.Ed. (Pp. 125; 32 figures. 12s. 6d.) London: Faber and Faber. 1951.

The author describes in simple terms the problems which will confront all nurses in a hospital specializing in plastic surgery. It is interesting that there is an apparent return to the classification of burns into three degrees in a hospital which was so outstanding in the treatment of this condition during the war. The general methods of treating facial fractures and the technique of most of the simple operations of plastic surgery are well described, and this is done in such a way as to make it possible for the nurse to have a clear idea of the problems with which she will be faced in the post-operative phase. There is a special section on theatre methods and on anaesthesia. Any nurse thoroughly familiar with the contents of this book would have little difficulty in the practical application of her knowledge.

RAINSFORD MOWLEM.