

lies in the isolation of the family units—from the grandparents, and from the innumerable friends and acquaintances of Bethnal Green, and also the new neighbours and all the others on the estate. The friendliness of Bethnal Green is replaced by a new standoffishness, the window-to-window relationship of suburbia and its exclusiveness. It is now bad policy to make friends. Lives are no longer centred upon people in a daily round of encounters both studied and by chance. Life now centres upon the home, with Mrs. Jones inexorably driving each family into competition with others: the home first, then the telephone, television, lawnmowers, car, curtains, and so forth.

Is this a temporary change? Bethnal Green, when the Huguenots came, was once a Greenlegh. Will Greenlegh in time develop like Bethnal Green with its own family clusters, its friendly personal relationships, its values based on people rather than possessions? To some extent, yes, since when those who moved are old there will be grandparents and children. Every area must be able to create its own kinship network, given time. But in a sense, no; the values of society are changing, so that perhaps what Bethnal Green stood for in human relationship is doomed; who knows? Then there is the future problem of housing. What happens when the children grow up? Where will they find a house? The housing estates will be bursting at the seams, and in contrast the schools will suddenly be empty. Children cannot any longer take on the home vacated by their parents. They must move again. The advantages for housing which a three-generation community presents are lost. When the grandparents die the children cannot move in and later move on; a two-generation structure is always on the move.

No short account can do justice to this book, charmingly written, engaging, absorbing. It is to be hoped that town-planners will read it, and think more deeply about the need to do more to re-create our existing towns.

C. FRASER BROCKINGTON.

NORFOLK DOCTOR

Left-handed Doctor. By Peter Quince. (Pp. 194. 16s.) London: J. M. Dent and Sons Ltd. 1957.

This is an unusual autobiography. In it the author tells the story of his seven years in family practice in Norfolk villages 25 years ago. There is nothing sinister about Dr. Quince, despite his titular description, for he takes a delight in human nature and describes with a rare relish the common-places of human relationships and the oddities of mankind. He has observed himself as acutely as he has studied any of his subjects, and he draws an ingenious self-portrait, revealed sometimes through the delineation of his other sitters and sometimes by the comments upon them which illustrate his own personality. We see him as a man determined to do what he wanted to do and enjoying the doing of it—a man, too, who eschews cant in himself and dislikes humbug in others. He was, therefore, albeit a successful family doctor, not to be easily confined to the mould of general practice.

His left-handedness is explained in the amusing drawing on the wrapper. He gave to the practice of medicine no more than his left hand, while his right hand was occupied with the training of village choirs and with the production of comic operas, thus fulfilling a destiny laid upon him by his devotion to a music-master of his schooldays. (James Barrie related that his "unpleasant" plays, like *Mary Rose*, were written with his left hand, and his pieces of sentiment, like *The Admirable Crichton*, with his right.) The story of his right-handed devotion to music-making is completed in a penultimate chapter of hints and tips for choir-trainers, while the summation of his experience of 30 years of both left-hand and right-handed doctoring (for we infer that he cultivated ambidexterous doctoring in middle age) is told in a testament delivered to a St. Luke's Day audience in the parish church of Norwich in 1953. We learn little of the 20 years between his departure from the family practice and the St. Luke's Day address. There is, therefore, another book, *Right-handed Doctor*, waiting to be written. The coming of the National Health Service makes it more diffi-

cult, for those who began by practising left-handed medicine, later to devote their powerful right hands to the service of the slighted goddess, though this was by no means an unusual pilgrimage in the author's generation.

This is a book both sensible and gay, well worth the writing and well worthy to be read.

D. V. HUBBLE.

MUSCLE RELAXANTS

Muscle Relaxants in Anesthesiology. By Francis F. Foldes, M.D. Illustrated by Margaret M. Croup. (Pp. 210+xx. 42s.) Springfield, Illinois: Charles C. Thomas. Oxford: Blackwell Scientific Publications. 1957.

The literature on the relaxants is now profuse, but strangely enough, apart from an early historico-pharmacological book, no monograph on these drugs has yet appeared. Now this deficiency has been made good by Foldes, a tireless worker in this field and internationally known for his original contributions. His interests have centred almost exclusively on the depolarizing relaxants, and in particular on succinylcholine. As would be expected, therefore, his book is weighted in almost every way in that direction. In the last six chapters, for example, which are devoted to clinical use, there is hardly one in which succinylcholine is not claimed with some emphasis to be superior to the others. Many British and European anaesthetists, on this account alone, will probably take exception to many of the clinical opinions of Dr. Foldes. Once this bias on the part of the author is allowed for, the book appears as an excellent review, carried out in masterly fashion, of the literature on the relaxant drugs. The pharmacological section, easily the best, describes exhaustively, albeit concisely, what is known about the mode of action of the relaxants. The references to original sources are so numerous (over 400 are listed) as sometimes to be a hindrance to the reader. However, they make the value of the book as a guide to the literature unquestioned. If only the title had been "Succinylcholine and Other Relaxants" praise would have been unreserved, for the message of the book would have been clear. As it is, the clinical sections must be studied with some caution. The book as a whole is a contribution of the highest order to an important field of pharmacology and anaesthesia, and Dr. Foldes is to be congratulated on his achievement.

W. W. MUSHIN.

SCHIZOPHRENIA

Schizophrenia: Somatic Aspects. Edited by Derek Richter. (Pp. 181+viii. 40s.) London, New York, Paris: Pergamon Press. 1957.

As the editor explains in the introduction, this volume is the result of discussions held by a small group of scientists and clinicians working in this country that culminated in a "discussion party" arranged with the assistance of the Mental Health Research Fund and held at the Ciba Foundation in London. It contains a number of valuable reviews of the present state of knowledge concerning different aspects of schizophrenia, which "from some points of view . . . is the biggest single problem in the whole of medicine." Dr. Denis Hill deals with the electroencephalogram in schizophrenia; Dr. Derek Richter with the biochemical aspects; the late Dr. D. E. Sands with the endocrine changes; and Mr. G. B. David with the pathological anatomy. Other noteworthy papers include "Physical Characteristics of the Schizophrenic Patient," by Dr. W. Linford Rees, and "Interaction of Genetic and Environmental Factors in the Causation of Schizophrenia," by Professor Martin Roth. The last paper includes much valuable and interesting genetic and sociological data. The striking point that emerges is that, despite a vast amount of careful research, physical investigations have so far proved essentially negative in schizophrenia, except possibly in the small group of recurrent catatonia. It is, however, valuable to have this authoritative account of what is known and of current investigations. Some of the contributions (not mentioned by name) do not reach the high standard set by the others.

DESMOND CURRAN.