

Reviews

UNEQUALLED RICHNESS

The British Medical Dictionary. Edited by Sir Arthur Salusbury MacNalty, K.C.B., M.A., M.D.(Oxon.), F.R.C.P., F.R.C.S. In collaboration with over one hundred specialist contributors. (Pp. 1,680+xix. £10 10s.) London, Toronto, Melbourne, New York, and Wellington: The Caxton Publishing Company Limited. 1961.

Those who have much medical writing or editing to do have long been conscious of the need for a fully comprehensive English medical dictionary. There are one or two excellent American ones, but the two languages have diverged too far for American books to be satisfactory guides to the writing of English, and it is tedious to have to explain to a secretary that "erythema" is correct English and "erythremia" is not. Difficulties are also experienced by the many foreigners who write scientific books, papers, and summaries of articles in English, and who often prefer to use English rather than American ways of spelling. English is already the common tongue of European scientists, and it is likely to be even more widely used if Great Britain joins the Common Market.

The need referred to has now been supplied by this large *British Medical Dictionary* edited by Sir Arthur MacNalty in collaboration with over 100 specialist contributors. There is a long tradition of English medical dictionaries, but the labour of preparing this volume must, nevertheless, have been immense. The decision as to what is medical and what is not must often be not an easy one. The foundation of the special language of medicine appears to be anatomy and pathological anatomy, but a complex structure of chemistry, physiology, biology, pharmacy, and psychology has been erected on top of this. Some words like aprication, meaning sunbathing, have lost their currency; others like positron are fresh from the mint. Eponyms are becoming unfashionable, but they are still widely used and it is intensely irritating when they cannot be traced; so Sir Arthur MacNalty and his colleagues have been wise in including them on a generous scale.

For each word there is given the pronunciation, meaning, and derivation. It is usually easy to guess the preferred form. Thus haemopoiesis is preferred to haematopoiesis, and leucocytosis and similar words are spelt with a c, only leukaemia and its derivatives having a k. The derivation and pronunciation of words in subheadings is not given, and the reader with little Latin may continue in doubt whether mellitus has a long or a short i. All this material has required a book of nearly 1,700 double-column pages which weighs 7½ lb., but which has been beautifully bound so that it lies flat wherever it is opened, like a good bible on a lectern. It is clearly printed, and even the presbyopic can read it without difficulty. There are no illustrations, as is proper in a book that is a dictionary and not an encyclopaedia.

As a member of an ancient university whose members are not often lavish in their praise of each other I have been impressed by the high esteem in which lexicographers are held. Their work is indeed one of the best examples of pure scholarship. George Bernard Shaw once foolishly boasted that he never needed to consult a thesaurus, but it is my experience that the better the scholar a man is the readier he is to check

the words and phrases he uses. The Germans have the beautiful word *Wortschatz* (word treasure) to mean a man's vocabulary, and the vocabulary of the English language is of unequalled richness. Some recent writers on English as a tool for the expression of scientific ideas appear to have forgotten that there were great men before Fowler, men like R. L. Stevenson and Pater, and the use of the utterly correct word is usually to be preferred even if it is unfamiliar and demands some effort from the reader.

It is with ideas like these in mind that one welcomes this great new dictionary. It is the work of many men's hands, and it would be presumptuous to criticize it in detail after superficially scanning its pages. Dictionaries on this scale are unlikely to be started more than once in a generation. Language, however, is a living and changing thing, and at present our language is evolving rapidly as a result of the revolutionary changes in science. It is to be hoped, therefore, that this dictionary will be given the kind of support that will enable it to remain a standard reference work and to be issued in successive editions through the years so that it becomes an indispensable guide to all who contribute to medical literature in English.

L. J. WITTS.

PROGRESS IN CLINICAL SURGERY

Progress in Clinical Surgery. By various authors. Edited by Rodney Smith, M.S., F.R.C.S. Series II. (Pp. 327+ix; illustrated. 50s.) London: J. and A. Churchill Ltd. 1961.

This is an authoritative work and therefore should be widely read by surgeons and by candidates for the final F.R.C.S. examination. In the opinion of the reviewer, however, and despite prophetic apologies by the editor, it is a pity that there are important omissions, for this fact impels the student to turn elsewhere to obtain a more complete picture of recent advances in surgery. Thus there is inevitable overlap and hence unnecessary expenditure of time and money. The 23 contributors effectively cover progress in cardiac surgery, the surgery of cerebrovascular accidents, arterial reconstruction in the treatment of atherosclerosis, hyperparathyroidism, Cushing's syndrome, thyrotoxicosis, thyroiditis, hiatus hernia, the repair of large herniae, hepatectomy, hepatic coma, the treatment of acute haemorrhage from gastro-oesophageal varices, strictures of the common bile-duct, the management of ascites, progress in pancreatic surgery, diverticulitis coli, the management of congenital dislocation of the hip, Hirschsprung's disease, ectopia vesicae, transplantation of the ureters, the treatment of tetanus, and pulmonary resection for metastatic tumours.

Only minor criticisms are justified. Dehydration does not lead to hyponatraemia but, if anything, to hypernatraemia. Intercostal arteries join rather than enter the aorta. A long account of elective cardiac arrest by potassium seems superfluous when alternative methods are stated to be preferable. There may be a place for the surgical treatment of secondary hyperparathyroidism. Determination of the basal metabolic rate may have more significance when it is preceded by adequate sedation. Is it not sometimes expedient to combine prostatectomy with the surgical treatment of a large inguinal hernia, and is there no place for unilateral orchidectomy in such cases? Are the expressions water and electrolyte balance or imbalance to be taken literally? Is the isolated rectal bladder always sterile?

The book is beautifully produced. The paper, printing, and illustrations are first rate. The text

contains some examples of unorthodox punctuation and unusual use of words. Two inaccurate references were noted. The majority of the chapters defy criticism and are a pleasure to read.

RALPH SHACKMAN.

LEUCOCYTE ANTIBODIES

Leukocyte Agglutinins. Properties, Occurrence, and Significance. By Sven-Åge Killmann, M.D. (Pp. 95. 20s.) Oxford: Blackwell Scientific Publications. 1961.

Much of the literature available now on leucocyte antibodies is very confusing, because a great deal of it is contradictory. This applies particularly to the technique of detecting these antibodies *in vitro*. In this small but highly informative book the author has endeavoured to gather together all the available literature on the subject, and has supplemented this with details of his own technique, together with a critical appraisal of the techniques of other workers in the field.

The most widely used method for detecting leucocyte antibodies is the leucocyte agglutination test, and the technical simplicity of this test gives it a distinct advantage over other tests. Complement consumption tests and antiglobulin consumption tests, which are described briefly, are much more time-consuming and have the big disadvantage of requiring a very large number of white cells. However, the author recommends that the agglutination test should be supplemented by one of these other tests as they detect incomplete antibodies which may occur in sera lacking leucocyte agglutinins.

Most leucocyte antibodies are iso-antibodies, resulting from immunization with foreign leucocytes, either by transfusion or during pregnancy. The author defines his criteria for terming an antibody "naturally-occurring," and concludes that as yet there is no record of any leucocyte antibodies definitely meeting these requirements. Instances of "auto-aggression" are described in which leucocyte agglutinins are present which damage the patient's own leucocytes, and the literature is reviewed on the occurrence of such antibodies in various diseases and after administration of certain drugs.

The chief practical importance of leucocyte antibodies lies in the fact that they may be responsible for severe transfusion reactions which can be avoided by the use of leucocyte-free blood. Though the author supplies several references to the techniques of removing the leucocytes, it would have been better had he included details of at least one of them.

This book is well written and shows abundant evidence of the author's wide experience. This is a book which should prove to be indispensable to anyone interested in leucocyte antibodies.

M. J. POLLEY.

BIOCHEMISTRY OF ENZYMES AND HORMONES

Fermente—Hormone—Vitamine: und die Beziehungen Dieser Wirkstoffe Zueinander. Volume I. *Fermente.* Edited by R. Ammon and K. Myrback. Third edition. (Pp. 564+xx; illustrated. DM. 96.) Stuttgart: Georg Thieme Verlag. 1959. Volume II. *Hormone.* Edited by Robert Ammon and Wilhelm Dirscherl, with 14 contributors. Third edition (Pp. 897+xxiv; illustrated. DM. 148.) Stuttgart: Georg Thieme Verlag. 1960.

This is the third edition of a work which has firmly established itself on the shelves of reference libraries since its reintroduction in 1943. (The first pre-war edition was in 1937.)

Volume I systematically covers the biochemistry of enzymes, and, being a two-author book, it is more readable than many a similar treatise of which the text has flowed from several pens. The introduction to enzyme chemistry and the large group of hydrolases is dealt with by Professor Ammon, and all the remaining enzymes—the transferases, isomerases, decarboxylases, and so on—are discussed by Professor Myrback.

One has nothing but praise for the gigantic effort that has gone into the production of this encyclopaedic work, though it seemed to the reviewer that more emphasis might have been given to the growing points of this branch of biochemistry, notably in the chapter on transformylation. In the introductory chapter on enzyme action one would have liked to see a fuller discussion of the theories of enzyme action. The general lack of emphasis makes it difficult to recommend the book to students. These minor criticisms do not detract from the intrinsic value of the work. It will be welcomed by all research workers and may even find favour with the biochemically orientated clinician who masters the German language.

In Volume II the two editors have called on a dozen colleagues to give the work its full breadth and width. Most substances that can be classified as hormones, whether they belong to animal or plant tissue, are described in detail. The authors have succeeded to a large measure in producing a thoroughly comprehensive survey of the subjects, and the well-balanced presentation has skilfully avoided the overlapping of the various aspects. It is apparent, however, that some of the authors were in difficulties with regard to references to clinical conditions, as the book was not intended to be a treatise on endocrinology. Hence one wonders why totally inadequate chapters on therapy were included. Similarly, one is surprised at the excursions into the realm of synthetic chemistry, which is of little more than historical interest. Some reading in the steroid chapters the reviewer found overburdened with poorly coordinated detail, which instead of stimulating him left him with mental indigestion. Other chapters, like that on tissue hormones by P. Holtz, are outstanding in their lucidity of style and clarity of insight. This volume, like its companion, can be warmly recommended to the research worker for reference, though few references go beyond 1957. The minor criticisms voiced here should not detract from the great merits of the work—in fact, there is nothing quite like it available in the English language.

The printing and binding of these two volumes are of the good quality and high standard one is accustomed to from the Thieme Verlag.

E. KAWERAU.

THE DYNAMICS OF SUBNORMALITY

Subnormal Personalities. Their Clinical Investigation and Assessment. By C. J. C. Earl, F.R.C.P.I., D.P.M., F.R.P.S. With additional material by H. C. Gunzburg, M.A., Ph.D., F.B.Ps.S. Foreword by Kenneth Soddy, M.D., D.P.M. (Pp. 338+xiv. 30s.) London: Baillière, Tindall and Cox. 1961.

C. J. C. Earl was best known for his work on "The Primitive Catatonic Psychosis of Idiocy." In this posthumous work he expounds his dynamic interpretation of mental subnormality. He points out, quoting Sarason, that once the patient is classified as mentally deficient he is treated as such and not subjected to the psychotherapeutic procedures which have been found effective with patients of normal intelligence.