

Reviews

MEDICINE IN TRANSITION

Nursing and Nursing Education. By Agnes Gelinás, R.N. *Health Insurance in the United States.* By Nathan Sinai, Dr.P.H., O. W. Anderson, and Melvin L. Dollar. *Medical Addenda. Related Essays on Medicine and the Changing Order. Medicine in the Changing Order.* New York: Commonwealth Fund. London: Geoffrey Cumberlege. (\$1.00 or 6s. \$1.50 or 8s. 6d. \$1.75 or 10s. 6d. \$2.00 or 11s. 6d. respectively.)

The U.S.A. is a big country and it does big things in a big way. In 1942 the New York Academy of Medicine appointed a strong committee representing every side of opinion, medical and allied, to consider the present and future outlook of medicine. It began by defining its objectives as follows: "To be informed on the nature, quality, and direction of the economic and social changes that are taking place now and are clearly forecast for the immediate future; to define in particular how these changes are likely to affect medicine in its various aspects; to determine how the best elements in the science of medicine and in its services to the public may be preserved and embodied in whatever new social order may ultimately develop."

During the years that have elapsed the Committee has issued some ten volumes of monographs on every aspect of its task; the latest are *Nursing and Nursing Education*, *Health Insurance in the U.S.A.*, a volume of *Medical Addenda*, and *Medicine in the Changing Order*. Owing to the exigencies of space it is necessary to confine this review to the last named, in which the Committee states its considered views on the subject of its reference. It is very frank about what it thinks are the defects in the present provision of medical care. It believes that both the public and the profession want a great extension of it in quantity and in quality. It finds public health measures—"the first steps in the evolution of good medical care"—to be very inadequate in many areas. It notes with pleasure the great increase in the number of hospitals, but judges their quality in many areas to be in great need of improvement.

There is a strong disposition in many young doctors to avoid the rural areas not only on financial grounds. The provision of good hospitals accompanied by group practice (which it strongly recommends) would be a great attraction to many young men, and it advocates their being sent in their clinical years to approved rural hospitals by arrangement between the hospitals and the medical schools.

Much attention is given to medical insurance and to the numerous experiments of a voluntary nature made in recent years. The Committee comes down heavily on the side of voluntary schemes, and hopes that more encouragement will be given to people above the lower-paid groups to enter them, since they are a better insurance risk and their presence would help to popularize and to improve the quality and status of such schemes. "Voluntary insurance," it says, "leaves the physician the play of initiative and resourcefulness and individual responsibility." The report advocates Government grants and employers' contributions on behalf of the lower-paid people "as a sound alternative to an overall programme of compulsory insurance." The schemes, it thinks, "are much safer and more adaptable than compulsory plans, the consequences of which are at best uncertain and are in any event irrevocable." "It is on a voluntary basis that the great progress of medicine has been achieved in the past, and it is thus that continuance of progress can be assured." It is rather startling to read, "We do know from European experience that even as the general level of medical practice is lowered its costs are raised."

Discussing the various methods of payment of doctors the Committee says, "Abuses are possible in all methods of payment, whether fee for service, capitation, or salary. Thus no valid statement can be made that this or that system is best *per se*. There lies the great advantage of voluntary plans as compared with compulsory: they permit wide local experimentation in working out the system best adapted to a given time and place." While there is room for differences of opinion on

many of the knotty points raised in this report, there can be no doubt that the Committee has done its work ably and thoroughly and that its volumes cannot be ignored by students of medical sociology wherever they may be.

ALFRED COX.

BLOOD PROTEINS

Die Bluteiweisskörper des Menschen. By F. Wuhrmann and C. H. Wunderly. (Pp. 354; illustrated. 36 Swiss francs.) Basle: Benno Schwabe. 1947.

This book is mainly about the value of examining the blood proteins in human clinical practice. After reviewing the methods available for this type of investigation the authors present the results of the experience gained over a number of years by themselves and their colleagues on clinical material. The methods used in their investigations were: (1) the salting-out curve in strong phosphate buffers; (2) the electrophoretic pattern; (3) the Weltmann test; (4) the cadmium-sulphate turbidity test, a recently developed simple clinical test; (5) the Takata-Ara reaction; and (6) the sedimentation rate.

The following correlations of empirical tests with the electrophoretic pattern may be noted. The Weltmann band was found to be broad when the γ -globulin was very high, and narrowed by an increased α - or β -globulin. The cadmium turbidity test was given when a high γ - or α -globulin was present and inhibited by an excess of β -globulin. The Takata-Ara reaction was given when a high β - or γ -globulin was present. The authors discuss the blood-protein reactions in various diseases of importance in practice and disturbances of the blood proteins. This part of the book is well illustrated by appropriate data, most notably by the presentation of salting-out curves and electrophoretic patterns.

The six types of reaction pattern distinguished are (1) acute inflammations; (2) subacute and chronic inflammatory processes; (3) diffuse liver-cell injury; (4) the nephrotic symptom complex; (5) γ -plasmacytoma; (6) β -plasmacytoma. Abnormal fibrinogen values were most common in diseases involving abnormalities of blood coagulation and haemorrhagic diatheses. Disturbances of serum globulin were mostly related to malignant tumours such as leukaemia, sarcoma, carcinoma, and particularly to the plasmacytomas. They do not, however, provide a specific test for tumours, since they may occur in inflammatory processes, especially chronic forms which might be diagnosed as malignant tumours; but they do afford an interesting basis for subdividing the plasmacytomas according to whether the γ - or β -globulin is abnormally high. The changes in serum globulins were usefully followed by electrophoretic methods in acute and chronic infections, and in these diseases, especially in phthisis, it was the α -globulin which was mainly affected. Albumin, when it was disturbed, was always lowered, and this was nearly always the cause of hypoproteinaemia.

The observations embodied in this book are both empirical and fundamental, so that they should be of interest to the research worker as well as the clinician.

D. P. CUTHBERTSON.

EXAMINING THE SURGICAL CASE

Clinical Methods in Surgery. By K. Das, M.B., F.R.C.S. (Pp. 240; 199 illustrations. Rs. 20 or 35s.) Calcutta: The City Book Company. 1947.

The student beginning his surgical work in the wards is usually given some elementary lessons in case-taking to help him in his task, but some of the printed guides which accompany the lectures are mere lists of instructions—dull and uninspiring. The author of this book states that he has tried to answer the question, "How shall I investigate this case?" and on the whole he has answered it satisfactorily. In 41 chapters he discusses the method of examining the various conditions which the surgeon meets with, and at the end of each section he briefly, perhaps too briefly, enumerates the common causes of the condition which need differentiation. The book is very well produced and the illustrations are for the most part excellent; in Fig. 70, however, we think one eye should be shown covered

up by one hand so that the consensual reflex may be avoided. The necessity for brevity has in some instances resulted in descriptions which may have an unexpected effect on the reader, as for example when he reads concerning duodenal ulcer, "a young man, quite busy, swallows his meals hastily at irregular intervals between cigarettes and telephone calls."

In the preface the author states that the book was composed in a fateful year during which continual disturbances prevailed in the city of Calcutta, disturbances which considerably hindered his choice of material. It is to his credit that in spite of this drawback he has succeeded in producing a book which should be of considerable assistance to the beginner in surgery.

V. ZACHARY COPE.

SPANISH-ENGLISH DICTIONARY

Spanish-English Medical Dictionary. By Maurice McElligott, F.R.C.S.I., D.P.H. (Pp. 250. 12s. 6d.) London: H. K. Lewis and Co., Ltd. 1946.

The author of this small dictionary says in the preface that he has compiled it after many years of search for the Spanish equivalents of English medical terms. It contains 14,000 Spanish words translated into their English equivalents, but there are many lacunae, more especially among the less ordinary terms. He gives no explanations or examples of how to use the words, and the dictionary therefore does not meet the need of translators. The volume might be more correctly described as a glossary and be of use in checking spelling or in conjunction with works of reference. Used alone, its adequacy as a dictionary is questionable. The author is apparently aware of these limitations, for he asks in his preface that readers inform him of any omissions they may observe so that they may be made good in future editions. He has taken every precaution to ensure the accuracy of the words listed, and the orthography of the English terms is that of the *Oxford English Dictionary*. He proposes to follow this dictionary with a companion volume of English-Spanish medical terms.

V. MCGUIRE.

IDEALISM IN ACTION

Albert Schweitzer. The Man and his Mind. By George Seaver. (Pp. 346; 30 illustrations. 18s.) London: Adam and Charles Black. 1947.

Even the irreligious and the non-musical know the name of Albert Schweitzer. Born in Alsace in 1875, he had before he was 30 acquired a European reputation in music, philosophy, and theology. An outstanding organist, he early illustrated his capacity for taking pains by becoming not only expert in the craft of organ-building but also the leading interpreter of Bach. At 30 he decided to take a medical qualification so that he might carry healing to the sick African, and the greater part of the second half of his life has been spent in Equatorial Africa working in a mission hospital built by himself. Reverence for life has been his philosophical keyword and compassion the mainspring of his action. His biographer regards him as "probably the most gifted genius of our age, as well as its most prophetic thinker."

These are large claims, and some of the interest of the biography lies in the assessment of them. One concludes that while his gifts are incomparable the quality of his thought is less striking, and his philosophic concept of reverence for life has hardly the basic comprehensiveness which he attributes to it. The truly remarkable thing about Schweitzer is his personality and the ethic that inspires it. Rarely does the artist and thinker voluntarily renounce his art and his thought for a life of action in physical discomfort and danger. If the twentieth century is hurrying to its materialist doom it cannot complain that it has lacked extraordinary and topical examples of the strength of idealism in action. The lives of Gandhi and Nansen, as well as of Schweitzer, come readily to mind. Those who read biography to enjoy the spectacle of littleness in great men (and I confess to being encouraged by even the tiniest wart on the illustrious nose) should avoid this life of Schweitzer as they would that of the Archangel Gabriel.

D. V. HUBBLE.

BOOKS RECEIVED

[Review is not precluded by notice here of books recently received]

Dermatoses Among Gas and Tar Workers. By W. D. Jenkins, J.P., B.A., M.R.C.S., L.R.C.P. (Pp. 54. 25s.) Bristol: John Wright. 1948.

A monograph, with illustrations.

Fundamentals of Neurology. By E. Gardner, M.D. (Pp. 336. 24s.) Philadelphia and London: W. B. Saunders. 1947.

An introduction for medical students.

Textbook of Bacteriology. By T. B. Rice, A.M., M.D. 4th ed. (Pp. 603. 32s. 6d.) Philadelphia and London: W. B. Saunders. 1947.

A short textbook for medical students and practitioners.

Textbook of Surgery for Nurses. By E. S. Stafford, B.A., M.D., F.A.C.S., and D. Diller, B.A., R.N. (Pp. 577. 16s. 6d.) Philadelphia and London: W. B. Saunders. 1947.

Intended to provide general surgical information for the student nurse.

Cineplasty. By H. H. Kessler, M.D., Ph.D. (Pp. 201. 35s.) Oxford: Blackwell Scientific Publications. 1947.

An account of operative techniques, prostheses, and rehabilitation.

Osteotomy of the Long Bones. By H. Milch, M.D. (Pp. 294. 35s.) Oxford: Blackwell Scientific Publications. 1947.

A practical account of osteotomy, with many illustrations.

Sexual Behaviour in the Human Male. By A. C. Kinsey et al. (Pp. 804. 32s. 6d.) London: W. B. Saunders. 1948.

A compendious account of the sexual conduct of men in the U.S.A.

P-Q-R-S-T. A Guide to Electrocardiogram Interpretation. By J. E. F. Riseman, M.D., 2nd ed. (Pp. 84. 17s. 6d.) New York: The Macmillan Company. 1947.

Many diagrams of E.C.G. records and notes on interpreting their significance.

The Child's Hearing for Speech. By M. D. Sheridan, M.A., M.D., D.C.H., L.R.A.M. (Pp. 120. 10s. 6d.) London: Methuen. 1948.

An investigation into the relation between speech, hearing, and intelligence in childhood.

Principles of Medical Statistics. By A. Bradford Hill, D.Sc., Ph.D. 4th ed. (Pp. 252. 10s. 6d.) London: *The Lancet*. 1948.

A practical introduction to statistics for the medical man.

The Science and Practice of Surgery. By W. H. C. Romanis, M.A., M.B., M.Ch., F.R.C.S., F.R.S.Ed., and P. H. Mitchiner, C.B., C.B.E., T.D., M.D., M.S., F.R.C.S., D.Ch. Vols. I and II. 8th ed. (Pp. 892, vol. I; 955, vol. II. 25s. each vol.) London: J. and A. Churchill. 1948.

This well-known textbook includes new material on plastic surgery, x-ray therapy and diagnosis, anaesthesia, and venereal diseases.

Diseases of the Breast. By Sir Crisp English, K.C.M.G., F.R.C.S. (Pp. 128. 8s. 6d.) London: J. and A. Churchill. 1948.

A short account based on the author's experience.

Surgery of the Ambulatory Patient. By L. K. Ferguson, A.B., M.D., F.A.C.S. 2nd ed. (Pp. 932. 72s.) London: J. B. Lippincott. 1947.

A practical manual of minor surgery intended for house-surgeons and general practitioners.

Textbook of Endocrinology. By Hans Selye, M.D., Ph.D., D.Sc., F.R.S.Can. (Pp. 914. \$10.24.) Montreal: Acta Endocrinologica. 1947.

A textbook for student and physician.

Milk Products. By W. C. Harvey, M.D., D.P.H., F.R.San.I., and H. Hill, F.R.San.I., A.M.I.S.E., F.S.I.A. 2nd ed. (Pp. 341. 30s.) London: H. K. Lewis. 1948.

A practical manual on the manufacture, composition, and examination of edible milk products.

Textbook of the Nervous System. By H. C. Elliott, M.A., Ph.D. (Pp. 384. 48s.) London: J. B. Lippincott. 1947.

An account of the anatomy of the nervous system, with many diagrams, for medical students.