

a demonstrable and preventable part in permanent reduction of human achievement. There can be no doubt about the ill effect of severe prolonged malnutrition in famine conditions on the potential of the human brain. Also well documented are effects of clinical conditions such as cystic fibrosis and early resection of the ileum.

Fresh life has recently been given to the old nature/nurture controversy in regard to intelligence, and the analogy of height suggests that within "developed" countries class differences may have some relationship to nutrition. The problem is that in underprivileged populations or classes there is a host of interacting social variables, many of which may compound the effect of poor diet. Contrariwise, if other factors are favourable the effects of moderate malnutrition may be mitigated.

The authors of this volume, who are all experts in different aspects of child development and based in the United States, set out clearly much of the available information in this difficult field, the importance of which for the future of humanity cannot be over-emphasised.

The summary of the evidence presented here raises more questions than it answers and emphasises the many contradictions between studies. The reason for these is the inevitable incompleteness of the evidence. At a basic level a number of observers have found reduction in head circumference attributed to malnutrition. Intelligence, however, as a derived variable is more difficult to measure and more open to a host of modifying influences. This book can be wholeheartedly recommended for all interested in child development.

BRIAN KIRMAN

### Controversy in Surgery

Ed Richard L Varco and John P Delaney. (Pp 713; £23.75.) Saunders. 1976.

The thing that makes medicine such a fascinating life-long study is its controversies. World-respected authorities will have diametrically opposite opinions on how a particular situation should be managed, whether this be choice of investigations, drugs, or operations (or their total avoidance). Moreover, anyone who has spent a couple of decades in the profession will have had the amusing experience of seeing firmly held concepts completely reversed or even, if he waits long enough, come back full circle and be introduced as totally new ideas.

This fascinating book has caught this flavour of excitement. The editors have set their 90 contributors a series of questions on highly controversial topics and have asked them to deal with them specifically, marshalling their arguments from their own experience and from a critical analysis of previous publications in the field. The result is a series of interesting debates which cover many of today's controversies in surgery. Should prophylactic radiotherapy be given in breast cancer? And should the axilla be routinely dissected in operating for this condition? Should antibiotics be given in an attempt to "sterilise" the bowel before colon resection? Should divided nerves be sutured at once or should repair be delayed? How should gastric ulcers be operated upon? And hiatus hernias? When should a coronary bypass operation be advised? And so on through 30 interesting chapters. Appropriately

enough the book opens with a short essay on the tradition of respectful argument, and this is followed by a useful chapter on randomised clinical trials in surgery.

This volume is not intended to be a textbook of surgery. Indeed it is assumed that the reader is already well acquainted with the background of each subject, so that the authors can concentrate their attention on the points at debate. For this reason it will appeal strongly to the experienced surgeon and not to the tiro studying for his examinations. To the former it can be warmly recommended as a lively, thought-provoking, and important contribution to surgery.

HAROLD ELLIS

### Immunology for Surgeons

Ed J E Castro. (Pp 401; £12.50.) Medical and Technical Publishing. 1976.

One has a tendency, when meeting titles such as "Immunology for bee-keepers," "Immunology for bird-watchers," "Immunology for students of traffic engineering" and so on (I exaggerate a little, perhaps) to think that here is one more rehash of general immunology with one specialised chapter as an excuse for the whole publication. In the case of the publication under review, however, this is not so at all. This collection of contributions from distinguished authors, edited by Dr Castro, is most stimulating and well worth the attention of all clinicians interested in immunology, not just surgeons. The bias is naturally towards the use of transplantation and the study of cancer. The level of sophistication is high, so that it would be heavy going for anyone without a reasonable grounding in medical immunology, which I hope we all have these days anyway.

After preliminary chapters on cellular immunology and immunochemistry, which rapidly get down to fundamental questions of lymphoid cell (T and B) populations and immunoglobulin genetics respectively, and one on immune mechanisms, there comes a most useful practical chapter on the assessment of immune status. Subsequent chapters box the compass from allografts (with a particularly nice chapter on actual cytopathological mechanisms of rejection) to tumours (with two critical but exciting chapters on therapy in its immunological aspects). The book is comprehensive and well balanced, the price rather high.

P G H GELL

### A Medical History of Kenya

John A Carman. (Pp 110; £3.) Rex Collings. 1976.

Dr John Carman went out to Kenya as a medical officer in the Colonial Medical Service in 1926, retiring from Government service in 1951. He then continued in private practice as an anaesthetist in Nairobi until 1960. His last visit to Kenya was to speak at the inaugural meeting of the newly formed Society of Anaesthesiologists of East Africa in 1973. His own working life therefore covers more than half of the total time during which European medicine has existed in Kenya—the first doctor appointed by the British East Africa Company arrived in 1888. In this personal memoir he gives a fascinating impression of what it was like to be a doctor in Kenya

between the two world wars. Its main value lies in the intimate, domestic details of medical life in the Colony, the sort of details that the historian would be unlikely to unearth from government reports and archives such as must form the backbone of a full medical history.

The reader is immediately struck by the vast range of the medical officer's duties in those bygone days. There was not a single branch of medicine that one individual might not be called upon to practise, not to mention such "paramedical" activities as the witnessing of executions and the backstairs intrigue required to persuade a hard-working governor to take a rest. The bulk of the book is made up of Dr Carman's personal reminiscences in a roughly chronological order, but the last two chapters are devoted to the history of the journal now known as the *East African Medical Journal*, with which Dr Carman was associated for 34 years, being editor from 1943 to 1960, and to the history of anaesthesia in Kenya. When Dr Carman went out to East Africa chloroform was the standard anaesthetic despite its well-known fatality rate, and it was considered that it was impossible to administer ether in the tropics, much less at an altitude of over 5000 ft (1500 m). Dr Carman's struggles to introduce the use of ether anaesthesia against violent surgical prejudice and his production of anaesthetic apparatus which he had made by "an Indian metal-worker in the bazaar" provide particularly interesting reading.

W D FOSTER

### Rheumatism in Populations

J S Lawrence. (Pp 572; £22.) Heinemann. 1977.

Representing the life work of a dedicated physician who for many years ran the Arthritis and Rheumatism Council's field unit in Manchester and who continues to be consultant to the unit, this book contains a great deal of interesting and valuable material, discussing the prevalence of different forms of arthritis in different communities and that of less common disorders such as camptodactyly, clinodactyly, and the nail-patella syndrome. There is an interesting chapter on occupational aspects of the rheumatic diseases, where days of incapacity per annum from arthritis per 100 at risk in Great Britain are reported as ranging from 180 in married textile workers to 2 in accountants. The highest incapacity rating so far recorded has been in female electrical fitters in Sweden, who lost 750 days per 100 workers per annum some 14 years ago.

There is a most informative chapter on rheumatoid arthritis, wherein the author points out how unreliable death certificates and even necropsy records are as a source of information on the prevalence of the disease. What statistics there are vary greatly from country to country and from time to time. The author notes that the general trend in Western Europe appears to be towards a relationship of rheumatoid mortality to latitude, the lowest rate being seen in Italy; this was most striking in those aged 65 and over, there being a five-fold difference between Scotland and Italy. The many factors concerned in arriving at these figures are discussed critically and fully. In spite of the price this excellently written and produced book is a must for those working in the field of rheumatology.

F DUDLEY HART