

Reviews

CLASSIFICATION OF DISEASES

Textbook and Guide to the Standard Nomenclature of Diseases and Operations. By Edward T. Thompson, M.D., F.A.C.H.A., and Adaline C. Hayden, R.R.L. (Pp. 620. \$8.) Chicago: Physicians' Record Company. 1952.

This book is designed to help medical records officers in hospitals where the *Standard Nomenclature of Diseases and Operations* is used or where a record system is to be installed based upon it. It contains much information about changes in the new fourth edition of the *Nomenclature* and explains how to combine its use for internal record-keeping with use of the *International Statistical Classification of Diseases* for presentation of statistics.

The first four chapters of Part I deal generally with the history, structure, and application of the *Standard Nomenclature*; and three disease systems which have undergone considerable revision in the fourth edition are then discussed in some detail—namely, the so-called “psychobiologic unit,” the haemic and lymphatic systems, and neoplasms. For some of the changes made, such as that from myeloid to granulocytic leukaemia, world-wide adoption is likely to be somewhat tardy, since the new designation does not appear even in the index of the *Nomenclature of the Royal College of Physicians*. The next chapter explains how to install a recording system based on the *Standard Nomenclature*.

The clear exposition of the relationship between the *Standard Nomenclature* and the *International Statistical Classification* in the ninth chapter should help to remove a good deal of misunderstanding. It is summed up in the statement that “it is obvious to those who have utilized both systems that they are not antagonistic but complementary. Each has specific purposes to fulfil and each is interdependent upon the other.” A full description follows of the *International Classification* itself and of the method by which, in the fourth edition of the *Standard Nomenclature*, each clinical condition has not only its standard code number but also, in parentheses, the international category to which it belongs.

This correlation between the two codes was carried out by the revisers of the *Standard Nomenclature* with great care and will be of incalculable assistance to the World Health Organization in correcting and revising the international classification in due course. It is regrettable that in their enthusiasm for correlating the two codes the editors of the *Standard Nomenclature* invented numerical subdivisions for some international categories, thereby violating an important recommendation of W.H.O. (set out on page xxxiii of Volume I of the *Classification*). This is: “If such subdivisions are created, it is recommended that letters instead of numbers be employed, especially in publication, to indicate that the item is not a part of the international classification.” Failure to observe that request in a publication so important as the *Standard Nomenclature* creates difficulties for W.H.O. in making future subdivisions of their categories by international agreement, and makes it difficult for anyone to know which subdivisions are international and which not. Indeed, the position has already arisen that one series of subdivisions of a category of malignant neoplasms (No. 199) has been recommended by an Expert Committee of W.H.O. and endorsed by the World Health Assembly, while another series, designated by the same digits, has been printed in the fourth edition of the *Standard Nomenclature*. For this state of affairs the editors of the *Textbook and Guide* are not responsible; and indeed they say very wisely (of the Standard Code) that “those who change the terminology prior to approval of the change by the appropriate sponsoring association are regressing to the conditions which existed before the establishment of the *Standard Nomenclature*” (p. 183). This applies with even

greater force to arbitrary addition of numbers to the international code.

Chapter 10 explains how to install the *International Classification* in an institution already using the *Standard Nomenclature*, and how to install both systems of recording simultaneously. The last four chapters of Part I discuss possible modifications and elaborations of the *Nomenclature* code and special problems and difficulties arising in its application.

The second part is devoted to a classification of diagnoses according to the clinical service of a hospital most likely to deal with each. Four major services—medicine, surgery, obstetrics, and newborn—with eight or nine subdivisions of the first two, are denoted by letters, and an alphabetical list of diagnoses assigns to each the appropriate service letters. It is difficult to understand how hospital clerks using this index can be expected to know, for example, that when they fail to find carcinoma or malignant neoplasm of the breast or other organ in the index they must look for adenocarcinoma under A, where 37 separate sites will be found listed. The inclusion in the book of 250 pages whose value is problematical was a mistake, in the reviewer's opinion. But Part I will be indispensable to the medical records officer who is using the fourth edition of the *Standard Nomenclature* and who takes his specialty seriously.

PERCY STOCKS.

THE ROYAL MEDICAL SOCIETY

History of the Royal Medical Society, 1737–1937. By James Gray, M.A., F.R.S.Ed. Edited by Douglas Guthrie, M.D., F.R.C.S.Ed. With foreword by Sir Robert Hutchison, Bart., M.D., LL.D., F.R.C.P. (Pp. 355. £2 2s.) Edinburgh: University Press. 1952.

The story of the development of the Medical School of Edinburgh and of the men who were trained there provides an epitome of the history of medical education in this country and throughout the English-speaking world, since from Edinburgh its graduates have gone forth to London and the rest of England, to the Dominions and Colonies, and to America, and played leading parts in founding and developing their schools of medicine. It was but a few years after the Faculty of Medicine was founded in the University of Edinburgh in 1720 that the Medical Society was formed, which later obtained a Charter from George III. This Society is unique, for it is the oldest medical society in the country and its active members are students and young graduates.

The author of this book, though not himself a doctor, was connected with the profession and deeply interested in the Society. He gives brief biographies of the remarkably many members who subsequently achieved fame, and has paid particular attention to their influence on the University of Edinburgh and the many universities throughout the world where they found their life's work. The story of the Society is in this way a source of valuable information on the history of medical education, but it is also a human document showing how youth acquires responsibility by being left to manage an ancient and royal society. Probably this influence on its members has been more valuable than the addresses by eminent guests and its scientific papers. From the records and minutes of its meetings, Gray might have produced a valuable but dull account of this important institution, but this is a very readable book, full of human affairs which will interest many who have had no personal connexion with Edinburgh or its Royal Medical Society.

FRANCIS FRASER.

THE SCALP

The Scalp in Health and Disease. By Howard T. Behrman, A.B., M.D. (Pp. 566: 312 illustrations. £4 15s.) London: Henry Kimpton. 1952.

This is a well-balanced and well-produced book which demands little but praise from a reviewer. It is likely rapidly to take its place as a standard work, and therefore can