

Book Reviews

Disease from Abroad

Exotic Diseases in Practice. By Brian Macgrath, M.A., M.B., D.Phil., F.R.C.P.(Lond. and Edin.). Foreword by Lord Cohen of Birkenhead. (Pp. 361; illustrated, 50s.) London: Heinemann, 1965.

There has latterly been an increasing consciousness of the necessity for all practitioners to be on the alert for tropical disease imported into temperate countries. This is the result in part of increasing population movements and immigration and in part of the increasing speed of travel whereby persons incubating disease on leaving the tropics arrive in temperate regions before the disease becomes apparent. Formerly, with travelling by sea, most diseases being incubated by travellers declared themselves *en route*, and the patient was either put ashore in a foreign port or quarantined on arrival. Now travellers may develop overt disease some time after the journey is over so that the possibility of exotic disease is overlooked. It is necessary not only for practitioners to ask patients where and when they have travelled, but also

to know the diseases endemic in the regions from which they have come. This book represents an attempt to drive these points home and to help practitioners to deal with the diseases suspected; it does so very successfully.

There are two parts to the book. In the first the geography of disease is dealt with, countries are listed under regions, and the main endemic diseases in the regions are noted; there are also sections on clinical pointers to diseases and on the protection of non-immunes. The second part consists of a brief description, omitting aetiology and pathology, of the more important diseases encountered in the regions discussed. The data are well systematized and divided up, so that the doctor confronted with a patient from abroad may look up the main symptoms

complained of, check these against the common causes of such symptoms in the country from which the patient has come, and then see whether the disease pattern fits in with those given in the section on clinical descriptions. Those who follow this procedure will undoubtedly be greatly assisted in reaching the diagnosis; the exercise may prove complex for those with limited knowledge of tropical diseases, and for them reference to one of the centres listed in the book is desirable. Indeed, wherever possible such reference before treatment should be the aim, for treatment before the diagnosis is established with certainty often renders accurate diagnosis and proper management of the patient impossible later. When used as intended, this volume should be of great help in dealing with patients from geographic regions with which the practitioner is not familiar. Professor Macgrath is to be heartily congratulated on his work.

A. W. WOODRUFF.

Postgraduate Pathology

General Pathology. 2nd edition. By J. B. Walter, T.D., M.D., M.R.C.P., M.C.Path., and M. S. Israel, M.B., M.R.C.P., D.C.P., M.C.Path. (Pp. 1,046+x; illustrated. £6.) London: J. & A. Churchill, 1965.

It is not surprising that the second edition of this book has followed as soon as two years after the first. In reviewing the first edition we pointed out that this was a thoroughly useful book, likely to be popular, especially with postgraduates embarking on a specialist career in either medicine or surgery. The utility of this second edition is even further increased by the new arrangement of references, which are now listed at the end of each chapter and not simply collected together at the end of the book, as in the first edition. Moreover, the references are now on a much more generous scale: for example, Chapter 4 on "Reaction to Trauma" had only five references in the first edition, but now has 101.

There has also been considerable revision of the text in all sections of the book, especially in those which relate to the immune response, the graft reaction, the genetic basis of disease, and electrolyte balance and shock. Another new feature is a chapter on respiratory failure. The last sentence of it is worth quoting to illustrate the fact that, though this book is intended primarily for pathologists, the clinical side of the picture has not been forgotten: "The physiological physician pictures the lung as if it consisted of one or perhaps two alveoli: the morbid anatomist thinks in terms of hundreds: the patient has 300 million." This follows a reminder that in no other field of medical work is there so little correlation between the functional and structural aspects of disease.

When the first edition of this book was published, both authors were working at the Institute of Basic Medical Sciences of the Royal College of Surgeons of England, but now the senior author, Dr. J. B. Walter, is working in the department of pathology of the renowned Banting Institute of the University of Toronto, Canada.

C. E. DUKES.

Clinical Aspects of Haemostasis

Hemorrhage and Thrombosis. Practical Clinical Guide. By Edwin W. Salzman, M.D., and Anthony Britten, M.B., B.Ch. (Pp. 257+xi. 72s.) London: Churchill, 1965.

In their preface the authors state that they have tried to present an approach to haemostatic disorders that will be useful to the physician or surgeon confronted with the common practical problems—the bleeding haemophiliac, the patient with post-operative pulmonary embolism, the pre-operative patient who is a "bleeder," and the surgical patient who bleeds excessively for no apparent reason. The book consists of seven chapters. There is a good introductory chapter on the general principles of haemostasis. This is followed by five chapters on disorders of haemostasis which cover acquired and congenital coagulation disorders, with particular emphasis on haemophilia, acute transient bleeding states, extracorporeal circulation, and the diagnosis of bleeding disorders. The last chapter is devoted mainly to anticoagulant therapy and includes brief reviews on the pathophysiology of thrombosis

and on therapeutic thrombolysis. Laboratory procedures are not described. The book is therefore largely clinical and largely concerned with haemorrhagic disorders; the section on thrombosis forms a minor part. Perhaps the most useful chapters are those on acute transient bleeding states and on extracorporeal circulation, to which relatively little attention is given in current books on haemostatic disorders.

Most of the views put forward and the recommendations about treatment are acceptable, but some points call for critical comment. In the section on dentistry in haemophilia the authors state that the number of teeth to be extracted has little bearing on the amount of plasma or concentrate required to prevent bleeding. This statement is, however, not acceptable as it stands. The important point to be stressed, which is not even mentioned, is the difficulty of the extraction: for example, the removal of only one tooth if it is an impacted third molar may cause more bleeding and require higher plasma levels of factor VIII than ten easy extractions. The statement that in haemophiliacs "the value of dental splints applied to the gums after extraction is controversial" is rather surprising. Properly fitting splints play an important part in the protection of the sockets from trauma during the early post-extraction period.

In discussing anticoagulant therapy the authors recommend either the Quick one-stage prothrombin-time test or Owen's Thrombotest. It is stated that a real advantage of Thrombotest is its sensitivity to factor IX, but this has not been firmly established and remains a controversial point. It is surprising that the activity in Quick's test is assessed from saline-dilution curves; most people would prefer absorbed plasma for