

Medicine and Books

Unstuffy essays on geriatrics

Health Care of the Elderly: Essays in Old Age Medicine, Psychiatry, and Services. Ed Tom Arie. (Pp 240; £13.95.) Croom Helm. 1981.

Health Care of the Elderly is not a textbook or a review of recent advances, but a collection of essays to promote ideas. The title comes from the name of Tom Arie's department at Nottingham, where uniquely the medicine and psychiatry of the elderly are practised in double harness under one roof. The authors, who come from both sides of the Atlantic, include seven professors and a number of rising stars in the medicine and psychiatry of old age.

Three sections on medicine, psychiatry, and services follow a sensitive introduction by Tom Arie, entitled "Too small a basket for so many eggs." The line comes from a poem by Walter de la Mare which reminds us of the vivid inner life of an old man whose age has not extinguished either sensibility or suffering. He feels both old and young at the same time and resents what Ronald Blythe called the view in winter.

A foolish fond old man his bedtime nigh
Who still at western window stays to win
A transient respite from the latening sky
And scarce can bear it when the sun goes in.

The medical section begins with a discussion of stroke rehabilitation, the best I have read, by Graham Mulley. A N Exton Smith reviews his classical studies on thermoregulation and hypothermia, a model of clinical science in the tradition of Sir Thomas Lewis. D B Calne from Bethesda, Maryland, discusses Parkinson's disease and aging. I learnt that the expectation of life in mice is increased by levodopa and in rats by bromocriptine. Will human aging ultimately be modified by neurotransmitters?

In the psychiatric section David Jolley discusses dementia with welcome freshness. Felix Post reviews a lifetime of experience in the affective disorders and Klaus Bergmann explores the subject of neurosis in the elderly, a topic which he has pioneered, disposing of the idea that old age is a time of calm, all passion spent: for many, indeed, it is a time of increasing stress and emotional turbulence. Adrian Verwoerd of Duke University describes the problems of psychotherapy in the aged. Heavy going at first reading, his chapter came alive for me at the point where he considers how to make sense of the patient's chaotic thoughts. How can we enter his world and speak his language? The effort to understand is all important.

The longest section is that on services. R V Boyd shows how old people admitted to hospital as "social problems" usually have medical ones as well, if only they are looked for. Olive Stevenson, the only non-medical contributor, discusses social work with old people, pointing out that the social worker does not work *for* the patient but *with* him and his relatives to find an acceptable solution. Kenneth Shulman describes the beginnings of a psychogeriatric service in Toronto, where the over-80s will double their numbers in the next 20 years. I liked his comment that families who end up in the emergency department pleading for admission are wrongly viewed as dumping their elderly relatives: what they are really doing is demonstrating the result

of ineffective community assessment and support. James Williamson considers prevention 20 years on from his classic paper on the unreported needs of old people at home. He finds that some progress has been made, but does not say clearly that prevention must be an activity based in general practice. Surprisingly, the words age-sex register do not appear in his article. He is properly sceptical of the value of multiphasic medical screening. The future lies with better organised supervision of people at risk. The next generation of old people may be more demanding and less reluctant to seek help.

Finally there are two chapters which I much enjoyed, discussing patterns of geriatric service and the future of geriatric medicine as a specialty. Grimley Evans shows how discharge rates from geriatric units have rapidly increased during the past decade as geriatric physicians have moved from a custodial role to a therapeutic one. In 1975 discharge rates from geriatric units for people over 75 were 41% higher than the rates for all other medical specialties combined. The blocking of beds in general wards, so often complained of, can not be attributed to lack of effort by geriatricians.

Grimley Evans is an integrationist, foreseeing the possible disappearance of geriatric medicine by absorption into general medicine. Or will it, he asks, be the other way round? Present demographic trends suggest that there may be little future for a general medicine that is not geriatric. Conversely, Bernard Isaacs is a separatist because, he says, general physicians and geriatricians are like bookends: they come out of the same mould; neither can manage without the other; but they face in opposite directions, and when they cease to do so what they are supporting falls down. The debate continues but there is total agreement that physicians in geriatric medicine must have a major presence in every district general hospital and there must be full rotation of junior staff with general medicine.

In his preface Tom Arie hopes that he has edited an unstuffy book about very important matters. I think he has succeeded. I shall keep my review copy and refer to it often.

R E IRVINE

"Experiential" explained

Let's Talk About Me: a Critical Examination of the New Psychotherapies. Anthony W Clare with Sally Thompson. (Pp 253; £4.50.) British Broadcasting Corporation. 1981.

Complementing the series of six talks on Radio 4 with the same title, *Let's Talk About Me* describes its authors' pilgrimage to the west coast of the United States to meet the survivors among those who originated these new psychotherapies. Most of us probably know a little about some of them, at least if we have read Eric Berne's clever *Games People Play*. There have also been magazine articles about encounter therapy, Arthur Janov's primal scream, and the strangely named rolfing. But we would be hard put to it to describe est and orgone therapy or to distinguish TA from TM.

Sally Thompson, the producer, and Anthony Clare, who gave the radio talks, have now given us the results of a coherent

and critical inquiry. While keeping their feet on the ground, they have tried to understand the philosophies and beliefs of the cult figures, correctly dubbed charismatic. They have untangled the origins of the ideas—so often offshoots of psychoanalysis—and the methods practised in these “therapies.” They have avoided the temptation to be ribald and have imparted their understanding in simple language.

The subject matter is wide. It ranges from the near-orthodox Carl Rogers, with his Rogerian client-centred psychotherapy and encounter groups, to the crazy, indeed psychotic, notions of Wilhelm Reich, with his Orgone Energy Accumulator; from Jacob Moreno and his widely used psychodrama to the “tissue movement” and “energy fields” of the late Dr Ida Rolf and to Erhard Seminar Training (est), which has more than a hint of the techniques used in both Russian and Chinese brainwashing.

Dr Clare and his colleague think that these cults are flourishing because they partly fill the vacuum left by the decline of orthodox religion. They note in them some of the features of new religions. Many of them are hostile to learning, to reason, and to intellect. The scientific method is scorned, together with any inquiry into their efficacy as forms of treatment. Intuition, feeling, and above all experience, with its trendy adjective experiential, are fashionable and admired. Doctor and patient and even psychoanalyst and patient are replaced by counsellor and client, prophet and disciple, or leader and follower. There is a suspicion, too, in some cases of showman and dupe and of rogue and mug, for some courses of “treatment” are very expensive indeed.

The authors lay no claim to comprehensiveness. This is the book of their radio series and constricted accordingly. Such cults, churches, movements, organisations, or therapies—and distinctions are difficult to make—as the Moonies, scientology, Jim Jones’s People’s Temple (which moved with such tragic results to Guyana), and even the venerable Moral Rearmament are either omitted or barely mentioned. Even so, the authors have more than enough material to fill a lively book, which is both entertaining and very well written. Is their material too diverse, are their phenomena too wide to fit comfortably into their mould? Are their generalisations too tight? Can Carl Rogers and Arthur Janov, encountering and primalling, be easily accommodated within the same covers? Perhaps we should be relieved that Dr Clare doubts whether the British provide a suitable soil for these new therapies to flourish in.

ALAN R NORTON

Therapeutic collection

Today’s Treatment. 4. Articles published in the *British Medical Journal*. Ed Stephen Lock. (Pp 178; £4.50; £4 to members of the BMA.) British Medical Association. 1981.

Like its predecessors, the latest book in the “Today’s Treatment” series is an authentic contribution. It achieves this because it is reasonably priced, up to date, topical, general in appeal, and the work of the always reliable experts whom the *British Medical Journal* commissions to write its educational sections.

This particular volume possibly loses some credibility by sandwiching a section on anaesthesia between a comprehensive system analysis of drug-induced disease and a section on general clinical pharmacology. To fit into this format the impossibly brief sections on preoperative assessment and the care of the unconscious should have been rewritten so as to concentrate on the problems existing drug therapy can give the anaesthetist and the role of drugs in the care of the unconscious. An interesting section on day-case anaesthesia provides a worthwhile, although abbreviated, commentary on agents permitting quick recovery. Again, there is great interest in the pharmacological techniques to control pain after recovery of consciousness, although it is doubtful whether many hospitals have the medical and nursing

staff to cope with extradural blocking procedures. Contributions on emergency anaesthesia, intensive care, obstetric anaesthesia, and pain clinics are either devoid of drug information or lacking in detail.

Drug-induced disease, system by system, is not usually light reading. Nevertheless, the various authors in this section manage to avoid the almost inevitable catalogue of boredom which one has often endured in the pursuit of factual knowledge. The essence here is that the orientation is to clinical problems and for most readers this is how knowledge must be organised.

The final section is prefaced by contributions on the Committee on Review of Medicines and the Committee on Safety of Medicines. Admittedly, this topic is one step removed from “Today’s Treatment” but both bodies have a very legitimate, although widely misunderstood, impact on therapeutics. Drug development and drug monitoring follow naturally: the points that are overlooked in early studies should not escape post-marketing surveillance. One is exciting, the other dull—but both are needed. Absorption, protein binding, and elimination are all expertly reviewed. There are superbly logical accounts of drug interaction and adverse reaction, situations where concept and classification are the only basis for knowledge. The conclusion, with prescription writing, follows sensible and practical points on the special problems of children and the elderly.

Although this book is merely a reproduction, minimally edited, of various series of articles which have appeared in the *BMJ*, it is so much more satisfactory in this form. The first and third sections represent a course in clinical pharmacology and drug-induced problems—knowledge that is important to all prescribing doctors. This book will repay the student preparing for finals, the MRCP candidate needing to organise his knowledge, and candidates for any other examination who wish to have breadth and to inspire respect in their soundness and safety. It is, for its cost, as good value as anything I have seen. It comfortably survives the very abbreviated and out-of-place contributions on anaesthesia.

ROBERT A WOOD

Transatlantic urological tombola

Current Trends in Urology. Vol 1. Ed Martin I Resnick. (Pp 179; \$31.25.) Williams and Wilkins. 1981.

Current Trends in Urology is a new series from Williams and Wilkins, described by the editor as intending to present “a group of essays that provide a critical review of changing topics of importance to all practising urologists.” The first volume is something of a transatlantic urological tombola. A number of unrelated topics are discussed, beginning with prostatic cancer and progressing through vasovasostomy, urinary undiversion, renal hypothermia, selected developmental abnormalities, urethral stricture, urothelial atypia, trauma to the lower genitourinary tract, and vesicovaginal fistula to end at nutritional support of the patient with urological disease. The concept is interesting, but unfortunately a few of the contributors have escaped from the brief to produce critical reviews, and editorial influence is not always apparent so far as consistency and content are concerned. Thus, the chapters are variable in length (vesicovaginal fistula four pages; vasovasostomy 22 pages) and quality. Some are written in the objective mode; others are highly subjective, not to say self-gratifying. The subject matter is not all new and much has appeared before elsewhere. For instance, other than some extra references, the chapter on vesicovaginal fistula contains little more than a paper written by one of the authors last year in a journal produced by the same publishers. It is an interesting treatise and bears rereading, but these four pages can hardly be said to constitute an original or purpose-written review.

The first chapter deals with the problems of staging prostatic

cancer. It comprehensively and knowledgeably deals with the difficulties of lymphangiography and estimations of acid phosphatase activity. The section on bone scanning, however, is terse and dated and that on ultrasound is limited to one column. The management of this common condition is currently in the urological melting pot given the lack of progress over the past 15 years. It is a shame that in a review for the clinician the opportunity was missed to discuss concepts such as oestrogen receptor status and the role of radiotherapy and chemotherapy. The next section on vasovasostomy is almost overcomprehensive; highly personalised, it contains one figure which raises doubts about the aim at practising urologists rather than at devotees of *Reader's Digest*. None the less, it contains much of value, and the author's plea for microsurgical techniques, at least in epididymo-vasostomy, might well prove valid given the depressing results of the more conventional techniques. The chapters on urethral stricture and urothelial atypia (better termed carcinoma in situ in high grades to emphasise the malignant potential of the condition) are generally good. The section on urinary diversion fulfils all the editorial criteria and is a true and proper review paper, and similarly that on lower tract trauma can be happily recommended. This subject is often bemoaned by FRCS candidates as being poorly covered in standard texts, and this group would certainly benefit from this comprehensive coverage. Its only deficiency is in discussing genital injuries, where a chauvinistic attitude is apparent in completely neglecting the female of the species. The final paper on nutritional support covers familiar ground and the author has crusaded before on this subject. It may not alter the balance between those who believe in feeding and those who do not, but both groups should benefit from the review.

So this is something of a mixed bag. It cannot be considered compulsive or compulsory reading, but most urologists should find much of interest here if they accept the strong transatlantic flavour and the inconsistencies of style and content. Given firmer and more uniform editorial policy, one might look forward with some interest to seeing what ingredients volume two will have to offer.

P H O'REILLY

Cytotoxic treatment of tumours

Safer Cancer Chemotherapy. Ed L A Price, Bridget T Hill, M W Ghilchik. (Pp 125; £9.50.) Baillière Tindall. 1981.

There are dangers inherent in publishing proceedings of meetings in book form. Firstly, it must be speedily done to stay up to date. Secondly, verbal presentations do not readily translate into fluent written prose. Lastly, people may not buy the book for the same reason as they stayed away from the meeting. *Safer Cancer Chemotherapy* has problems on all three counts, and maybe more.

At first sight it consists of a defence of a scheme derived by two of the editors from original work by Bruce and Goldie whereby cytotoxic drugs can be given according to basic cell kinetic principles so that a maximum effect against the tumour can be obtained with minimal toxicity to the host. This idea has been expounded since 1971 or so and has certainly won some following, as evidenced by the contributions in the book. On the other hand, there are those who follow the other "kinetic" fashion and claim that pharmacology has all the answers to "safer" cancer chemotherapy. As always, the average reader steers a median course and reads with interest and apprehension the accounts of well-planned and nicely described trials in breast cancer (Morrison), head and neck cancer (Rowland), lung cancer (Anderson), and urological tumours (Smith and Richards).

Not too many results are given (wisely) but, rather, emphasis is placed on the design of protocols and conduct of trials. The

lesson of the over-hasty preliminary communication of good data (before it looks too bad) has been well taken. Several types of cancer are dealt with, each preceded by an "overview" or "state of the art" (or "ballpark" for the Americans), mostly by one of the editors. Quite the best is by Ghilchik, who tackles breast cancer in a delightfully simple and straightforward manner. In contrast, Price's view of ovarian cancer suffers from the delay in printing and is woefully out of date. The third editor, Hill, provides, as always, a well-written persuasive scientific backcloth for the rest of the book, which, though mostly retrievable in published work, is food for thought and interesting reading. The same cannot be said for the three commentaries near the end of the book, which presumably are accounts of the discussion session at this particular meeting. Apocryphal stories abound, opinions are unsubstantiated, and references negligible (a fault common to the other chapters).

There can be no disputing the need and the feasibility of "safe" cancer chemotherapy. This is a mandatory requirement especially when drugs are used for palliation, as described in this book, or, more important still, when adjuvant cytotoxics are applied in otherwise fit human beings. We still cannot say if curative chemotherapy, as currently practised in leukaemia, lymphoma, teratoma, choriocarcinoma, and solid tumours in children (which are not the subject of these proceedings), can be achieved without toxicity and a certain real though small risk to life. Here is perhaps an interesting dichotomy which might prove a topic for a future symposium and its inevitable "published proceedings."

J G McVIE

Recommended reading on chest diseases

Respiratory Medicine. David C Flenley. (Pp 263; £6.50.) Baillière Tindall. 1981.

The excellence of David Flenley's book on respiratory medicine suggests that environmental as well as ethnic influences have made Edinburgh such a prolific source of good medical texts. The author generously acknowledges in the preface the pre-eminence of Edinburgh's "Crofton and Douglas" as a work of reference but his own book bids fair to take an equivalent place among the more concise accounts of pulmonary disorders.

The first quarter of the book provides the background needed for the study of chest diseases: anatomy, physiology, immunology, and also symptoms, signs, and methods of investigation. The remaining chapters deal with the commoner disorders of the respiratory system. The author betrays a little impatience with the artificial restraints imposed by his chapter headings—perhaps because he favours a more integrated approach to medical education—and so we have the management of carbon monoxide poisoning in the chapter on the physiology of gas exchange, while the physiology of the pulmonary circulation is deferred until we come to the diseases of pulmonary vessels. Such flexibility is sensible but may lead to repetition—which a book of this size can ill afford—unless there is very careful editing. For example, the causes of a "coin" lesion in the chest radiograph are tabulated in the chapter on radiological investigation and then repeated in the text of the chapter on pulmonary tumours. The clinical signs of carbon dioxide retention, though their value is decried, are listed in several places. Mitral stenosis does not appear among the causes of haemoptysis, although it is mentioned later in the differential diagnosis of carcinoma. Stridor is described as a noise louder in inspiration in the chapter describing symptoms and signs, but louder in expiration in the account of pulmonary tumours. The latter is clearly a misprint—of which there are quite a few—but the only other which matters is the dose of cyclophosphamide given as 1 mg/m²

instead of $1\text{g}/\text{m}^3$. These minor faults, in so far as they reflect haste in the preparation of the book, are faults in the right direction; for, unlike many textbooks today, *Respiratory Medicine* has been published quickly enough to be thoroughly up to date. No important recent advance is omitted and, of 134 references to published work, one-third appeared within the last year and over half within the last two years.

There must inevitably be some difference of opinion between author and reviewer. So far as chronic bronchitis and emphysema (sic) concerned, Professor Flenley is a "lumper" rather than a "splitter" and deals with it (sic) as a single clinical entity. With disarming disregard for the grammatical consequences of lumping, he gives a clear and authoritative account of this important subject. My only complaint is this: whereas we cannot be sure that a chronic bronchitic patient does not also have emphysema, there are some patients with neither cough nor sputum (and therefore, by definition, no chronic bronchitis) who have irreversible airflow obstruction, a low transfer factor, and emphysema confirmed by lung resection during life or at necropsy. This phenomenon of emphysema without bronchitis—albeit not very common—surely deserves separate consideration if only for its potential causal significance. Another matter I would dispute with the author is the statement that a pre-operative FEV_1 of less than 1.5 litres or persistent hypoxaemia necessarily precludes thoracotomy. A FEV_1 of 1.5 litres may be near normal for a little lady in her 60s and is not in any case an absolute contraindication to surgery if the lung to be resected is already collapsed and functionless. Shunting of blood through such a collapsed lung may also give rise to persistent hypoxaemia which can be corrected by resection.

These particular points of criticism do not diminish the value of the book as a whole, which gives a well-ordered, thoughtful, original, and—as will be evident from this review—a provocative account of modern respiratory medicine, firmly stamped with the personality of the author (a good thing). It is liberally illustrated with diagrams and charts which are crisp and clear. Radiographic abnormalities are displayed as sketches from the original films; on the whole, this works well and is certainly preferable to the misty originals reproduced in some textbooks, often at considerable expense to all concerned. One of the most attractive features of the book is the sound scientific approach to respiratory medicine, exemplified by the numerical values given to nearly every structure or function mentioned in the text. We are told not just that the IgG molecule is a little lighter than the IgE molecule but that one weighs 156 000 and the other 190 000 daltons; that there are 200 cilia per cell beating at 20 per minute and shifting mucus at 20 mm per minute; and that we breathe 15 kg of air each day, 10 times more by weight than the amount of food or water we consume. This is memorable stuff.

Undergraduates and young doctors working for the MRCP often ask me to recommend a concise and up-to-date book on respiratory medicine. At last, I know the answer.

COLIN OGILVIE

Simplifying orthopaedics

Basic Facts in Orthopaedics. Patrick S H Browne. (Pp 277; £7.50.) Blackwell Scientific Publications. 1981.

Basic facts are undoubtedly popular at present. Politicians spend much time addressing us on basic matters speaking basically so that we may better understand their wisdom. Complex scientific matters are reduced to a simple basis by the media—the matter has even been the subject of correspondence in *The Times*. It cannot have escaped the observation of even the most average of Patrick Browne's students that there has been a sudden epidemic of books on basic orthopaedics. Some are more basic than others.

Basic Facts, we are told, is written for the average medical student—which somehow suggests that the above average student will be seeking a higher form of basic knowledge elsewhere. What therefore are the basic facts which our average student seeks?

Most of all he wants to learn the language of orthopaedics. Anyone who has observed that curious glazing of the eyes which occurs in a group of medical students when the words valgus and varus are first mentioned will know how important it is for the new student to gain an understanding of such terms at an early stage. Unhappily there are no succinct descriptions to be found here. Not until page 125 does the reader find a drawing of an elbow which gives a clue but does little to explain the use of the term with reference to the hip as in coxa valga, first mentioned on page 9. What does real and apparent shortening really mean and how will he be able to measure real shortening in the presence of fixed deformity? Three short paragraphs are not enough to equip him to repel the onslaught of an inquisitive examiner in his finals. Although brevity has its virtues, many of the descriptions of examination of the joints would have been better if they had been written in greater detail.

This book attempts to simplify a complex subject by concentrating on principles rather than detail. When teaching undergraduates such an approach is laudable provided the material is set out clearly with adequate emphasis on matters of importance. Several chapters in this book add so little that they might perhaps have been excluded—for example, the two-page chapter on synovial joints and another on various soft tissues lesions ranging from tendon injuries of the hand to intervertebral disc lesions, taking in ligament injuries of the knee on the way. In any case, injuries of the knee are dealt with in a later chapter.

Several mistakes in the text should have been corrected. Shoulder shrugging exercises (p 78) are unlikely to improve the function of the trapezium and the Thomas splint (p 86) was designed for immobilisation of the knee, as its full title, Thomas bed knee splint, suggests, rather than for treating fractures of the femoral shaft. It is surprising to see the sign described in 1937 by Marino Ortolani referred to as the "Otolani" sign.

The simple line drawings which illustrate the text are good and there are some useful sections which help to simplify complex problems. Overall, however, the book lacks the clarity that is essential in a work which undergraduates with their lack of background knowledge may study.

S C GALLANNAUGH

Arguments on resources

From Principles to Practice. Michael Butts, Doreen Irving, and Christopher Whitt. (Pp 200; £8.50.) Nuffield Provincial Hospitals Trust. 1981.

From Principles to Practice is concerned with the allocation of resources to the Health Service from the Secretary of State and Parliament to the regions and area health authorities. The first section dealing with the central organisation is helpful, setting out the relationships between the Department of Health and Social Security and the Secretary of State, the Cabinet, Parliament, parliamentary select committees, and other Whitehall departments. These relationships are fundamental to understanding the functions of the DHSS, and the authors have provided a good introduction to a complex subject where the interacting pressures, political and economic, are constantly changing. Doubtless the section dealing with the structure of the DHSS is accurate but somehow it fails to come to life. This may not be entirely the authors' fault: there is a view widespread

throughout the National Health Service that the Department lacks a sense of purposeful direction; while this is partly its fault, it also reflects the complexity of the subject—which many in the National Health Service see as remote and incomprehensible. Nevertheless, such is the importance of this theme that if the outside observer receives no clear picture of the Department's activities it is worrying because many of the Department's own officers probably also lack a clear picture of what they are supposed to be doing. In an age of scientific analysis, we should identify the intended outcome of any purposeful activity, assess how the results achieved compare with the expected ones, and then decide whether the benefit was commensurate with the cost.

Such cost-benefit analysis is very difficult with an organisation as complex as the DHSS but the results are urgently needed. The best part of this book is the central section, which deals with planning in the regions and compares the way resources are allocated and the different standards in use. For example, most regions use a norm for geriatric beds of 10 beds per 1000 population over 65 but Wessex uses a figure of 7.3-8.8 beds. Other regions provide two figures, one for the population aged 65-74 and a second for the population over 75. Thus in the West Midlands the norm is 3.55 beds per 1000 aged 65-74 and 22.42 per 1000 over 75, whereas in Oxford the figures are a little lower, 3.1 and 20 respectively. Possibly some of these differences could be justified by local circumstances, but the authors point out that two adjacent and similar areas may fare very differently if they are in different regions. Moreover, the allocations to areas will also depend on the allocation to regions. The Resource Allocation Working Party (RAWP) produced a formula which tried to ensure a more equitable distribution of resources so that the money to regions would relate less to their previous allocations and more to their need. The trouble, of course, is to assess need and one of the best sections of this book is the excellent critique of the problems of RAWP.

This book should be read by all those concerned with resource allocation. The problems of the central department are less well defined but the facts presented will doubtless stimulate further thought and that is the essence of a good book: like an attractive woman it should not cloy the appetite but make hungry where most it satisfies.

A M B GOLDING

Disorders of nerve and muscle

Neuromuscular Diseases: a Practical Approach to Diagnosis and Management. Michael Swash and Martin S Schwartz. (Pp 316; approx £25.) Springer. 1981.

Having read the preface, I began this book with keen expectation. Our understanding of neuromuscular disorders has advanced considerably in recent years and an update in a book of this size on "the clinical, electromyographic, pathological, and . . . biochemical features" of these disorders would be not only interesting but also of considerable value. The first few chapters are particularly useful. These cover not only the clinical assessment of patients with neuromuscular disorders but also the principles of the methods of investigation. Here you can find not only a simple guide to the electromyographic and biopsy findings in normal muscle and nerve but also a brief description of the range of abnormalities of these investigations that may be found in neuromuscular disorders. Anyone wishing a brief but good introduction to these topics could read these chapters with value. My only reservation is that they do not provide a guide on the indications for muscle or nerve biopsy or emphasise the diagnostic limitations of the latter.

There then follow chapters on anterior horn cell, peripheral nerve, muscle and neuromuscular disorders, and the unclassified miscellaneous neuromuscular disorders. In these

chapters, where the authors attempt to correlate clinical with investigative findings, the problems become apparent. Unfortunately, the electromyographic and pathological responses of the neuromuscular apparatus to injury are limited and hence the descriptions of them in the various clinical syndromes tend to be repetitive. For example, the electromyogram in most forms of myopathy is remarkably similar and in most sections on the electrophysiological assessment of the various myopathies will be found the comment: "Myopathic motor unit action potentials are found."

It is also in these chapters that several minor deficiencies are apparent. In a book of just on 300 pages the clinical details are often scarcely more than may be found in any large textbook of neurology. So Swash and Schwartz's book is not one for a clinician seeking help with a particular clinical problem either from the diagnostic or particularly from the therapeutic point of view, and, to be fair, the authors do not claim this. Frank omissions, moreover, are few—for example, I could find no mention of the various forms of diabetic truncal neuropathy—but some important topics receive scant attention. The increasingly common problem of brachial plexus injuries, often called the "motorbike epidemic," are covered in just a few lines—a particularly surprising attitude as electromyographic assessment can be of considerable value. Again, the section on polyneuropathy has not only a few unexpected omissions but also a few unpredicted inclusions. Thus the common problem of neuropathy of unknown cause gets scarcely a mention and some might find the inclusion of Bell's palsy and a whole page on the excessively rare diphtheritic neuropathy rather strange.

Nevertheless, these criticisms should not detract from the merits of the book, which achieves what it sets out to do. For this reason, it can be read with interest by most neurologists and by others with an interest in neuromuscular disorders. It is not, however, a book for the general physician or the MRCP candidate, who would be better served reading either one of the larger neurology texts or one of the more comprehensive specialist books on muscle or peripheral nerve disorders.

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