

Book Reviews

"Down Under"

Medical Odyssey. An Autobiography by Sir Douglas Robb. (Pp. 201; illustrated. 27s. 6d.) London: Collins. 1968.

During most of the past half century it is probable that medicine on the average has been practised as well and perhaps better in Australasia than anywhere else in the world. Till recently, however, such practice was not specialist nor academic. Further, facilities for research were so minimal that most scientifically minded Australian and New Zealand doctors had to come "home" (as it was then but, alas, not now called) to achieve their full potential.

All this has changed in recent years, and, though the practice of general medicine and surgery remains as high as ever, specialist and academic medicine now flourish in the university medical schools and research institutes which have proliferated in Australasia as they have here. It is no longer necessary for doctors to turn their backs on intellectual and

scientific progress when they return to "down under" from Europe or America.

Sir Douglas Robb has played an important role in this metamorphosis, and in this book the story of the development of modern medicine in New Zealand is portrayed against the canvas of his own career. His has been a full and dedicated life of service, and his accomplishments have been achieved in spite of the "fell clutch of circumstance" which dogged his early professional years—but perhaps because of it, for the intervals of enforced physical inactivity dictated by the acid-fast bacillus, giving time for reading and reflection, may have determined the cultivated surgeon and wise administrator which he became. Had it been otherwise, and had he been able to foster his physical to the detriment of his intellectual powers, we might have had the more evanescent fame

of an All Black rather than the more permanent *réclame* of a University Chancellor.

Anyone who practises or has practised medicine in New Zealand will find this kindly, moderately priced *Odyssey* fascinatingly interesting, as will those of us who have visited the country and know a little of its medical problems and personalities. Nevertheless, for others who have not been there the minutiae of the author's autobiography, the particulars of his medical travels and meditations, and the detailed account of the rise of the Welfare State in New Zealand, the establishment of the Auckland Medical School, and the great number of individuals involved may prove slightly tedious; for the excitement of New Zealand's landscape—its loveliness, grandeur, and infinite variety—is not perhaps always mirrored in the propriety, egalitarianism, and comparative uniformity of its society.

DERRICK DUNLOP.

Chemotherapeutic Drugs

Chemotherapy. An Introductory Text. By Harris Busch, M.D., Ph.D., and Montague Lane, M.S., M.D. (Pp. 215; illustrated. 68s.) Chichester, Sussex: John Wiley. 1967.

It is unusual for a book of 200 pages to require an index running to 17. This one does so because it represents a remarkable feat of compression. The authors work in the departments of pharmacology and medicine of the Baylor University College of Medicine, Houston, Texas, and with the aid of three other contributors on special subjects they have dealt with more aspects of chemotherapy than are often included in any single volume.

There are chapters on the treatment of cancer, protozoal infections, helminthiases and mycoses, antiseptics (including "antipedicular" agents for good measure), and the mode of action of antibiotics and "analog inhibitors." The treatment of bacterial infections is described in chapters on penicillins, tetracyclines and chloramphenicol, anti-tuberculous drugs, other antibiotics (17 in all) and antiviral agents, and sulphonamides. The last includes the alarming statement that "the overwhelming toxicity of the sulphonamides has made virtually all physicians leery of their use," but the authors go on to say that the "increasing toxicity" of antibiotics has given some people second thoughts on this subject. They also mention that sulphafurazole has been reported by one author to cause serious toxic reactions in "3 to 9 per cent." of patients and in only 0.1% by another. Very few useful drugs are omitted, but the section on folic acid antagonists might with advantage have included trimethoprim, and the rifamycins and carbenicillin deserve description in a future edition. Only

four tetracyclines are described of the nine now available, but it may be thought that this is no great loss. Therapeutic applications, pharmacological behaviour, side-effects, and other clinical matters are discussed in connexion with each drug, and almost all essential information is given. However, it might have been made clear that tetracycline-staining can affect the second as well as the first dentition, and one wonders how long ago the authors wrote that ampicillin "may prove to be more effective" than chloramphenicol in treating typhoid fever.

An outstanding feature is the illustrations, almost all of structural formulae, of which there are nearly 200, or of chemical reactions on which drug action depends. For the mere purpose of finding out what an unfamiliar drug is, as well as basic information about its properties and usefulness, this book will be a valuable work of reference. It is astonishing that so much information about so wide a range of subjects should have been compressed into so slim a volume.

L. P. GARROD.

For the Would-be Gynaecologist

Principles of Gynaecology. 3rd edition. By T. N. A. Jeffcoate, M.D., F.R.C.S.(Edin.), F.R.C.O.G. (Pp. 971+x; illustrated. £6 10s.) London: Butterworth. 1967.

Once in a while a medical textbook breaks with tradition and sets a new standard. This was so many years ago with Kelly's books on gynaecology, and Whitridge Williams's *Obstetrics*. In more recent times the same can be said for Jeffcoate's *Principles of Gynaecology*. After eleven years this has reached its third edition and continues to grow in merit and authority.

The book is unusually comprehensive, and while it deals thoroughly with standard topics—with emphasis on the scientific and clinical aspects rather than technical and operative detail—it includes chapters on many related subjects such as "Breast Function and its Disorders," "Sex Hormone Therapy," "Problems of Sex and Marriage," "Sterilization and Therapeutic Abortion," "Urinary Incontinence in the Female," and "Hysterectomy and its Aftermath." An outstanding chapter is that on "Intersexuality," in which the author shows his special interests. This chapter includes a remarkable series of clinical photographs and case histories, and the newer knowledge of chromosomal abnormalities underlying these conditions is lucidly described. Of particular interest to practising gynaecologists is the chapter in which genital cancer is considered as a general problem (the more technical aspects are discussed elsewhere). Here we see the author at his best, dispassionately discussing the problems that arise in treating the patient. He is not without optimism—indeed, much of this section is written in a spirit of hopeful anticipation—but he is ruthless in criticism of the unwarranted assumptions that are too often made by partisans of this or that treatment. Thus, on the subject of exenteration, he states "... the woman with half her viscera removed, or with a rectal stricture or urinary incontinence, knowing that she has had cancer and living in dread of its return, is regarded as cured. One who lives, albeit for a shorter time, in blissful ignorance of her fate and with her physical functions not too much impaired is regarded as a therapeutic failure." Other chapters of special interest are those dealing with skin lesions of the genitalia, and with urinary incontinence. The subject of ectopic gestation is well discussed. Here the author again brings his own and well-founded belief to notice: "If unilateral salpingo-