realise that, to cover overheads, the selling price of a book has to be at least four times its direct costs—after all, the bookseller himself wants 33% to handle it.

Next, just as there are too many journals (often started merely to make their publishers money), there are too many booksmany written merely because the publishers thought that a particular title was a good idea. An approach by a publisher is flattering, but it should be treated with caution—the same sort of caution doctors should use in their professional lives in assessing their patients, or in their personal lives in buying a house or educating their children.

On one point I would agree: that publishers are untowardly slow. In her diaries3 Virginia Woolf records getting galley proofs a few weeks after she had delivered the manuscript, and then having the bound book ready for sending out for review only a few weeks after returning them. All this was only 40 years ago, when printing was relatively primitive. Even at the beginning of the war, for example, she sent her manuscript of Roger Fry to the publishers on 5 April 1940, returned her proofs on 10 June, and the book was published on 25 July. Today we have machines setting print at a rate of thousands of words a minute and vet the average schedule for book printing seems to be well over a year from the receipt of the manuscript. I believe that the trouble is with the system: as with airline travel, everything is centred on the latecomer, and the punctual are penalised by being made to wait in icy airport buses while a search is made for one person. Every day during the rush hour in our cities we allow one car to park in a bus lane so that its occupant can buy himself a newspaper—delaying hundreds so that individual "freedom" can be preserved. This absurd bias ought to stop, and in printing, given that there are no complications, for somebody who delivers a perfect manuscript on time publication within four months must surely be possible.

Youthful disillusion

I will illustrate some of these problems by a personal storywhich I can tell because the person concerned is now dead. As a registrar in pathology I was approached by him to write a pamphlet on clinical pathology as part of a series aimed at medical undergraduates. Flattered, I replied that I was terribly junior, and so anything I wrote would have to be demonstrably a cheap affair summarising the important elementary features of the subject so that it would not compete with authoritative

volumes written by established specialists. Agreed, he said, adding that my royalties would be enough to take me and my family skiing once a year. What happened? The series never materialised; the book was published as a beautifully bound, illustrious-looking volume which shamed my home-spun and elementary points; and it was priced at 36/-. I was surprised at two things. Firstly, that it sold 2000 copies; and, secondly, that my total royalties were £65, which even in the 1960s would not have taken one person on much of a skiing holiday.

In all this, the disillusion was caused by raised expectationsby the publisher's medical adviser, I hasten to say, not by the publisher himself, and not on paper but by word of mouth. A moment's thought should have told me what I now know, or I should have sought advice. Admittedly, the episode cost me nothing more than a few hundred wasted hours and a gasp when I saw the lavishness with which my prose had been decked. But if SOMA had existed then, I believe that I should have gone to them for advice-not prejudiced in my favour or in the publisher's favour, but merely from somebody experienced in the problems.

This is my view of SOMA's primary task—a counselling service on all the problems of the tyro or the established author. Nevertheless, I believe that SOMA could have another important role: by acting as a small and select publishing house, it could do much to raise standards universally. It could commission or choose for publication, say, a dozen books every year and offer authors the highest standards of contracts and printing, in return for their keeping their side of the bargain. There are precedents in non-medical publishing whereby a small house retains its identity even though it uses a larger body to distribute its books. Perhaps a better analogy for SOMA would be the Glyndebourne Opera, which when it started in the '30s was either derided as an amateurish affair in tents or feared as a rival to existing companies. In fact, it was neither, but it did much to raise standards of singing, ensemble, and production in opera, not only in Britain but all over the world. SOMA, I believe, could do the same for medical publishing, which is what all of us-authors, publishers, and readers-want, and its realisation would enable them to show this identity of interest.

References

Pyke, D, British Medical Journal, 1969, 3, 227.
Davies, I J T, British Medical Journal, 1977, 1, 887.
Woolf, V, A Writer's Diary. London, Hogarth Press, 1953.

Author's tales

H A F DUDLEY

I am not quite sure what "authors' tales" is supposed to mean. Presumably it implies ghastly encounters with Scrooge-like publishers who leave their editors or authors in penury while making fat profits for themselves. It is true I have never seen a lean or malnourished publisher, nor do I discern many (if any) medical publishers who have failed. Nevertheless, we must recognise that commercial success is what publishing is about. By contrast, scholarly publishing, to which I suppose we would all aspire, relates to achieving wide dissemination of one's ideas and thus gaining an element of prestige. The overlap between

the commercial world and the scholarly world represents a book or article which is both read and respected. Sometimes, unfortunately, the overlap is small.

Your money and your life

Though I have drawn this sharp contrast between the world of commerce and of scholarship, scholarly publishing must, of course, be more precisely defined. None of us—with perhaps the solitary exception of myself-will admit that we do have much interest in money. Indeed, our overt statements are rather like those we make about teaching: it is part of our reflex responses to say that we like teaching, and I suppose if we say it to ourselves often enough we may even begin to believe it. Personally, I hate teaching unless you define that word as imposing one's BRITISH MEDICAL JOURNAL 3 FEBRUARY 1979

own inbuilt prejudices on others who cannot for the nonce protest against them. Equally-I believe in common with many others—I hate writing. Not having Ian Aird's well organised and encyclopaedic mind which permitted direct dictation; being without that essential journalistic ability of thinking into a typewriter; and having learnt that if anything is ever to be completed it must be done at once and presented in half legible form to a long suffering secretary, I have to spend hours scribbling away in long hand, which is extremely discouraging. In addition, apart from the occasional commissioned editorial, there is a sneaking suspicion that what one is painfully translating from brain to paper will not ultimately be accepted. Thus one is creating a stick to beat one's own self-esteem with. It is a horrible business which I would much prefer to give up. As for writing about writing, that is almost intellectual incest. The only mitigating feature of writing therefore, so far as I am concerned, is the money it can make. I do not regard this as in any way in conflict with the fact that I should also be aiming at a reasonable standard of scholarship.

I think that some of the irritation, anger, and occasionally adversary behaviour that takes place between publishers and writers comes from a failure to understand these different roles and the different emphasis that is placed on scholarship and money. The definitions I have given are relevant to this. Publishers are in the venture capital business. Authors are mainly interested in self-promotion. Publishers usually take all the financial risk; authors may reap some of the reward. Commercially, of course, it is one of the few ways a private individual may earn a dividend without investing money in the direct sense. No wonder publishers find authors a little irritating. On the author's side—whatever his or her motives—there is, however, the investment of emotional capital which biases the view and makes for incredulity when the publisher takes a cold and more detached approach. It has taken me a long time to realise thisindeed my gradually increasing awareness has made me much more sympathetic with publishers, particularly when, as I regret has been the case on a number of occasions, I have failed to deliver on time or at all.

It is unfortunate that authors suffer from a feeling of God-sent omnicompetence, forgetting, in the imagined rosy glow of handling a book with their name on its spine, all the drudgery and difficulty that must precede its production. Consequently, they tend to overcommit themselves or propose unrealistic deadlines. In medicine this is compounded by the fact that few if any of us need to write for bread—only for the jam to put on it—and by the inevitable irregular and unpredictable

demands made by our profession. Publishers, though they may not admit it, are naive, or maybe feel they must tread delicately with authors.

Publisher-author debate

All this has been by way of introduction to debate of the publisher-author interaction; personally, I do not have any horror stories, but there may well be a publisher or two in the audience who could tell tales about me. Nevertheless, I do think there is a need for more exchange of information between author and publisher about the details of writing, on the one hand, and of production and marketing on the other. I feel that authors would take a much more realistic view of making a book if they knew more exactly than most of us do what the task was. Further, they need training in the details of how to get a book out of their minds and on to the printed page. Equally, publishers must be more open. My first encounter with a publisher certainly made me feel that he was doing me a favour and also that he was not going to divulge anything about his trade. His unctuous, condescending approach, coupled with the fact that he had established by some trick the tradition that every author thanked him profusely in the introduction of each and every book he published, concealed a sharp commercial mind and an ability to behave as if he was laying all his cards on the table even when it transpired that some of them were face down. For long thereafter the feeling lingered with me that I was the lesser party in

I am glad to say that this view has been dispelled by many warm and more open encounters since. Nevertheless-and indeed one of the reasons that there is a move to form a society of medical authors—there is still widespread misunderstanding particularly about money. When there are few hard facts, rumour abounds-for example, one production with which I am now associated is said in its first edition to have made less than £1000 for its editors and over £100 000 for its publishers. This is probably rubbish, but the tale lingers on and is one of the sort of author's cocktail party anecdotes that is bad for relations between the two groups. Perhaps such stories are inevitable and to keep the rumour pot aboil is not all that bad, because it generates competition—but this can lead to shopping around by authors in an undesirable way. As long as the tension generated is constructive, however, it may well contribute to good publishing as much as do the driving forces of education, altruism, and money at the moment.

The CELL is the fundamental unit of the body's architecture, and indeed of all plant and animal structures. Even tissues lacking a cellular structure, such as fibrous tissue, bone, and hair, have their origin in cells. The word is derived from L cella, a small room, especially one of several in the same building, for stores, for a monk, hermit, slave, or prisoner. Many homes still have a cell for purposes of storage: it is the cellar. It has been suggested that the original cella was that of the honeycomb (L cera, wax). There are countless instances of shifts from R to L in the same word, and vice versa, within and between languages, so cera to cella is a feasible one. The first appearance of "cell" in the literature of the biological sciences was in botany (1672), a few years after the invention of the microscope. The similarity of plant cell-walls seen in section to a group of small rooms seen in the plan of a building made it a good choice for this newly discovered structure. (It is, incidentally, the material of the plant cell wall that gives us CELLULOSE, celluloid, Cellophane, and Sellotape.) From the cell wall to the inclusion of its contents was a small semantic step. In the zoological sciences the cell wall has thinned to a membrane and even this has merely the structural flimsiness of a physicochemical interface. The cell today is its contents, membrane and all, as a unitary structure.

Brain cells are different—at least they used to be. From the fourteenth century onwards it was supposed that they were cavities or, as it were, pigeon-holes in the brain which were the seat of various mental faculties and where knowledge was stored. The *OED* quotes from Matthew Prior's poem "Alma, or The Progress of the Mind" (1720),

The brain contains ten thousand cells, In each some active fancy dwells.

The modern brain has rather more. One needs a functional reserve if it is true, as has been alleged, that one loses one hundred thousand cells a day during normal aging.

AREOLAR tissue (L area; areola, a little area) is so called because of the small spaces between the connective tissue fibres. These spaces were likened to cells in the original sense of L cella, hence "cellular tissue," an older and now obsolete term for areolar tissue. When the tissue is inflamed we still speak of CELLULITIS. There is another areola (little area) whose possible function is that of a target's inner ring to guide the hungry infant to the bull's eye.