

contributions dealt with the role of viruses and organisms of the mycoplasma group. The views put forward in several papers and in discussion suggest that the role of bacteria in acute respiratory infection is mainly a secondary one.

This book deserves to be widely read by general practitioners. It provides a great deal of interest for a modest cost.

The diary of Richard Kay, a Lancashire doctor 1716–51. Extracts edited by W. BROCKBANK, M.A., M.D., F.R.C.P. and F. KENWORTHY, M.A., B.D. Manchester. Printed for The Chetham Society by the Manchester University Press. 1968. Pp. 179. Price £2 10s. 0d.

Richard Kay's diary is a very interesting account of medical practice in the first half of the eighteenth century. A deeply religious non-conformist, the son of a physician and surgeon in Lancashire, he learnt from his father, rather casually, before going to London to be bound for a year under the resident surgeon at Guy's. Though Kay was hesitant to write in his diary many details of his practice, being far more concerned to write daily appeals to his Maker, yet much can be learnt from these pages. The practice was busy, often there were 'throng' of patients to be seen and a visiting round of up to 20 or more miles to be covered on horseback. There were many road accidents, as well as accidents of all kinds. Lacerated wounds had to be stitched, limbs amputated and fractures set, all these without the aid of hospitals or orthopaedic surgeons. Fevers and consumption were rife and the mortality of children very great. Life was cheap but Kay never got accustomed to deathbed scenes. It is interesting that the Kays styled themselves "physicians and surgeons", that they saw many patients at home and were prepared even to trephine when necessary. This is a book to be read by those who complain of the amount of work which they do today.

A surgeon in the early nineteenth century. The life and times of John Green Crosse. V. MARY CROSSE, O.B.E., M.D. Edinburgh and London. E. & S. Livingstone Ltd. 1968. Pp. xii+210. Price £2.

John Green Crosse was one of the greatest provincial surgeons of the early nineteenth century. Nearly all his life he kept a diary and a series of notebooks recording his cases and his thoughts. From them we are able to obtain a remarkably clear idea of medical practice as it was during his lifetime. After an apprenticeship in Stowmarket, Crosse studied anatomy at the Great Windmill School under Charles Bell, and walked the wards at St. George's. After obtaining the membership of the College of Surgeons he became a demonstrator in anatomy at Trinity College, Dublin. Thus equipped he set up as a surgeon in Norwich. A little man, with a forceful

character, he contrived to be on friendly terms with most of the leaders of the profession, and although his practice grew slowly he was a powerful figure in the medical politics of his day. He founded the Eastern Medical and Surgical Association, and led them into amalgamation with the Provincial Association of Charles Hastings of which he became president for the Norwich meeting in 1846.

The author, Crosse's great-granddaughter, has blended extracts of the diaries and notebooks into an interesting account of medicine and medical practice 150 years ago. Crosse's notebooks are full of incident. Interested in forensic work, he started a "Black book of surgery" "containing unfortunate cases—diseases of treatment—gross mistakes and oversights . . ." and he quoted Abernethy as going so far as to say that any operation was a disgrace to surgery. He planned but, alas, did not publish a book on these lines.

There are a few printers errors which are excusable except when Baron, the biographer of Edward Jenner, is written as Bacon.

Screening in medical care. Reviewing the evidence; A collection of essays. London. Published for the Nuffield Provincial Hospitals Trust by the Oxford University Press. 1968. Pp. 173. Price 35s. 0d.

This is an important book for all who are interested in prescriptive screening. The distinguished contributors make it quite plain that not enough homework had been done before many of the present screening programmes were begun. The main needs are to increase knowledge of the natural history of the diseases concerned, to improve methods of diagnosis and treatment both in efficiency and economy, to solve the operational problems which arise in the handling of large numbers of personal examinations and their assessment, and to find the ways of determining the cost of disease when it is dealt with by prescriptive screening so that this can be compared to the costs of dealing with it by traditional methods.

None of those who are enthusiastically screening patients at present can fail to read this book with profit, but its impact will be lessened by its general attitude, which is at times so preoccupied with the economy that one wonders if the main purpose of medical care has been forgotten; and the use of such a phrase as 'a fanatical screening fringe' (p. 86) does not shed light as much as heat upon the subject.

The general conclusion drawn by your reviewer was that a lot of research into screening methods and related problems is still needed before any more national organized screening efforts should be launched. Those already in being should be watched carefully, and the product weighed against the cost, both financial and in division of scarce resources.