

continence, multiple sclerosis, stoma care and multiple disability, in a sensible clinical fashion, it also demonstrates a sensitive approach to the patient and his family, covering their psychological, social and environmental problems.

The chapter on stroke brings together all aspects of management particularly well, and concludes with an excellent appendix on mobility.

In places the book over-emphasizes the clinical and hospital approach, especially in the chapter on helping patients to adapt to breast cancer. The part which general practitioners play in this scenario is discussed only in passing and it is claimed that the problems of these patients are best solved by specialist hospital outreach nurses. Despite this, the book contains a mass of helpful information and the authors' caring approach to these potentially devastating problems is refreshing.

General practitioners both in training and practice will find this a book that is worth keeping for reference.

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MANAGING CLINICAL ACTIVITY IN THE NHS

Briefing paper no. 8

Chris Ham and David J. Hunter

King's Fund Institute, London (1988)

31 pages. Price £5.95

This briefing paper from the independent King's Fund Institute is indeed brief, but it clearly reflects much of the thinking behind the white paper *Working for patients* and reaches pertinent conclusions which those wishing to control general practice need to heed. Although primarily concerned with hospital clinical management many of its conclusions are very topical and will be relevant for general practitioner budget holders in the post-white paper NHS.

The authors identify three strategies to manage clinical activity: (1) raising professional standards (medical audit; standards and guidelines; accreditations); (2) involving doctors in management (budgets for doctors; resource management; doctor-managers); (3) external control (managing medical work; altering contracts; increasing competition). Existing examples of these strategies are reviewed and the implications explored critically. The authors note, however, the lack of good evaluative evidence.

There are several conclusions of interest to general practitioners: in audit good intentions need translation into practical achievements; audit will be more effective if there are agreed guidelines and standards of care; a national health accreditation agency may become established; budgetary and resource management need the support of clinicians; changes in contracts will be used for management control; and provider competition will change the relationship between managers and doctors — not to mention patients.

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COMMON VERTEBRAL JOINT PROBLEMS

Gregory P. Grieve

Churchill Livingstone, Edinburgh (1988)

787 pages. Price £65.00

Neck and back pain are bread-and-butter problems in the work of general practice. The number and variety of alternative

therapists speaks volumes for our inability to help many patients and is perhaps indicative of the lack of interest and understanding that doctors have for this subject. It was with interest therefore that I opened this book, looking for a clear account of common conditions such as cervical spondylosis and lumbar disc lesions. Unfortunately the title is a misnomer — this is a comprehensive review of spinal disorders, common and rare, as well as a host of non-vertebral conditions that can produce back pain. The author draws on his vast experience as a physiotherapist with the result that the book has become partly a comprehensive review of the literature (2505 references) and partly a textbook of non-operative orthopaedics restricted to the spinal column. It is all there, but 150 pages of double columns on applied anatomy at the start of the book are for the specialist or the student, and not for the average general practitioner.

I am sure the author is an expert — he is clearly methodical and meticulous — but the result is a book that tries to be all things to all people, a vast accumulation of information. Sadly it is not well laid out, and too often the narrative reads like a newspaper instead of a scientific book. There are numerous photographs and diagrams, many of them are difficult to understand and, therefore, add little of value. It will not appeal to general practitioners, and I doubt if it is even a necessary reference book in teaching practices.

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DIABETES

The experience of illness series

David Kelleher

R. Fitzpatrick and S. Newman (series eds)

Routledge, London (1988)

99 pages. Price £8.95

In *Diabetes*, David Kelleher outlines with great perception the problems of coping with an illness which makes great demands on patients and their families, which has a restrictive treatment regimen and which has potentially serious long term consequences. The material is derived from interviews with patients and their families and an extensive review of the socio-psychological literature relating to diabetes.

Beginning with a masterly chapter on diabetes mellitus, its nature and prevalence, the book goes on to discuss patients' experience of having diabetes and living with its treatment. The author then looks at the issues of compliance and non-compliance with treatment and explores the problems that diabetics have with their social relationships. He goes on to discuss issues in the continuing care of patients with diabetes. In the conclusion to the book we are reminded that the treatment of diabetes is not only about measuring blood sugar levels but about attempting to consider what effects diabetes and its treatment regimens have on the individual's life and family, emphasizing that good care has to be directed towards restoring a diabetic person to an active and satisfying life as well as achieving good metabolic control.

I would, without hesitation, recommend the book to any doctor or nurse with responsibility for patients with diabetes. It is refreshingly constructive and free from carping criticism and most of the principles which it highlights are applicable to other major chronic disorders.

COLIN WAINE

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