

A full examination and report by the patient's family doctor should precede any other, whether it is by the firm's chosen consultant or by some other specialist recommended by the family doctor.

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Book Reviews

English midwives, their history and prospects. Reprint of 1872 edition. JAMES HOBSON AVELING, M.D. London. Hugh K. Elliott Limited. 1967. Pp. 182. Price £7 10s.

This book is a collectors and historians piece. It is a reprint and exact reproduction of the original 1872 edition with an introduction and biographical sketch of the author by John L. Thornton, F.L.A., Consultant Librarian of the Royal College of Gynaecologists and of St Bartholomews Hospital. This is printed in modern style which accentuates the fact that the book is otherwise a facsimile copy.

This volume is something of an eye opener to the present generation as to the state of obstetrics in this country less than 100 years ago. When Aveling wrote his main objective was revealed in the last chapter when he pleads for the proper training and licensing of midwives and makes a number of suggestions, some of which have since been adopted.

Little is known of early English midwives. Margaret Cobbe who delivered Elizabeth Wardville, queen to Edward IV, of a prince later Edward V, is the first mentioned. The last is Mrs Margaret Stephen who delivered Queen Charlotte wife of George III of her children and published a book for the *Domestic Midwife* in 1795.

To those interested in the history of obstetrics and indeed of medicine in general this book makes most interesting reading. It brings very sharply into perspective the great advances of the last century over the millenia before and gives a sense of pride in the achievement of the era of rational scientific progress.

Fresh water pollution control in Europe. Council of Europe. 1966. Directorate of Information. Pp. 205.

While man increases upon earth the amount of fresh water available for his use remains much the same. Man is profligate in his use of water for industrial processes and for the 'disposal' of both human and industrial wastes. The contamination of natural waters that has eliminated salmon from Thames and Tees, turned the Rhine into an open sewer and brought biological death to the Lake of Zurich, is a matter of concern to the Council of Europe which, in this report gives a comprehensive appreciation of the problem by a specially appointed working party.

The problems affecting Europe, and experience gained in pollution control elsewhere, are summarized together with accounts of pollution measurement, prevention and treatment. Biologists, chemists, soil scientists and others, as well as medical experts all contributed and an important section deals with the legal aspects of pollution of watercourses which are political boundaries between countries or states.

Though there are, as would be expected, many expressions of pious hope that governments will take proper action, effectively and soon, the report also contains

practical suggestions for mitigating the pollution menace and a suggested draft of a Water Charter for adoption by European countries. It is good to realize that the problem is being recognized and tackled at an international level for, as the report reminds us, water is an international substance.

Clinical judgment. A. R. FEINSTEIN, M.D. Edinburgh and London: E. & S. Livingstone Ltd.; Baltimore: Williams & Wilkins Co. 1967. Pp. vii+414. Price 76s.

This is a book packed with clinical wisdom, a reconciliation of the 'art and science' of medicine. The author achieves this reconciliation despite the scientific inadequacies of the so called scientific basis for medical practice. For example he says (p. 65) "Instead of zealously seeking dimensional measurement for symptoms, signs, and other human properties that cannot be dimensionally measured with precision or convenience, clinicians must seek ways of improving the value of their own verbal clinical descriptions of these entities".

He emphasizes his view of the place of the clinician in relation to the computer as follows (p. 297) "The more distinctly human the phenomenon, the more necessary is a human observer to discern the phenomenon adequately. Whatever can be distinguished only by human speech, sight, smell, touch, hearing, taste, movement, and cerebation cannot be discerned by inanimate devices, which lack the perception of human sensory organs and the ingenuity of a human brain. . . . If the irreplaceable clinical material of the bedside is a sick person, then the irreplaceable equipment for observing a sick person is a clinician. Many contemporary functions of this human observational equipment are antiquated, defective, and performed with built-in sources of error. The contemporary clinician needs a complete re-appraisal of the techniques with which he exercises the skill that distinguishes him from all other artists, biologists, and scientific scholars; the ability to examine a sick person and to reason with the information thereby obtained".

The last and most important part of the book is devoted to the problems of "making, verifying, and preserving the primary observations of clinical examination—to the art and science with which clinicians acquire the fundamental data of clinical medicine. As an observer of human beings and human reactions, the clinician can benefit from any inanimate device that improves his sensory acuity. But he must first recognize that he is a talented, effective, and unique apparatus for perceiving the attributes that distinguish people from each other, from animals, and from all other objects of investigation. To advance art and science in clinical examination, the equipment a clinician most needs to improve is himself".

His philosophy is summed up in the following terms (p. 298) "The art of clinical examination comes from attitudes and qualities that are neither obtained nor easily detected by scientific procedures: the clinician's awareness of people and of human needs; his ability to temper the rational aspects of his work with a tolerant acceptance of the irrationalities of mankind; his perception of faith, hope, charity, love, and other elements of human spirit and human emotion. These properties of care and of compassion, although sometimes dismissed as merely 'bedside manner', are the fundamental and most important tools of any clinician. With them, he can often give healing or comfort where science fails or does not exist. Without them, his science is unsatisfactory, no matter how excellent".

Although the author brings the breadth of view of the good clinician to his description of the scientific basis of medicine and although he deals explicitly