

heart disease, and these diseases are dealt with very briefly for the very good reason that they are fully described in every textbook of medicine. Similarly, electrocardiography has very little space devoted to it and this is to be commended because, although it occupies a disproportionate amount of space in most introductions to cardiology, the value is almost negligible, as it is a subject which demands the full and adequate explanation which can only properly be given in a separate book.

This book is unusual because an adequate amount of the text is devoted to surgery. There is a chapter on general principles of cardiac surgery, and where appropriate there is a section on the special surgery in the treatment of the various cardiac abnormalities. This is most useful as general practitioners are now frequently asked by patients about the pros and cons of surgery. The same general sequence is followed in the description of each cardiac condition: anatomy is followed by an account of the haemodynamic disturbances and the physiological interpretation of symptoms and physical signs; prognosis, treatment, indications for surgery, surgery available and its results follow.

There are many line drawings but no x-ray reproductions.

One of Blackwell's series of Lecture Notes, almost by definition the style is brief and concise, but the total amount of information contained is quite exceptional and it gives the impression that the authors might be persuaded to expand it and fill a gap by producing a British textbook of cardiology.

Clinical diabetes mellitus. First edition. JOHN MALINS, M.D., F.R.C.P. London. Eyre and Spottiswoode. 1968. Pp. xxii + 474. Price £5 5s.

Another 'one-disease' book? Yes, but with a difference, for the condition with which it is concerned is an important aspect of the work of general practice. Patients with diabetes may or may not attend clinics, at long intervals or short depending on their degree of control. Patients with diabetes must remain under the care of a doctor who is able to recognize its earliest stages and who knows when to seek the clinic's help on account of change which he is the first to observe. There is evidence—much of it from studies carried out in general practice—that for every recognized diabetic there is another awaiting discovery. The best and most effective screening programmes are being worked out and a consequence of their operation will be more diabetics who will need supervision and care. Many will be mild but complicated by any or all of the diseases and degenerations which are the general practitioner's stock-in-trade. For these reasons this monograph must be looked at in a different light from that in which large and expensive volumes are usually seen. It can be recommended to practitioners as something to have and to hold and to cherish, with a place on the bookshelf in every staffroom.

The experience on which the book is written derives from the work of the largest diabetic clinic in the United Kingdom, in the conduct of which general practitioners have taken part for two decades and more. From the clinic arose the first major population survey in this country and a continuing programme of research is going on which bridges the gap between the hospital and practices which associate themselves with it. The book itself contains the sum of present-day knowledge, fair accounts of those aspects of clinical diabetes which are at present controversial (including a precise definition of diabetes itself) and informed speculation on the course which work in this field may take in future years. It is all readable narrative—more than can be said for many similar works—and for those who need to use it as a source of references there is an exhaustive

list at the end of each chapter.

No work lacks imperfections. Graphs and diagrams are clearly reproduced but in the proof copy reviewed the photogravure illustrations do less than justice to the publisher, the author and the clinical conditions which they seek to illustrate.

Varicose veins. Compression sclerotherapy. GEORGE FEGAN, M.CH., F.R.C.S.I.
London. William Heinemann Medical Books Ltd. 1967. Pp. xi+114.
Price 30s.

This volume reviews the development of compression sclerotherapy over some 16 years and some 16,000 patients. In an exhaustive study of the anatomy and physiology of the venous circulation of the lower limb, the author points to the great importance of the perforating veins in the pathogenesis of superficial varicose veins. He has developed a technique whereby the varicose veins are accurately mapped and the sites of incompetent perforating veins are marked. Having noted the incompetent veins these are then injected with a small quantity of sclerosant and then the leg is firmly bandaged and compression is maintained for some 6-8 weeks during which the patient remains ambulant, in fact is encouraged to walk. He has used this method in pregnancy and provides evidence to show a reduction in puerperal complications due to varicose veins. He has reviewed some 1,100 patients over a five-year period and believes that an overall satisfactory result was produced in nearly 80 per cent. He points to the great advantages of this method economically by the avoidance of hospitalization, lack of interruption in employment, the easing of pressure on beds and the reduction of waiting lists. He insists on following the exact procedure as laid down, but this would appear to be a method that a general practitioner with an interest in this subject and the facilities of a local hospital might well find a rewarding method of treatment. The book is simply and well written with excellent illustrations.

Symptoms and signs in clinical medicine. Eighth edition. E. NOBLE CHAMBERLAIN, M.D., M.SC., F.R.C.P. and COLIN OGILVIE, M.D., M.R.C.P. Bristol. John Wright and Sons Ltd. 1967. Pp. xi+536. Price 55s.

The eighth edition of Noble Chamberlain's *Symptoms and signs in clinical medicine* has had a number of sensible additions to the previous texts.

The book aims to help the clinical instruction of the student in recognizing the face of disease.

The symptomatology of serious diseases is done well. The reader is taken completely and systematically through all the important clinical symptoms; their elaboration and clinical significance in relation to serious disease is discussed. I was glad to find that the psychological modification of symptoms had been stressed more thoroughly than before. The descriptions of clinical signs is less satisfactory. The text would perhaps be of more practical use if the authors had given a clearer indication of those signs and tests that are clearly in everyday use by clinicians. A good deal of dead wood might have thus been omitted or relegated to small print, e.g., coin test, Charcot's joint, rachitic rosary, risus sardonicus, Von Graefe's lid lag sign and so on. I would like to have seen greater emphasis placed on those clinical signs that occur early in disease and are useful in sifting out serious from common and trivial diseases, e.g. coloured