

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