

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

pictures of inflamed ear drums; rebound tenderness indicates local peritoneal involvement as well as general peritonitis and is therefore an extremely useful early indication that a possible case of acute appendicitis should be admitted to hospital; a complaint of muscular weakness is an early and often confusing symptom of Parkinson's disease.

This book will still provide a reasonable introduction for the student to the classical type of clinical medicine practised by the general physicians in hospital but it fails to appreciate that as the judgement of hospital physicians becomes less dependent on clinical signs and symptoms, so early diagnosis in general practice is one of the main fields in which clinical symptoms and signs remain of paramount importance.

**Pathology.** Second edition. J. L. PINNIGER, M.A., D.M., M.R.C.P. Revised by J. R. TIGHE, M.D., B.SC., M.R.C.P., M.R.C.P.E., M.C.PATH. London. Baillière, Tindal and Cassell Ltd. 1967. Pp. viii+279. Price 21s.

This textbook is one of the series published by Baillière and is intended to meet the need of the student for concise and readable books, providing him with the essential subjects he is studying. They are intended to be of value to the student in helping him gain a sense of proportion towards the subject and to give him a grasp of its fundamentals which may not be so easily acquired from larger textbooks. This large pocket-sized edition has a linen cover, 279 pages, and embraces the subject well. It is easy to read, well set out, and has a good index. Many improvements have taken place since the last edition in 1964. There are no footnotes, bibliography or photographs. There are five diagrams and a few useful tables. This book is intended to act as a supplement to a standard textbook on pathology. In this, it achieves its aim. It may also be useful to the general practitioner who wishes to grasp fundamentals of this subject once again. The established practitioner would probably require a large standard textbook for his bookshelf.

**Postgraduate medical education: Retrospect and Prospect.** JOHN REVANS, C.B.E. and GORDON McLACHLAN, C.B.E. London. Nuffield Provincial Hospitals Trust. 1967. Pp. 50. Price 2s. 6d.

The efficiency of the National Health Service must be directly related to the opportunities provided for the postgraduate education of doctors in all branches of medicine. Since the conference called by the Nuffield Provincial Hospitals Trust at Christ Church, Oxford, in 1961, various aspects of postgraduate education have been discussed in the journals and at meetings throughout the country. Despite this mental activity, surprisingly little has occurred in the form of action. The appearance of the Nuffield Provincial Hospital Trust's report\* is timely, in it developments in postgraduate education since 1961 are reviewed, and suggestions are made concerning the organization that is now required throughout the country.

The "Recommendations as to Basic Medical Education" by the G.M.C. in 1967 made it quite clear that further education after qualification is needed before a doctor can practice any branch of medicine. It has been suggested that the G.M.C. should undertake the task of maintaining rolls of doctors trained to work in the various specialties, and this would include general practice.

What is urgently required is a national organization to put postgraduate education on a sound practical footing. Much is hoped for from the Central