

is more effective than formerly and it is important that the patient should be cared for expertly from the earliest moment possible.

Concise and easy of reference, the first book reviewed here is written by physicians actively engaged in this field of medicine, and it shows an excellent sense of proportion. A practical, clinical approach is preserved. Treatment is not thought to end with the physical recovery of the patient, and the psychological background which may have led to a suicidal attempt is kept in view. The proper transport of a patient (on his side, not on his back), the treating of shock and asphyxia, prevention of further absorption, general care, common errors in treatment, diuresis and dialysis, psychiatric treatment, barbiturates, salicylates, anti-depressants, tranquillizers, snake-bite, fungi, pesticides, prevention—these titles and others represent the wide scope of this handy and excellent book. It is strongly recommended.

The second book is a translation from the German edition and the original style comes through only too clearly. It has two main defects: first a tendency to use too many words, and secondly a passion for classification which does not always serve the subject well.

**Anaesthesia and resuscitation. A Manual for Medical Students.** Edited by R. A. GORDON, C.D., B.SC., M.D., F.R.C.P.(C), F.F.A.R.C.S. Toronto. University Press. London, Oxford University Press. 1967. Pp. x+179. Price 24s. 0d.

This is an excellent manual for the beginner in anaesthesia, and its editor and contributors are to be congratulated upon it. It is well balanced and well written and your reviewer commends it to those for whom it is intended.

**The effects of abnormal physical conditions at work.** C. N. DAVIES, D.SC., F.INST.P., P. R. DAVIS, PH.D., M.B., B.S., F.INST.BIOL., F. H. TYRER, M.A., M.R.C.S., D.I.H. London. E. & S. Livingstone Ltd. 1967, Pp. viii+185. Price 21s. 0d.

How does a man work when he is hot, or cold, or under increased atmospheric pressure? Some attempts to answer the question were made at a conference organized jointly by the British Occupational Hygiene Society, the Ergonomics Research Society and the Society of Occupational Medicine. The lessons learned in military exercises where troops are flown from one climate to another and those of expeditions to inhospitable climates, from arid desert to antarctic ice, are brought together by experts in a valuable symposium report which is not without relevance to the affairs of ordinary practice.

Hypothermia is met with in general practice as well as among survivors of shipwreck. Heat exhaustion, though rare, can occur during an English summer or be met with by a practitioner abroad. Of interest, too, is the account of the disturbance of bodily rhythms, dependent on the personal time-clock, experienced by air travellers who move from one time zone to another. Those who have travelled thus will be aware of the curious disorientation sensations which can be felt, but are hard to describe. Aircrew must experience these disturbances frequently and knowledge of how to adapt and adjust most easily is badly needed.

The practitioner with an interest in industrial medicine will find useful discus-