

in the Department of Forestry Genetics of the University of British Columbia. These trees have been shown to be hardy enough to stand the Canadian winter.

Professor W. C. Gibson of the Department of History of Medicine and Science, U.B.C., has kindly arranged for a stock of the seedlings to be sent to this country. At present they are about six inches high. After the first year they should make rapid growth. After an unknown number of centuries their parent's girth is over forty feet.

The Royal College of General Practitioners has agreed to help in the distribution of the seedlings. All who would like to plant a Hippocratic Plane are invited to write to the Administrative Secretary of the College. A subscription of £2.00 is requested so that a contribution can be made to the building programme of the International Hippocratic Foundation, which aims to rebuild the temple of Aesculapius as a meeting place for doctors from all over the world.

Subscribers will be able to grow a tree from a source unique in its medical associations. Distribution of young trees will begin in the autumn. To ensure against failure to thrive

two or three specimens will be sent to each subscriber; if they all survive, some of our friends too might enjoy having a Hippocratic Plane in their garden.

I look forward to a good response.

Sir,

I hope the reviewer of "Virgin Wives" in your issue of July will forgive me if I point out that it was Gilbert's fictional Duke of Plaza Toro who found it less exciting to lead his regiment from behind. The historical grand old Duke of York marched his army up the hill, and then marched down again.

East Meon, Hants.

FREWEN MOOR.

Cottage hospitals

In the letter from Dr. Dulake on the above subject, published in the journal (August 1971, page 495) that the Reigate Hospital 'had ceased to be a cottage hospital, in fact but not in name, in June 1971.' This should have read in June 1871.

Book reviews

Physiology for practitioners. Edited by IAN C. RODDIE, D.Sc., M.D., F.R.C.P.I. Edinburgh and London. Churchill Livingstone. 1971. Pp. 202. Price £1.50.

This book is a reprint of 24 articles that appeared in *The Practitioner*. The individual contributions by a Belfast team, are essays that cover such subjects as cardiac performance, movements of the alimentary tract, energy balance, the physiology of the ear, muscle tone, the regulation of reproduction, control of body salt and water, and endocrinology. For the individual long out of touch with basic physiology, this book gives a clear, but necessarily brief, view of modern concepts covering a very wide field. For the enthusiast, the latest edition of Samson Wright still remains a must, but this survey fulfills a more modest need.

Textbook of medical treatment. 12th edition. STANLEY ALSTEAD, ALASTAIR G. MACGREGOR, RONALD H. GIRDWOOD. Edinburgh and London. Churchill Livingstone. 1971. Pp. v+694. Price £4.25.

Dunlop, Davidson and McNee was first published 30 years ago and several generations of doctors have benefited from its wisdom. Sir Derrick Dunlop is the last of the original editors to retire and we will have to get used to referring

to "Alstead, MacGregor and Girdwood" as the source of reference on therapeutics. Almost every review of previous editions has been favourable and who am I to contradict my predecessors?

I suppose that some of us are getting used to a more crisp style of writing. The modern tendency is for lists rather than an explanation, but this book would not be the same if it were radically altered. Its price, too, is remarkable. £4.25 for a 700-page book is, by 1971 standards, a bargain.

Cervical spondylosis. Second edition. Edited by M. WILKINSON, D.M., F.R.C.P. London. William Heinemann. 1971. Pp. 1+182. Price £3.00.

There are many things in the medical scene today which did not exist in my professional boyhood, and one of these is cervical spondylosis. Now, when every third person in the street is wearing a cervical collar, it is obviously a common condition, but it was not widely recognized in my student days.

This book is edited by Dr Marcia Wilkinson, who herself writes four of the nine chapters. Her contributions comprise the historical introduction and the sections of pathology, symptomatology, differential diagnosis and prognosis. Professor Ruth Bowden deals with the applied anatomy,

Dr Allan Young with radiology, Dr Geoffrey Storey with medical treatment and Mr Lindsay Symon with the surgical aspects.

The historical section confirms my early impressions. Although Victor Horsley did a laminectomy of a cervical vertebra in 1892, it was not until 1930 that the condition began to be widely recognized.

This is the second edition of the book. The more highly specialized anatomy has been omitted, and greater emphasis is placed on diagnosis and treatment. As a general practitioner I find it of absorbing interest and the section on treatment is of great value. Bed rest and on occasions continuous traction are recommended for the acute case. The less severe cases tend to run a self-limiting course and recover equally quickly whether treated by traction, collar or placebo. Signs of cord compression, if not relieved by lying flat for two to three weeks, are an indication for surgery. Vertebral-basilar ischaemia, often associated with spondylosis, may be helped by a collar and by avoiding provocative movements.

Cervical spondylosis has always tended to be a bit of a mystery—this book has rent the veil from the mystery.

The changing scene in general practice. LAURENCE DOPSON. London. Johnson. Pp. 248.

The general practitioner has had much with which to contend during the last 20 years. State medicine came and brought with it all the difficulties that changes in customs which had existed for centuries were bound to create. At the same time the advances in medical science brought other no less important changes. The kind of disease which the doctor meets today is vastly different from that which he was seeing before the second world war. Hospital care is easier to obtain acute illness such as pneumonia is quickly cured, even the common measles has lost much of its sting. Many more family doctors practise in groups and in so doing have ceased to some extent to be the guides, philosophers and friends of their patients that their predecessors were. The isolated doctor of the past, tied to his surgery with only the help of his wife may not have had so bad a time as has been pictured by such writers as Francis Bret Young, for there were fewer distractions and the telephone was not in those days a universal method of communication. The doctor had to be summoned by messenger, roads were not good, and horses might have to be saddled before he could be fetched. When he saw his patient he had little to offer in the way of cure: diagnosis and prognosis were his forte, comforting words and dietetic precepts, reinforced by galenicals were his *modus operandi*. Today he can prescribe potent remedies for most of the serious diseases which he meets, but he still remains powerless to deal with the lesser ills which beset mankind and truth to say he little understands them. To hedge himself off from the

necessity of meeting with this embarrassment he has surrounded himself with a team of helpers graced with the title of ancillary staff.

The book under review is written by a journalist who has specialized in medical politics and has watched from the side-lines the development of this revolution in medical practice. It is the struggles for better remuneration and conditions of service that especially interest him for it is those struggles that are newsworthy. During most of the time covered by his book another movement was developing; and attempt to bring the patient better service, and to the doctor greater satisfaction in his work. On this aspect of the revolution in practice the author is weak. He mentions the College of General Practice more or less in passing and gives the wrong date for its foundation, yet the effect of the college on the future of medical practice in this country has been great and is continuing.

One of the most valuable features of the book is the very complete list of references.

Blood coagulation simplified. Second edition. F. NOUR-ELDIN, Ph.D., M.B., B.Ch., L.M.S.S.A., M.R.C.Path. London. Butterworth & Co. Ltd. 1971. Pp. xii + 196. Price £2.00.

The appearance of a second edition of this small book soon after the first, pays a sincere tribute to its value for technicians and those students aspiring to pass final examinations in haematology. However, its use to the general practitioner is limited as much of the material is concerned with details of setting up and carrying out laboratory procedures.

The subject of blood coagulation is complex and still not fully understood and Dr Nour-Eldin, as one might expect from such a well known expert, presents the subject in a succinct fashion. The book starts with an outline of the basic principles of haemostasis, including an introductory historical account. The blood coagulation mechanism is described and this is followed by details of the laboratory requirements. A description of the various clotting factors is given, and the theories of their contribution to the coagulation mechanism is outlined in simple fashion. The role of the blood platelets, the vascular wall, clot stability, and the biochemical and biophysical factors and anticoagulants, are not forgotten and are described fully by the author, together with the relevant laboratory procedures.

In the next section of the book, the clinician will find the material of more direct interest and value in his daily work. Here the author gives brief outlines of the clinical application of the various defects in haemostasis as revealed by the laboratory tests which have already been described in the first section of the book.

The final section deals with thrombosis and makes the distinction between what happens