

inside the normal circulation and what happens outside the body or after a change in the vascular wall. In this part of the book I believe that the paragraphs on antithrombotic therapy and its control would be found by the general practitioner reader to be the most helpful part of the book and in particular those pages dealing with the use of anticoagulants. The author finishes his book with a chapter on exercises and hints for the students about to prepare for oral, written and practical examinations in haematology, and there is no doubt that this is a most useful part of the book. A comprehensive bibliography is appended.

In summary, this short book is an excellent account of a complex subject presented in a manner suitable for the haematology student, but apart from those paragraphs which have been mentioned above, not of direct interest to the family doctor as the subject is specialized and rather technical.

The care and training of the mentally subnormal.

Fourth edition. CHARLES H. HALLAS, S.R.N., R.M.N., R.N.M.S., R.N.T. Bristol. John Wright & Sons Ltd. 1970. 286 pages. Price £2.60.

This book has been written as a textbook for nurses specialising in the care of the mentally subnormal and as such it is excellent. It covers every aspect of the problem in a most readable and positive way, the emphasis throughout being on ways and means of helping the mentally subnormal.

Some implications of steroid hormones in cancer.

D. C. WILLIAMS, Ph.D., F.R.I.C., and M. H. BRIGGS, D.Sc., Ph.D., A.R.I.C. London. William Heinemann Medical Books Ltd. May 1971. Pages 138. Price £2.60.

This small book gives an interesting account of a workshop meeting organized by The Marie Curie Memorial Foundation, and held in the University of Surrey at Guildford. It is the second of an occasional series of these meetings devoted to topics of current interest in the study of malignant disease, the object being to bring together workers of different disciplines within the same general field of research, and to span the wide gulf between the clinical and scientific approaches to cancer.

Mr R. W. Raven, surgeon to The Marsden Hospital states: "At the present rate of progress it may take at least another 50 years before these diseases are fully understood and that period may be optimistic". Mr Raven, however, feels that "Cancer prevention now offers important immediate results; research is for the long term, we are moving with confidence into the field of prevention of cancer which is likely to prove the final solution".

In the opening paper on "Steroids in relation to breast cancer in human females" Mr Raven gives a brilliant outline of the surgical and clinical aspects of a problem all too familiar to general

practitioners. He also asks some of the questions we all wish to see answered. Why are men so infrequently affected and women so often? He also poses the question as to the reason that the female susceptibility increases uniformly with age? How can we explain the protection against carcinoma afforded by the parous state, and yet the increased risk when the first child is born with the mother under 20 years of age?

Raven notes that in male relatives of breast cancer patients prostate cancer is more common than in the control population, and suggests also that "The epidemiologist should not collect data about the present uses of oestrogens, such as in foods, cosmetics, and in the contraceptive pill". He continues "It is impossible to forecast the possible long-term effects of the pill steroids on the breast and other organs, but complacency about them is unwarranted." He reports the occurrence of carcinoma of the male breast following prolonged oestrogen administration to several patients with cancer of the prostate, and makes the point that secretions from the adrenal cortex and hypophysis may also play their part because "following oophorectomy there is progressive hyperplasia of the adrenal cortex, producing extragenital oestrogens.

In his concluding paragraph Mr Raven writes "Information is desired about the incidence of breast carcinoma in women who have received steroids for benign conditions, and especially concerning the possible cancer risk of the contraceptive pill."

Much wider ground is covered in the nine papers and the discussions all of which are well worth careful reading; it includes cancer of the large bowel and of the kidney, but space must limit comment to those with special and urgent applications to a disease which kills 100,000 persons annually in England and Wales.

Dr R. J. B. King of The Imperial Cancer Research Fund, London, writes on "Are oestrogens carcinogens?" and again leaves us with a big question mark. Mr Raven in his concluding remarks reminds us that history usually repeats itself and "I personally feel that malignant disease will fall into line with the other great killing diseases of the past and that it will prove to be a preventable disease". Many readers will echo Mr Raven's sense of history, and will recall the early work of Dr William Budd on the typhoid carriers in the Devon village of North Tawton. Today there is need for a realistic study of the heritable, emotional and environmental aspects of cancer that calls for contributions from general practitioner participation in future Workshop Meetings.

It is possible that through such field-work cancer may join typhoid fever in the list of killing diseases that, through the work of a Family Doctor, have been illuminated and later controlled, long before a final understanding and a "cure" has been achieved.