

and social incompatibility as likely signposts to blood disease.

The text is illuminated by case reports, diagrams and blood pictures reproduced in black and white and colour with the customary care of this publisher.

For those particularly interested in blood diseases, or in the scientifically humane care of the elderly, this book will be of considerable interest.

The clinical apprentice. Fourth edition. JOHN M. NAISH, M.D., F.R.C.P., and ALAN E. A. READ, M.D., F.R.C.P. Bristol. John Wright & Sons Ltd. 1971. Pp. v+244. Price £1.50. 96 illus. Paper-covers.

This is a useful handbook for the medical undergraduate to use at the bedside. It is an introduction to clinical methods and supplements well teaching demonstration by the consultant. It is wisely divided into two sections, the first dealing with the examination of the chronic patient—that is in a situation when systematic enquiry can be done at leisure. The second section of the book is useful and deals with examination of the acute patient and how the clinician proceeds more quickly directing his attention, questioning, and examination method towards the most likely probabilities.

If one had to criticize this book it would be that a short account of anatomy and surface anatomy together with a brief note on physiology as an introduction to each system would enhance the value of each chapter. This omission is underlined by the fact that in the one instance where they have included physiology—the physiological background of respiratory disease—they have been successful in producing a brief, simple and useful summary. The authors have also included helpful information on blood, water and salt balance, the examination of the unconscious patient, and the examination of the acute emergency. The written material is supported by good diagrams and there are two good tables at the end of the section on the acute abdomen.

In summary, this is a practical book for the medical undergraduate, and acceptable as the fact of a fourth edition proves, but of less interest to the general practitioner.

Asthma and other allergies. ERNEST PHILIPP, M.D., M.R.C.G.P. New Zealand. A. H. & A. W. Reed. 1970. Pp. 9+77. Price \$1.00 N.Z.

Health education has become an important feature of the medical scene. The popular media put out features and articles aimed at the general public who seem to have an insatiable appetite for more information about disease and doctors.

When done well, health education is valuable not only to patients but to their doctors, as they will come closer to talking the same language to

the benefit of both parties. Unfortunately, considerable skill and experience are needed if the professional is to speak to the non-professional in terms that are clear, concise, logical and interesting. It is necessary to be able to say what is widely accepted as fact, and what remains in the realms of hypothesis. An optimistic tone is useful, if truth permits, and unnecessary pessimism is to be avoided.

Having come to the end of the book, the patient should be able to say "How interesting! Now I understand better what my doctor is trying to do for me, and I know how I can help him if our common aim in overcoming or controlling my illness".

This slim pocket book must be judged by these criteria. In a short space it attempts to touch on many aspects of asthma and allergy, and it is not always easy to judge from the text what is widely accepted by allergists, and what remains hypothetical.

In the chapter 'General Explanation' the author has tried to explain allergy in simple terms, with the result that sentences appear like: 'If the irritation becomes intolerable to the tissues, the body's defence-mechanism goes out of gear'. It should have been possible to state briefly that allergy consists of certain types of cell reaction to certain classes of foreign body, and that these reactions can cause different types of symptoms in those susceptible. This chapter contains too many 'woolly' statements to be of much value to the intelligent asthmatic.

There follows a brief discussion of different classes of allergies and their sources. There are some controversial ideas in the section on food allergy in relation to infant feeding. The story of a patient allergic to onion, collapsing on eating tinned tomatoes containing only a trace of onion, might make the non-professional reader believe this to be common, whereas it would be rare enough to make interesting medical gossip among doctors, or to get written up as a case report for a medical journal.

In the section on treatment, ephedrine is given its proper place, but a little later it is mentioned under 'Stimulants' where ephedrine compounds are bracketed with methedrine compounds, both to be condemned. Disodium cromoglycate is not mentioned at all.

The psychological background to allergy is discussed under several headings. Asthma can be a severe handicap. The constricting of the chest, gasping for breath, and sense of imminent peril, are feared and dreaded experiences. The disabled's sense of being 'different from others, and restricted in work or play', are all part of the asthmatic's burden which is often triumphantly overcome by individuals who achieve success in life despite adversity. They need the support of relations, friends, and society in general, and where this is lacking, it is hardly surprising that they

suffer from the psychological difficulties enumerated in the book. Fatigue following prolonged states of tension, excitement or frustration, is probably the commonest psychological determinant of an attack. As pointed out in the book, it can be a learned reflex response to situations and stimuli which have provoked previous attacks.

The final paragraph expresses the hope—'If this booklet has taught you to stop worrying about "allergies" then it has fulfilled its task'. The reviewer is, himself, allergic and hopes that he does not worry too much about it, but it is feared he may start to do so if his patients were to ask him to explain parts of this book.

The booklet has no index.

Legal abortion. The English experience. First edition. ANTHONY HORDERN, M.D., F.R.C.P., M.R.C.P., D.P.M. Oxford. Pergamon Press Ltd. 1971. Pp. v+289. Price £3.75.

This publication written by a consultant psychiatrist at a London teaching hospital reminds us immediately of the intense interest in the subject of abortion in this country in recent years.

The author has collected a mammoth list of 498 references, of which over 300 date from the years 1969 and 1970. But mercifully, the pace may even now be slackening, as of the 300 odd, 1970 provided only just over a third. Perhaps we are thinking more and writing less? The book gives a comprehensive survey of the situation leading up to and since the passing of the abortion Act in 1968.

The early chapters cover the attitudes and customs which lay behind the demand for clarification of the law and the broadening of its scope. These are followed by a chapter on the various methods of termination of pregnancy and the main part of the book is devoted to an account in considerable detail of the way the Act has affected society and its successes and failure, much of it quoted direct from the lay press.

There is a departure from the scope suggested in the title by the inclusion of a 50-page chapter on abortion problems in other countries, but this makes interesting reading and well illustrates the fact that however handled the unwanted pregnancy poses its problems.

As is to be expected in a work with so many references, the opinion of others are given ample scope, but one wishes the author had treated us to more of his own views with their foundation in his wide clinical experience. The book will be useful to doctors in a general way and for its lavish bibliography, but its main appeal will be to those "looking in from the outside", as it were, and to legislators and social workers in countries where new laws on abortion are under consideration.

Obstetrics for the family doctor. Second edition. DAVID BROWN, F.R.C.O.G. London. Pitman Medical Publishing. 1971. Pp. i + 179. Price: £1.25.

This is a paperback second edition of David Brown's book on obstetrics for the general practitioner. At Chelmsford he has one of the best postgraduate obstetric educational centres in the country. He is very well aware of general-practitioner needs. His annual report on the obstetrics of his area shows that over 54 per cent of all deliveries in the area are under general-practitioner care, either in the home or in general-practitioner units, and the proportion is rising.

This book makes no attempt to be a textbook of obstetrics. On the contrary it is concise and dogmatic, giving the general practitioner a sound and feasible method of dealing with whatever problem presents. There may be other methods which would be equally good, but the follower of David Brown will know at least one which will suffice. There is one new chapter on The Postnatal Examination; the old have been carefully revised and brought up to date regarding new developments since the first edition was published in 1966. It is an excellent guide for the family doctor who wishes to look after his own maternity cases or those of his group, to deal with them himself as far as he is able and to call for specialist assistance at the appropriate time.

Visits to doctors. First edition. K. J. MANN, M.D., M.R.C.P., D.T.M.H., JACK H. MEDALIE, M.B., CH.B., B.SC., M.P.H., ELINOR LIEBER, M.B., CH.B., D.P.H., J. J. GROEN, M.D. AND LOUIS GUTTMAN, PH.D. Israel. Published by the Jerusalem Academic Press. 1971. Pp. 7+335. Price £0.00.

This book is a detailed report on the work done in a health centre in a new suburb of Jerusalem. The patients comprised a large number of immigrants in a developing community. The doctors providing general-practitioner care worked in teams of two and were supported by an average of one and a half nurses per doctor and a changing population of supporting workers, including at times a caseworker, a clinical psychologist and a statistician. The medical work was under the direction of Dr Medalie who is chairman and professor of family medicine at Tel Aviv University Medical School. The principal objectives of the centre were to provide personal medical care centred on the family. Continuity of care was recognized as being important and was one of the reasons for the structure of the two-doctor team. The objective, as in this country today, was to provide physical, psychological and social medicine simultaneously. Subjects like family planning were specifically mentioned as being within the rôle of these doctors. The work-load for the individual physicians was of the order of 300-400 families, but in addition they did a substantial