

## BOOK REVIEWS

**Paediatrics.** (1973). APLEY, JOHN. Pp. 432. London: Bailliere. Price: £2.50.

This book is written first and foremost for medical students and was largely drawn from "a batch of fragmentary lecture notes". Its style therefore, is linguistic rather than literary and the cheery personality of the author is present on every page.

Family doctors will be delighted that Dr Apley's attitude and approach to paediatrics is so similar in many ways to their own. As a guide to the student about to begin his first paediatric firm, this book would be invaluable. It is doubtful whether its clinical content, however, would get a student through the paediatric part of his final examination and for that reason it might be better entitled 'An introduction to paediatrics'.

That the book is not for the general practitioner can be highlighted by stating that 'where to treat?' (home or hospital) is dealt with in two sentences; how many thousands of hours are spent by anxious general practitioners deliberating over that one question. Perhaps more fundamental, however, is that Dr Apley's description of his patients arise largely from outpatient department contact. Hence long tracts on the various circuitous outpatient tricks and foibles necessary for the strange doctor to acquaint himself with the new patient. To the general practitioner the child arrives "not as a stranger" and his personality, his family, his life style are in the general practitioner's mind as the consulting room door is opening; against that background few tricks and foibles are needed.

The book demonstrates, even at this fairly elementary level, the problems that beset the generalist attempting to cover an entire field and, therefore, inaccuracies occur; acute tonsillitis does not "have to be looked for"—in a large proportion of cases in general practice (where the vast proportion of cases are seen) the mother makes the diagnosis and the child enters the consulting room almost with mouth open ready; in acute bronchiolitis all cases are not treated with antibiotics as any Newcastle graduate knows; the giving of tetracyclines for acne vulgaris has little to do with its anti-infective properties. Medicine is becoming so complicated that one can but wonder how long it will be before generalist books of this type disappear from the shelves.

In summary then, this book is a splendid introduction for the junior medical student—but its value to the family doctor is limited.

G. N. MARSH

**Care of the Elderly—An exercise in cost benefit analysis** (1972). WAGER, R. Pp. 74. London: The Institute of Municipal Treasurers and Accountants. Price: £1.00.

This slender booklet contains the report of a highly competent piece of original research, undertaken

on behalf of the Essex County Treasurer's Department to the comparative costs of domiciliary and residential care of elderly persons. By using social survey techniques, and ascribing monetary values to services provided to old people in their homes, the author has succeeded in using the techniques of cost-benefit analysis in relation to domiciliary and residential methods of care of old people in his Council's area, by using for study those applicants on a waiting list for residential accommodation. He has tackled the involved problems of ascertaining the optimum balance between the various programmes of care for the elderly, and of giving substance and value to what have hitherto been regarded as "intangible" factors, in a quite admirable fashion.

He begins by clarifying the policy alternatives by a detailed analysis of the personal attributes of applicants to residential care, their health and incapacity, financial situation, housing standards, the reasons underlying their application, and their potentiality for continued domiciliary care as assessed by social welfare officers using an extensive questionnaire, which is set out in an appendix.

The comparative costs of domiciliary and residential care are then considered as an important, but not the sole, factor in the decision-making process, and calculated on the basis of actual expenditure for the financial year 1969/70. Thus we find the average cost of the distributed meal comes out at approximately 16p, while the estimated average cost per home nursing visit is 69p, and that of attendance at an occupational centre £2.45, with 35p for transport.

It is concluded that a larger proportion of elderly people in need of substantial care could obtain it in the community, if intensive domiciliary care was provided; although this could, in some situations, be substantially costlier to the community than residential care, depending on the cost of sheltered housing or lower value housing. The marginal difference overall between the two forms of care suggested a greater 'return' would be obtained by the relative diversion of resources from the future expansion of residential facilities into a selective domiciliary care programme.

From the general practitioner's point of view it is important to note that this influential document suggests that the social case worker would be a vital link in the care of elderly people in assessing the client's suitability for residential or intensive domiciliary care, and should be the co-ordinator of supportive services in developing a domiciliary care programme for each client, where necessary negotiating with housing and social security authorities, while ensuring that the necessary medical attention has been sought. Many general practitioners will feel that this would make important inroads into their traditional sphere of action, and that the role of the social case worker, even in emergency situations, would displace them.