

Morique Cornwell, a physiotherapist, has produced a book for disabled mothers which is full of practical advice and information of a general nature. She also devotes sections to the problem of wheelchair mothers, epileptics, the blind, and the partially sighted. There is also a chapter for deaf parents which is written by a mother with partial hearing. The appendices contain valuable information on equipment, suppliers, and publications.

This book can confidently be recommended to any disabled mother, preferably early in her pregnancy, as it will help her to get the right equipment and, where necessary, build up her confidence in her ability to cope. It would be a valuable addition to any group-practice library as a reference book for any member of the team who may be called upon to help a disabled mother. Few, if any, of us have the breadth of knowledge which, after much research, Morique Cornwell has set out so clearly. The book is well illustrated and the ring binding enables it to lie flat for ease of handling.

SHEILA GRIFFITHS

So you're Paralysed (1975). BERNADETTE FALLON. Pp. 116. London: Spinal Injuries Association. Price: £2.

It is always difficult to criticise a book which is aimed at an audience which does not include oneself. This short book or large pamphlet provides information and is a practical guide for living for the paraplegic. It is imaginatively produced and type set and the information is clear. My guess is that paraplegics would find it both acceptable and practical (the author had advice and help from a number of wheelchair users) and I have no hesitation in recommending it.

J. S. McCORMICK

Aerobics (reprint 1973). COOPER, K. H. Pp. 182. London: Bantam Books. Price: 50p.

Every so often I pick up a book so compelling that I read it from cover to cover in one session. This is such a book. It is the most enlightening text I have yet encountered on the subject of physical fitness.

Doctors favour exercise for their patients, but are weak on detail. What kind of exercise? How much? How often? How fast? Well, er . . . Cross-country running for cardio-respiratory fitness, weight-lifting for muscular strength, and callisthenics for joint suppleness all contribute to the physical requirements for athletic fitness—but this does not tell us much about medical fitness. Athletic fitness and medical fitness do not quite coincide.

That few of our patients come to grief from weak muscles or creaking joints is in stark contrast to the disaster area of cardio-respiratory morbidity and mortality. In cardio-respiratory fitness lies the link between athletic and medical

fitness, and Dr Kenneth Cooper of the U.S. Air Force makes this the central theme of his book. With his ergometer, his treadmill, his measurements of maximum oxygen consumption and, not least, his 12-minute test, he evaluates all exercises and games from this single viewpoint and each is rated on a points system.

Running, walking, cycling, and swimming rate high, weight-lifting and callisthenics rate nil and the rest come somewhere in between. Some games admirable in themselves rate surprisingly low. This is the book of an enthusiast and is written in a popular style, but the message is clear. "Achieve so many points in any way you fancy each week and a state of being in training is maintained; do less and it isn't." I closed it feeling that it might be less profitable to worry about cholesterol and lipids than to turn them into carbon dioxide and water by time-honoured methods.

N. B. EASTWOOD

A Scandalous Impromptu (1976). BURROUGH, E. J. Pp. 23. Oxford: E. J. Burrough. Price: £1.

The open ward is still an accepted part of the hospital scene—should it remain thus? This small monograph is an argument against the concept. As the author states, this is not a social pamphlet. Its primary intention is to introduce administrative sense, a saving of money by a fuller use of expensive acute hospital beds, a plea for doctoring for doctors and nursing for nurses, and only secondarily for privacy in sickness for everyone.

The author examines such factors as admission and discharge, average length of stay, segregation of beds by sex, and turnover rates, and suggests that the use of single rooms would increase efficiency and save over £40 million a year (1974 prices). The author decries the inefficiency ascribed to the traditional firm, department, or "kingdom" in hospital. Having stated his case for the single room, he examines some of the arguments against it, such as cost, increased nursing difficulties, and destroying the community atmosphere, and demolishes each with evident enjoyment.

He then rehearses arguments, now widely familiar, in support of general-practitioner involvement in hospital care for some patients and shows how the introduction of single rooms could facilitate this move. In conclusion, he advocates administrative support ("an enabling office") specifically designed to further the concept.

This polemic is entertainingly written, although it will undoubtedly irritate some hospital administrators, partly because the arguments do not take sufficient account of exigencies like 'flu epidemics. Yet there is sufficient substance to warrant its widespread reading by all concerned with health services planning, even although £1 is expensive for 23 pages.

J. D. E. KNOX