

is acceptable to any given couple, but as important is the proviso that such behaviour should not harm others.

This booklet is helpful as a guide. It covers most common aspects of sexual medicine from the normal sexual response to the commoner sexual disorders, sex aids, sexual deviation, homosexuality, disorders associated with physical and functional disease, and it includes a chapter on genetic counselling. Each paper is presented in a readable clinical manner, and as Dr Stephen Lock, the editor of the *British Medical Journal*, writes in the foreword, provides a "convenient source of practical advice on a subject of growing importance".

M. S. HALL

**Man, Environment and Disease in Britain** (1976).

G. MELVYN HOWE. Pp. 301. Harmondsworth: Penguin Books. Price: £1.25.

There can be few established doctors who have not, from time to time, speculated on the work of their predecessors. There must have been someone who cared for the sick in what is now their practice area two generations ago, and someone else two centuries before that. What were the demands made upon them and how did they differ from the routine work of the day in the mid 1970s?

Professor Melvyn Howe, a geographer, has taken the British Isles as his canvas, particularly that part of England south and east of the Tees-Exe line, the 'Lowland Britain' of the archaeologists and historians. Within this framework he has drawn pictures of the environmental forces acting on populations in towns and country, and of people's response in terms of success or failure in adaptation. To do this he has had recourse to the arts and sciences far beyond medicine, and the book is by no means a textbook of epidemiology. It contains a blend of history, economics, and sociology, with genetics and meteorology thrown in for good measure in so far as all these have a bearing on what presented to our predecessors as disease.

Generalisations are inevitable in a book of this kind, but it is not difficult to apply them to particular situations. A reviewer with an urban working class practice can see for himself the contemporary outcome of the chain of events which repeated itself in major towns and cities throughout the country, as economic circumstances forced people to move in from the countryside to crowd the slums yet further, while providing the muscle and sinew of increasing industrialisation. The back-to-back houses are still there, some of them, and the patients of today are the descendants of the patients of yesterday.

The author recognises Britain as a focusing point for successive westward migrations of populations, from the early Mediterranean settlers to the Pakistanis of today. He observes, too, the approach from the east which has characterised the great epidemics and pestilences which have punctuated the pages of history. Though he did

not do so, he might have commented that this process still goes on and that rabies is following the westward path taken by many successful—and some unsuccessful—invaders of this country.

Any book which helps us—the temporary caretakers of our practices' health—to keep our perspectives right is of especial value in times of turmoil and upset medical values. This one goes further and predicts the kind of response required of us as doctors to the problems of degenerative illness now that infectious disease is for the most part controlled by advances in public health and medical care. Degenerative diseases have their onsets no less than acute infections. Where, when, and in whom do these occur? How far are these onsets determined by environmental factors, some of which we are only now beginning to recognise? The implication is clear to us. This study of disease where it begins is the responsibility of the present and future generations of general practitioners.

The medical reader will accept some simplifications, remembering that Professor Howe is not writing for him alone. He will forgive some repetition, for in the continuity of things circumstances and diseases are apt to recur through the centuries. If he thinks, as he reads, of the circumstances of the practice with which he is familiar, he will surely gain a fuller understanding of his own problems. Difficult as these may be, they are as nothing to those confronting the practitioners in, say, the Great Pestilence of 1348.

R. J. F. H. PINSENT

**On the State of the Public Health—the Annual Report of the Chief Medical Officer of the Department of Health and Social Security for the year 1974.** (1976). Pp. 128. H.M.S.O. Price: £1.70.

One of the benefits of a fully integrated National Health Service should be the ability of the central organisation to produce factual information about the organisation and functions of the Health Service. It is encouraging that both the quantity and quality of such reports is increasing and documents such as *Social Trends* and the annual Chief Medical Officer's report are establishing themselves as basic source documents for those who wish to understand the working of the British National Health Service.

The 1974 review has 13 chapters, each of about ten pages, and is well presented. The text has been edited successfully to remove jargon and is easy to read.

While it is hardly necessary for general practitioners to read most of this report, three sections are of special significance: chapter seven on primary health care, chapter three on vital statistics, and chapter four on incapacity and disablement.

The chapter on general practice gives figures for the annual number of doctors becoming principals for the first time, the annual number

of appointed general-practitioner trainers, the number of trainee practitioners in post, and the number of new principals receiving the vocational training allowance for the first time.

It makes the point that the number of appointed general-practitioner trainers is now about 1,200, which for the first time has therefore reached the number of doctors first becoming principals. It notes with regret that only a sixth of the new entrants to general practice have completed full three-year vocational training (i.e. about 200) and that about half will have spent a year as a trainee practitioner. There are, of course, 1974 figures and the position should have improved considerably since then.

These three chapters at least are well worth reading by all those general practitioners who take part in the organisation and administration of the Health Service, through local medical committees, district management teams, health authorities, or the health care planning teams.

D. J. PEREIRA GRAY

**Personal View (1975).** Ed. STEPHEN LOCK. Pp. 17 + 302. London: British Medical Association. Price: £3. (including postage).

Rarely does the reviewer receive a book which causes him to burn the bedside lamp far into the night, and to occasion rebuke from the party of the second part for his disturbing chuckles, sighs of appreciation, and snorts of disapprobation. This selection from the long series of *Personal Views* published over the years in the *British Medical Journal* did just that to me.

The editor has selected 100 examples from about 500, and has chosen well. They are all short essays, most can be read in five minutes and the rest in under ten: the perfect bedside material, but it is difficult to read one without catching the title of another and being absolutely forced to unwrap *that* parcel. It is as seductive as a dictionary of quotations.

In any anthology one has to accept the rough with the smooth—no editor can please everybody—he must please himself and hope for the best. This editor has done the customers proud, and it would be a dull doctor indeed who did not find himself fascinated by the great variety of subjects and the great originality of thought which many of the authors show. Protean is the word.

One is astonished how well, how elegantly, so many doctors can write when they are astride their hobby horse or venting their spleen or just gently ruminating over time lost and days past. Why don't more doctors write more?

The accurate description of the book as a paperback scarcely does it credit. The paper and typography are of the highest order and pleasant to handle, and it will look well on any bookshelf.

This, ladies, is the ideal present for Master—provided always that you can tolerate the midnight lamp, the infuriating chuckle, and that occasional angry snort.

J. MILES

**The Family Physician—Proceedings of the International Workshop of Family Medicine** September 1972. Special Edition. Herzliya: Israel.

One of the characteristics of an expanding discipline is that it becomes difficult to keep abreast of the developments in different countries and in different aspects of the discipline. We are at present spectators of and to a lesser extent contributors to intensive inquiry and research into education in general practice, into the organisation of primary care, and into its potential for research. The International Workshop of Family Medicine held in Israel in 1972 was concerned with studying these three aspects of family practice in the context of international medicine.

The proceedings of the Workshop give a fascinating account of the views of those involved in general practice from both an academic and practical viewpoint, and represent the "state of play" in 1972. No doubt opinions have changed or have been modified by further study and researches in the three and a half years since the Workshop. Nevertheless, it is of value to have some base line of international thinking and this the proceedings present in admirable fashion. Although of particular interest to those involved in academic general practice this book should be available for reference to all concerned with the practice and philosophy of family practice and with the education of future practitioners.

J. H. BARBER

**Treatment Room Nursing (1976).** JACKA, S. M. & GRIFFITHS, D. G. Oxford: Blackwell. Pp. 155. Price: £5.50.

The demands made by doctors on their practice nurses vary widely from practice to practice, but are certainly increasing, so that the practice nurse is playing an increasingly important part in the care of patients. Many of the procedures a practice nurse is asked to carry out will not have been covered in her general training, and it is up to the general practitioner to ensure that his nurse is familiar with all aspects of her job. There is no substitute for practical experience, but a book covering much of the work involved in treatment room nursing would be of value in any treatment room.

A wide variety of topics is covered, ranging from brief notes on planning and equipping a treatment room to the application of a plaster-of-paris splint. Procedures are well indexed, being divided into diagnostic and therapeutic, with very few omissions. However, a fair amount of rather basic knowledge is included (how to weigh and measure a patient, take blood pressure, give injections) while the importance of listening to a patient is never mentioned. Despite this, there is no difficulty in understanding the procedures, with step-by-step instructions, and much practical advice on the