patient care, particularly those involved with health care planning teams, but its great value lies in the variety of approaches offered in the solution of the formidable problems foreseen for the latter part of this century.

M. K. THOMPSON

Rita Greer's Extraordinary Kitchen Notebook (1976). RITA GREER. Pp. 110. Portsmouth: Rita Greer, Price: £2·15.

It would be easy to discuss this book as just another contribution to the cookery cult beloved of the Sunday colour supplements, but it is more than this. It is a sincere attempt to make a very restricted diet interesting and palatable for those who are unfortunate enough to have to eschew gluten, wheat, cane sugar, cholesterol, and saturated fats.

There cannot be many patients who are advised simultaneous restriction of carbohydrates and lipids, but even if foods in one group are to be restricted, Mrs Greer's recipes will give the cook a very good start. It is surprising where a large onion fried in margarine can lead. Conventional dishes for all meals, for patients of all ages, can be simulated.

The recipes described were arrived at by trial and error. They are clearly set out. The book is produced and published by the authoress herself and is obtained from her at 44 Wallisdean Avenue, Portsmouth, Hants. Would it be considered male chauvinism to suggest that a more convenient form of binding could be adopted for the next edition, one that would enable the book to lie open, flat on the kitchen worktop?

R. J. F. H. PINSENT

Practical Contraception (1976). RAMASWAMY S. & SMITH, T. Pp. 149. Tunbridge Wells: Pitman Medical. Price: £3.50.

This must be *the* book for all general-practitioner family planners. It covers the entire subject concisely and in an interesting manner and gives accurate information, not only about contraception, but also about allied topics such as vaginal discharge and pyschosexual problems. The authors are to be congratulated on a book pitched at exactly the right level in content and style for its potential readership.

We particularly liked the early chapters on strategy at the first consultation. These contain good, sound advice and are obviously written with the benefit of long practical experience. The chapters, indeed the whole book, reflect a greater appreciation of the general practitioner's role in family planning than we might expect from a specialist author. We also thought that the three-yearly vaginal examination and smear as recommended in the chapter on oral contraception was in tune with modern thinking and

a good guide for those who have not made up their minds on this issue.

Nothing is perfect, however, and it is a pity that the chapter on I.U.D.s seems weaker than the rest of the book. One would like some cervical dilators to be included in the necessary fitting equipment, and there is surely a place for a hook for difficult removals; not all are as easy as is suggested in this chapter. No sources are quoted for the table regarding I.U.D. annual event rates and in some respects the figures in this appear to conflict with the text. More stress might have been given to the need for expert training in I.U.D. techniques and for practice under supervision.

As responsibility for contraception falls increasingly on the general practitioner's shoulders, it is ever more important that his standards and techniques should be beyond reproach. Saroja Ramaswamy and Tony Smith have produced a book which defines both. Armed with it, an informed and sympathetic doctor should be able to give his patients a better contraceptive service.

JOHN LLOYD
MARGARET LLOYD

Clinical Examination (1976). JOHN MACLEOD. Pp. 491. Edinburgh: Churchill Livingstone. Price: £4.95.

Medical education is customarily divided into three parts: undergraduate, vocational, and continuing postgraduate. The teaching of physical signs to undergraduates is not usually considered to be the main task of general practitioners, but there is usually a plethora of signs and Clinical Examination is an excellent reference book to settle arguments about the fourth heart sound, how high the sphygmanometer should be pumped in Hess's test, and what the significance of bilirubin or urobilinogin in the urine might be.

There is a welcome increasing awareness of the importance of being good clinicians in the vocational training schemes, and I enjoyed re-reading the hospital method of history-taking and full physical examination, though I felt that more should have been included on interviewing techniques. General practitioners rely heavily on pattern recognition and hypothesis testing but occasionally the 'full works' are essential.

The section on psychological examination was well worth reading and introduced in an easy way the concept of the doctor's feeling as a diagnostic tool and the doctor as a drug. The description of taking a sexual history seemed strangely inhibited and formal and the chapter on the respiratory system a little remote from the bedside. The description of vaginal examination was limited and very clinical and the rich information to be gleaned from the patient's behaviour quite ignored. It would be more helpful to explain the feelings engendered in the patient and the doctor than