What makes this book immediately attractive is, undoubtedly, that it starts from where the doctor starts, with symptoms, considers the diagnostic possibilities which each of these raise, and only then discusses some of the disease entities in question. "In particular, our first clinical contact," remark the authors, "is not with a disease... but with a patient complaining of symptoms or presenting physical signs." For the students encountering patients for the first time, and for the young postgraduate, this approach has obvious merit.

There is great merit, too, in starting the text with a chapter on "psychogenic symptoms". Disentangling symptoms of psychological origin from those of somatic origin remains one of the doctor's most difficult tasks. As Pickering (1974) has commented: "It is an issue which most doctors like to avoid and it demands the highest level of professional skill." In his preface, Dr Seward reminds us that psychological activity produces effects on all the physiological systems of the body; and he formally rejects any dichotomy of mind and body. However, in spite of this, he does not entirely succeed in shaking off his proscribed duality. Thus, for example, he writes: "Headache in the psychoneurotic subject is less a pain than an expression in physical terms of the underlying disturbed mental state, a symbolic expression of psychological stress rather than a statement of fact." Further (such is the tyranny of present clinical classification), he conveys the impression that all somatic expressions of psychological stress represent either "anxiety states" or "masks" of "depressive illness".

In all, 24 symptoms are considered. Each chapter is prefaced by a "synopsis of causes"; and in all these synopses, cases "which are commoner in Europe or are of clinical urgency are italicized". Since, however, what is common is not always urgent, and what is urgent is not always common, such use of italics is liable to be misleading (e.g. as causes of thoracic pain, "pneumothorax" is italicized, "collapse of the lung" is not; "reflux oesophagitis" is italicized while "rupture" is not; and so on). A uniform typeface would have been preferable in these sections.

Following the synopsis, each chapter has brief sections on the physiology of the symptom concerned and on diagnostic approaches to its assessment, followed by a brief description of some of the major disease entities involved. Inevitably in a book of no more than 350 pages, these descriptions are extremely compressed and, the reader may well feel, often superficial. Periodically, as in the discussion of hypertension, stat-

istics are produced in summarized dogmatic form without reference to their source. Such will not satisfy the inquisitive mind of contemporary students; and it is at this point that they will wish to move back to more satisfying texts.

H. J. WRIGHT

BLEEDERS COME FIRST

Colin Douglas

Canongate Publishing Edinburgh (1979) 171 pages. Price £4.95

In his second novel, Colin Douglas has got the recipe for success about right—a large slice of Kildare, a leavening of Doctor in the House, much good clinical material, beautifully presented and sufficiently ghoulish to hook the layman, and a zest of illicit sex into the bargain: nobody can ask for more.

Our hero is a young casualty officer in a large Scottish hospital. His duties are, it appears, to direct his material to the correct one of the many specialist departments by which he is fortunate enough to be surrounded. He manages this, and has time to conduct an affaire with the wife of a sick colleague, which unendearing activity appears to have no beginning and no end. Interwoven with this is the tale of the Indian doctor in perpetual pursuit of a fellowship—which quest has a tragic end. A tenuous plot, indeed, but with all that lovely gory stuff who needs a plot, anyway?

The day-to-day work of Casualty is described with such skill that the intelligent layman will understand easily, and the medical reader will find his interest fully engaged. Good, accurate, racy stuff.

What a pity it is, then, that the author allows what one can only describe as an obsession to intrude. He never misses an opportunity to make venomous and tasteless attacks on his general practitioner colleagues.

Let those general practitioners who lack insight know that they are lazy, ignorant, and inaccessible, and employ professional obstructionists to deal with their telephone calls. (I use the author's words.) And how interesting it is for those of us who had thought we had spent much time gently educating young casualty officers, to discover that "not infrequently, when faced with the obvious consequences of neglect or mismanagement by an established and virtually invulnerable(!) member of the profession, a casualty officer one or two years out of the egg had to treat the

patient and save the day . . ." He also has to "minimise discussion of previous fumblings". Ah well, we live and learn.

Colin Douglas has the facility and the material to write more and interesting books, and it is to be hoped that the catharsis provided by this one will enable him to rid himself of his little hangup—at least in print—for his own sake and that of his readers. Lapses of taste of this order do not pay off in the long run—however much they may pander to the tastes of those addicted to sensationalism.

In short, this is a good little book spoilt.

JOHN MILES

STRESS AND RELAXATION

Jane Madders

Martin Dunitz London (1979) 128 pages. Price £1.95

In March 1978 this *Journal* reviewed Mrs Madders' previous short book *Relax*, which has now been enlarged in text and illustrations. The result is a detailed book on an important subject which is pleasant to handle and which general practitioners will not hesitate to recommend to their patients. It is very much to be hoped that work-addicted doctors will themselves heed its lessons.

S. L. BARLEY

PYJAMAS DON'T MATTER

Trish Gribben

John Murray London (1979) 51 pages. Price £2.50

I look forward to the day when a couple of three-year-olds get together and write the definitive manual of childhood. When they do, I know that this picture-filled guide for parents will be one of the books to which they will turn for material on how to be a successful toddler. In the meantime, we parents can be grateful for an amusing and unpretentious account of child rearing.

All the important bodily functions are sensibly and briefly covered. There are pages headed "Why does she cry?" and "Why doesn't she sleep?", and the section called "Knowing (roughly) a little of what to expect" gives a very readable, recognizable, and not too neur-

otically detailed account of developmental milestones. For example a toddler (up to three years) ". . . runs away when called, shrieks and grizzles when you want quiet, especially when you telephone, wants a pink mug when you give the red . . ." Discipline and "Behaviour which bugs you" are given an airing and there are a couple of pages on "When you hit too hard", which describe danger feelings towards the child and how to counter them. It is a pleasure for those with daughters to find whole sections written about little girls, and throughout the book the illustrations confirm that the text is written with real live children in mind.

From the general practitioner's point of view, a section dealing with a few common things such as diarrhoea, or scotching old wives' tales such as "kids catch cold in the cold", would have enhanced the book's value. Unfortunately the parents of the "won't eat, won't sleep" brigade tend not to read books, but if they are going to read anything this is the one for them.

The author should take it as a considerable compliment that my review copy is going straight into the practice waiting room.

S. A. HALL

MODERN MEDICINE. A TEXTBOOK FOR STUDENTS. 2ND EDITION

Alan E. Read, D. W. Barrett and R. Langton-Hewer

Pitman Medical Tunbridge Wells (1979) 633 pages. Price £14.95

This textbook is refreshing in its approach to general medicine and I certainly wish it had existed in my student days. The excellent use of tables and diagrams is attractive and stimulating and helps to combat the disincentive of pages of solid print common to most general textbooks.

The common ground work of general medicine is systematically covered with contributions by recognized specialists in each discipline. There is even coverage of the elements of tropical disease and parasitology and an excellent chapter on chronic disease and disability.

There is no doubt that the book will be well received by the students for whom it is intended, but I am less certain of its usefulness to the established general practitioner or trainee. It is inevitably hospital orientated and contains little that is useful to primary care physicians except, perhaps, for occasional quick reference purposes.

A. P. KRATKY

ANNUAL REPORT FOR 1978 OF THE MEDICINES COMMISSION

A notable section in this year's Annual Report of the Medicines Commission, contained in appendix three, is on product liability. It concludes: "The Medicines Commission has serious reservations about the practicality of applying the concept of product liability to medicines without there being extensive further consultation."

D. J. PEREIRA GRAY

A SYNOPSIS OF CARDIOLOGY

S. C. Jordan John Wright and Sons Bristol (1979) 335 pages. Price £7·75

General practitioners do not often buy textbooks and therefore few textbooks are aimed specifically at the general practitioner market. This book, appearing 15 years after its last edition, claims to be directed at undergraduate and postgraduate students. 'Postgraduate students' should really include all doctors, at whatever stage of their medical careers, but this book seems to be aimed at students in its narrowest sense—that is, someone intending to take an examination.

For a doctor planning to take a diploma or test involving questions on cardiology, then undoubtedly A Synopsis of Cardiology should prove useful. It gives countless lists under every subject heading—lists of symptoms, signs, drugs, treatments, techniques, indications, investigations, and so on. This dogmatic way of presenting facts is accentuated by the almost complete lack of references. In a modern textbook aimed at anyone but the reader 'cramming' for a multiple choice examination, it is just not good enough to say, for example, that beta-blockers may offer some protective effect after myocardial infarction without discussing theories of action or what the actual evidence is. There are also some serious omissions; for instance, no mention is made of the risk of the sudden withdrawal of beta-blockers.

If I seem unfair in making these criticisms of a book that claims to be only a

synopsis, it is because I feel that such a synopsis has no place in the library of a general practitioner who needs a clear guide around the maze of modern cardiology.

DAVID HASLAM

EVALUATING PRIMARY CARE

E. Clark and J. Forbes

Croom Helm London (1979) 235 pages. Price £10.95

Southampton Medical School has always been unique in the emphasis it places on general practice in its teaching and research programme. Unique also is Aldermoor Health Centre, the home of the university practice: its teaching and research facilities are apparently unequalled. It is hardly surprising, therefore, that a unique programme should have been set up to study diseases which are predominantly the responsibility of general practitioners, to investigate different methods of providing primary health care, and to define and audit high quality care in general practice.

The working model adopted was McKeown's; age-specific care by a team of general practitioner 'specialists', comprising one paediatrician, two 'mediatricians', and a geriatrician, with a psychiatrist added later. Patients were actively discouraged from seeing other than the doctor specializing in their particular age group. There was, however, some freedom allowed during holidays.

From the start, the record and information systems had to be completely redesigned. Old notes were converted to a problem-orientated format in A4 folders. An extremely ambitious and somewhat costly computer programme was created, in order to store and analyse the wealth of data deemed to be necessary in the pursuit of their research.

What were the conclusions? Has it all been worth it? Without a doubt this is the bravest attempt so far to apply a strict system of audit in general practice, albeit of an atypical kind. The first hundred pages describe the system and the reasoning behind it. Computer buffs will relish a beautifully concise description of the CLINICS programme, which we are told can be used, without the computer, by any practice concerned about its standards and dynamics of care.

Fifty pages follow of material from the CLINICS programme—aspects of the care of patients with sore throat, hypertension, and psychogenic illness.