

England, dieting advice along these lines is my most frequent act of anticipatory care.

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References

Burkitt, D. P. & Trowell, H. C. (1975). *Refined Carbohydrate Foods and Diseases: Some Implications of Dietary Fibre*. London: Academic Press.

Yellowlees, W. W. (1979). Ill fares the land. *Journal of the Royal College of General Practitioners*, 29, 7-21.

THE HISTORY OF ANTENATAL CARE IN BRITAIN

Sir,
I am currently researching the history of antenatal care in Britain, and am finding it difficult to obtain information about the development of general prac-

itioner antenatal care. The period I am interested in runs from the beginning of the antenatal care movement (at the end of the First World War) to the present day. Are there any general practitioners who possess records (or good memories) relating to the pre-NHS era who would be willing to supply me with data? I would be very grateful for any help of this kind.

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BOOK REVIEWS

THE PRINCIPLES AND PRACTICE OF MEDICINE. 20th EDITION

A. McGhee Harvey, Richard J.
Jones, Victor A. McKusick, Albert
H. Owens, Richard S. Ross (Eds.)

Appleton-Century-Crofts
New York (1980)
1569 pages. Price £25.05

Sir William Osler's *Principles and Practice of Medicine* was first published in 1892. Early editions of the book were firmly based on pathology and morbid anatomy, although as a teacher Osler was principally known for attaching great importance to careful clinical observation of the patient: "The student begins with the patient, continues with the patient and ends his studies with the patient, using books and lectures as tools, as a means to an end."

More recent editions of the book have departed from the pathological classification which Osler favoured and which is also followed by other present-day medical tomes. Instead, successive editors have now followed Osler's teachings and concentrated on a patient-centred and problem-centred approach to medicine which gives considerable attention to differential diagnosis and patient management strategies. As a result, it is both easy and profitable to read right through a section and review one's own management strategies against those suggested in the text. It is less easy to use the book as a quick reference.

This edition has been written by a hundred co-authors, all present or recent members of the teaching staff at Johns Hopkins University School of

Medicine. Inevitably, present-day American practice of internal medicine dominates the book. Consequently the best sections are those concerning the mainstream of internal medicine, such as the chapters on cardiology and respiratory medicine. The sections dealing with psychiatric and psychosomatic problems are brief and not particularly helpful.

I suspect that general practitioners usually turn to large medical texts for quick reference. For this purpose the competitors—such as Price's textbook or Cecil and Loeb—are probably more useful. However, for more general reading or for problems of differential diagnosis, this text deserves to be considered as a useful but secondary addition to a postgraduate or practice library.

S. A. SMAIL

INCONTINENCE AND ITS MANAGEMENT

Dorothy Mandelstam (Ed.)

Croom Helm
London (1980)
233 pages. Price £9.95

Incontinence is a subject "we dinnae care to talk about", in the words of the old Scots saying. In chapter nine of this book doctors are accused, probably justifiably, of adopting a pessimistic attitude to its management. Yet it is a common and socially devastating problem. A general practitioner will care for about 60 elderly patients suffering from this condition. Even in younger patients

there is a high incidence; e.g. Nemir and Middleton, in a study of 1,300 college girls, discovered 52 per cent suffering from stress incontinence. The development of incontinence is probably the most frequent precipitant of hospital admission in the elderly.

The book aims to cover incontinence in the adult population, but naturally the emphasis is on the elderly. The initial chapter deals with normal micturition and its control. It is particularly effective in demonstrating the relationship of different clinical states to abnormal function as shown by urodynamic studies. The following two chapters cover urological and gynaecological aspects of the condition, particularly those concerned with investigation and treatment. The remainder of the book is concerned with management outside hospital. This, of course, requires a multidisciplinary approach with social factors often occupying a more important place than medical ones. There is much repetition of clinical and assessment details in these chapters, which encourages dipping into the pages rather than total immersion. Possibly the attention of different professionals will be concentrated on the section written by a colleague rather than on the whole book; this weakness is inherent in any book aimed at a varied readership. Certainly general practitioners will be amply rewarded by a study of Keith Thompson's chapter on management in the community. His mnemonics for classification of patients are particularly helpful. The appendices covering checklists and guidelines, equipment and further reading are a valuable supplement.

This textbook will find a place on the shelves of the practice library where it