

BOOK REVIEWS

FUNDAMENTALS OF NEUROLOGY

John M. Sutherland

MTP Press Limited
Lancaster (1980)
272 pages. Price £7.95

Neurology is a discipline which may offer a clinical challenge or an apparently baffling puzzle. It is therefore helpful to find a book which is readable and a useful refresher on the subject. It aims to be an elementary text with a strong clinical bias and to serve as a working tool rather than an addition to a library shelf. In these it seems to succeed. It is a working manual with useful emphasis on presenting symptoms and signs; for example, headache and movement disorders as well as more anatomical grouping of disease (such as vascular diseases or myelin disorders). The chapter headings seem fairly haphazard but each topic is given a reasonable discussion. There are fairly extensive references and suggestions for further reading.

There are also some proofreading errors, such as the association of exophthalmos with Horner's syndrome and the developmental milestone of sitting at eight weeks. It may also be rather optimistic to suggest that 50 per cent of those with infantile spasms (hypsarrhythmic EEG) "can be effectively treated with prednisolone". Other sources (for example, Richard Robinson, *Medicine*, August 1980, p. 1627) suggest that steroids may reduce seizure frequency and EEG changes but not affect the resulting mental handicap in 90 per cent of cases.

While most topics include some discussion of management and therapy, the emphasis is more on diagnosis; for example there is a helpful scheme of considering signs as vertical (pyramidal tract dysfunction) and horizontal (cranial nerve lesion) to pinpoint the anatomical site of the lesion. Drugs used in Parkinsonism are tabulated, but there is no discussion of general practice management relevant to a patient with a deteriorating course. Methysergide is mentioned as possible migraine therapy without a warning of the rare but serious complication of retroperitoneal fibrosis. With these reservations, I found this a useful neurology refresher which is readable, reasonably priced and relevant to general practice, with the possible exception of a chapter on

venomous Australian spiders and snakes.

CAROLINE MARGARET JONES

THE SYMPTOM ICEBERG. A STUDY OF COMMUNITY HEALTH

D. R. Hannay

Routledge and Kegan Paul
London (1979)

218 pages. Price £5.95

No general practitioner can be unaware of the emerging imbalance between what health services would like to do, what patients would like to have and the resources society provides to meet these needs and wishes. Everyone knows that priorities have to be hammered out, and most would agree that well-collected and presented information is a better starting point than expert prejudice. For some years, part of the debate has centred on the iceberg of unmet need (people who should be patients) and on the opposite problem of trivial illness (people who need not be patients). It is argued that health services should seek out the former and discourage the latter, thus bringing needs and resources more into balance.

Some time ago (the date of the survey is obscure but appears to be about 1970), Dr Hannay, then a medical sociologist and epidemiologist, set out to study the prevalence of physical, mental, behavioural and social symptoms in a sample population drawn from a Glasgow health centre, and to find out what people did about these symptoms. Over 1,300 registered patients were seen at home by lay interviewers, who completed a questionnaire which takes up 25 pages of the book. A vast amount of information was collected and, even though it is selectively presented, it still makes reading the report quite a task and poses problems of choice for the reviewer. The associations between living conditions and admitted symptoms, and between various symptoms and referral to health and social services, are intriguing but to be brought out need further focussed research.

This is not a book for the majority of family doctors to buy or even read. But doctors should know about it so that those interested in using epidemiology to clarify who needs care may consult it.

I. M. RICHARDSON

PEDIATRIC THERAPY. SIXTH EDITION

Harry C. Shirkey (Ed.)

The CV Mosby Company
London (1980)

1,321 pages. Price £45.50

"Pediatric Therapy is your book; it is compiled for use as an advocate for children"; so starts Dr Harry C. Shirkey. The text then follows, with 108 contributions from the cream of American and Canadian paediatrics. Unfortunately, therein lies the fault, as this is a book written for North Americans, by North Americans. Much of the basic history and drug licensing information is peculiar to the USA and therefore of little relevance to the British market. There are other problem areas too, and one has, for example, to keep to generic names because trade names are often different from the British equivalent.

Finding the sections on intensive care, poisoning and a table of drugs (presented in much the same way as the old *British National Formulary*) is made easy by coloured pages. However, on balance I found the layout rather haphazard. One section starts a symptom approach—'pain', 'vomiting', etc—but the book then goes on to infections of various systems and later still there are chapters on system diseases such as 'respiratory' and 'digestive'. Despite the American difference in the timing of immunizations, I found this section comprehensive and easy to follow, as I did the chapters on surgery and orthopaedics. The basics of child psychiatry and behaviour disorders are also covered.

Older doctors will be pleased to know that the normal values are quoted in mgms % and not in the new SI units. The 90-page index is more than adequate, but again, finding something as simple as 'nappy rash' can prove difficult unless you know the American equivalent—'diaper dermatitis' (then again, 'emesis basin' sounds much nicer than 'vomit bowl'!).

On the whole this is a book founded on good, solid paediatric practice, drawing on a wealth of experience. I am sure it would be a standard reference text for any American paediatrician, but for the average British general practitioner I feel there are more relevant, less expensive alternatives.

GARY CHAMBERS