
MEDICAL LITERATURE

BOOKS REVIEWED

CARDIOVASCULAR REHABILITATION

L. H. Peterson (editor)

Collier MacMillan,
London (1984)

336 pages. Price £37.50

This is an attractively produced book which fulfils the promise of its title in giving a comprehensive account of cardiovascular rehabilitation. As well as dealing with the psychological, social and physiological consequences of cardiac disease there are useful chapters on dietary and nutritional elements. There are two chapters dealing with insurance risk evaluation and health care cost implications of cardiovascular disorders which will prove of interest, although perhaps of limited direct usefulness to the non-American reader. A clear account of the philosophy and approach of the Houston Cardiovascular Rehabilitation Center is given, including descriptions of the sophisticated nuclear medicine technology available there.

While one would warmly recommend this book to the cardiologists, cardiovascular surgeons and those involved in hospital-based rehabilitation to whom it is directed, one would hesitate to recommend it to the wider audience who are seeking practical guidance in cardiovascular rehabilitation methods in the nonspecialized unit setting.

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THERAPEUTICS IN TERMINAL CANCER

R. G. Twycross and S. A. Lack

Pitman, London (1984)

208 pages. Price £7.95

This book is written from lecture notes by the authors, both consultants in hospice care. It is introduced as providing 'a framework of knowledge from which a doctor can develop an individual thera-

peutic approach to the control of symptoms associated with far advanced cancer'. It does this in a clear, rational way, although it still maintains an adaptability to an individual doctor's way of practice and an individual patient's needs.

The book is divided into two parts—the first is a description of symptom control organized according to the system from which the symptoms arise; it includes a general chapter on pain relief, including use of co-analgesics and non-opiate analgesics. The second part consists of an excellent chapter in a question-and-answer format, covering the best way of using and of dealing with the problems of using oral morphine; there is also a chapter on psychosocial issues, a not infrequent cause of difficult problems in the care of the dying. An appendix indicates the modal dose and wide range of doses of drugs often necessary for symptom control.

There is a large amount of useful information and therapeutic guidance in this book but it is easy and interesting to read. Potentially it has immeasurable value for general practitioners involved in the care of patients with advanced cancer.

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GENERAL PRACTITIONERS AND CONSULTANTS

A study of outpatient referrals

Robin Dowie

King Edward's Hospital Fund for
London (1983)

207 pages. Price £8.50 (including
postage) from Oxford University
Press

In the British National Health Service general practitioners are the main gatekeepers to hospital services, and their decisions to investigate or refer are major factors in determining health service activities and costs. This book describes a valuable study of outpatient referrals by general practitioners to physicians and includes taped interviews with general practitioners and objective analysis of the general practitioner's referral letter cross-linked to the consultant's decision and advice.

Among the findings, of particular importance was the suggestion that a

systematic work-up by the general practitioner before referral was more likely to lead to a full diagnostic hypothesis being formed and subsequent agreement by the consultants. Biochemistry in particular emerged as a possible new indicator of quality of care. Moreover, a statistically significant association was found between agreement with the consultant and a full diagnostic hypothesis classified by the general practitioner in the referral letter and there was a significantly smaller chance of the general practitioner's full hypothesis being different from the final outcome.

A new finding was that doctors from group practices (misleadingly described as health centres) were more likely than others to make referring diagnoses in agreement with those of physicians. Senior house officers were far heavier users of the pathology service in medical outpatients, and they discharged no more than 12 per cent of their attenders while consultants discharged 21 per cent. The main obstacle to discharge was lack of confidence in the family doctor.

Since one of the main findings was that consultants viewed referrals and referral letters largely in the light of their opinion of the referring doctor, and general practitioners referred in the light of their opinion of the consultant concerned, it is important that these hidden factors should be studied further.

One interesting fact to emerge was that in England between 1958 and 1980 the average decrease in new outpatients was 1 per cent per year whereas patients attending for review increased by over 1.5 per cent per year.

Although this is an important and useful study it obviously does not provide a comprehensive analysis. For instance, patients with similar problems who were not referred were not included in the study, and the value of the referral to the patient and to the referring doctor was not fully pursued. Moreover, there is an assumption throughout that the consultant's decision was right.

The main title of the book is rather misleading, since it describes only one aspect of the work of two kinds of doctors; the subtitle is more accurate and conveys correctly the content of the book, which can be warmly recommended to all doctors concerned with the referral process.

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