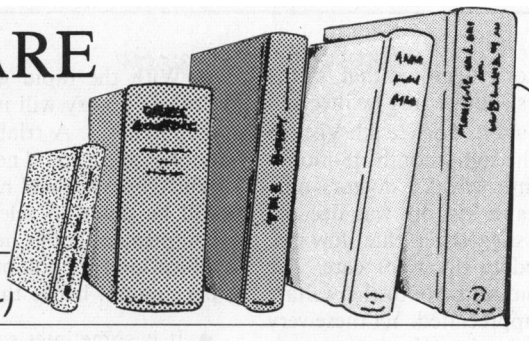


# PRIMARY CARE BOOK SHELF



D.S. RIVERS  
S.H. DESBOROUGH  
JOANNA DOWELL  
F.M. HULL

NIGEL STOTT (Reviews Editor)

## AN ANTHOLOGY OF FALSE ANTITHESES

Sir Douglas Black  
*The Rock Carling Fellowship, The Nuffield Provincial Hospitals Trust, Oxford (1984)*  
71 pages. Price £6.00

## CULTURE, HEALTH AND ILLNESS

Cecil Helman  
*Wright P.S.G., Bristol, London (1984)*  
242 pages. Price £19.50

## 1984 YEAR BOOK OF FAMILY PRACTICE

Robert E. Rakel (Ed)  
*Blackwell Scientific Publications, Oxford (1984)*  
557 pages. Price £34.50

## DEAFNESS (4th edition)

John Ballantyne and J.A.M. Martin  
*Churchill Livingstone, Edinburgh, London (1984)*  
291 pages. Price £6.95

## THE ELDERLY

W.J. MacLennan, A.N. Shepherd and I.H. Stevenson  
*Springer-Verlag, Berlin (1984)*  
181 pages. Price £10.00

## ORAL MORPHINE IN ADVANCED CANCER

Robert Twycross and Sylvia Lack  
*Beaconsfield Publishers, Beaconsfield, Bucks. (1984)*  
34 pages. Price £1.95

## ATLAS OF MORTALITY FROM SELECTED DISEASES, IN ENGLAND AND WALES 1968-1978

M.J. Gardner, P.D. Winter and D.J.P. Barker  
*John Wiley, Chichester (1984)*  
96 pages. Price £59.00

## PRINCIPLES OF PRACTICE MANAGEMENT

Wesley Fabb and John Fry (Eds)  
*MTP Press, Lancaster (1984)*  
244 pages. Price £25.00

*An anthology of false antitheses* is a book which will please any thinking primary physician because it is full of wisdom. Sir Douglas Black draws from a lifetime of experience as he considers some of the paradoxes which face the world of medicine in society and he calls these antitheses.

A paradox is something seemingly absurd but actually correct, and many discoveries in the science have relied on someone being able to grasp the simultaneous reality of apparent opposites (for example wave-particle theory). Black draws on contemporary examples to show how the most important principles are common to science and the humanities and he avoids simplistic categorizing of people into groups by virtue of their training,

their roles or their skills:

'My own view is that there are "cold" and "warm" people in every walk of life . . . I find enough strength in these various arguments [which he reviews on pp. 25-30] to make me believe that "scientific detachment" is a myth of popular belief, not recognisable by scientists themselves nor to those who know them well'

As early as page three the reader will find himself confronted with a thesis which is attributed to Popper, developed by Medawar and enunciated clearly by Black: that the problem of error is not satisfactorily dealt with by inductionist theories of the scientific process because these theories assume that error arises from a simple misapprehension of the facts provided by nature. It is rather the case that error is a reflection of human fallibility when speculating about the facts. Here Black has identified the main point of the thesis which he develops in the text as the following principles: the reality of human fallibility; the need for humility; a search for truth; a wonder at the complex nature of our universe.

Another feature of this monograph is the author's use of quotations and references. He uses the work of great scientists and thinkers with his own work and ideas to form a mixture of the old and proven with the new and more speculative. Black then applies this framework to the following controversial areas: misunderstandings related to science; misunderstandings related to medicine; misunderstandings related to the 'medical model'; miscellaneous antitheses including training, privacy, confidentiality, research, safety and animal experiments.

Many of the antitheses involve a tension between individual and collective views of priorities in society and readers will enjoy his compassionate yet systematic approach to alternative medicine and the vociferous Ian Kennedy. However this book is no apologia for medical science as it is in the 1980s, or was in the 1970s. It deals ruthlessly with the bad scientist, the poor practitioner, the narrow-minded specialist and all those who ridicule the principles listed above.

Three direct quotations from the book, give an idea of the style and wit and also the breadth of coverage in this 71-page monograph:

'I find it most paradoxical that at a time when soundly based scientific knowledge of disease and of therapeutics is steadily expanding there should be an expansion, apparent or real, of systems of treatment whose basis is unscientific, sometimes brazenly so'

'The Elephant and Castle, provided one goes underground, is a good vantage point for observing the social cost of a high discharge rate from mental hospitals'

'My support, possibly even bias, for clinical medicine does not blind me to the great value of preventive measures. If I knew what it meant, I am sure that I

would support the Alma-Ata aim of "health for all by the year 2000"!

These three quotes reveal that Black is a product of his generation and training. If the public rejects scientific medicine it is likely that the profession has not yet learned how to deal with the public. This area of medicine cannot be relegated to 'the art of medicine' without asking how better to teach that art, or how to be better practitioners of the art. Likewise the aims of Alma-Ata are unlikely to be fully understood by Black because he is a traditional medical thinker. Primary health care understands that thinking but is moving beyond it.

This Rock Carling monograph is a good tribute to the passing of 1984. Members of the Royal College of General Practitioners will be pleased to find evidence in its pages of the effects of their vision for a new primary health care for the 1990s but they need also to remind themselves of the principles Black has identified if they are to avoid a regression towards mediocrity over the next decade or so.

N.C.H.S.

The author of *Culture, health and illness* aims to 'introduce the reader to some of the basic ideas and research in medical anthropology'. The author defines medical anthropology as how people in different cultures and social groups explain the causes of ill-health, the types of treatment they believe in, and to whom they turn if they do get ill'. What could be more relevant to the work of a family doctor? The book deals with cultural aspects of basic bodily structure and function and closely allied nutritional attitudes. It examines the huge variety of human response to care and carers and to pain. It looks at the adaptation of man in his infinite variety to stress and misfortune and at the effect of anthropological factors on mental illness.

This book covers a very wide field in its 242 pages and therefore can only be an introduction to this huge field. In the early chapters it is a little repetitive but the subject is revealed and stimulates a wide range of thought in the reader. This book must contain new knowledge for all readers but this is not its function, rather it puts known facts in a different setting so that the reader sees familiar problems of the consulting room in a different light. There is an extensive bibliography of more than 250 references and another feature is an appendix of clinical projects, which may be used to initiate simple anthropological research or to increase awareness of cultural factors in all aspects of medicine. The last chapter on cultural aspects of epidemiology is directed at research-oriented general practitioners who are fascinated by the peculiarities of behaviour of their patients.

This book should be on the reading list of everyone sitting the MRCGP and would lead to fewer failures at oral examination. More importantly it should be prescribed for the undergraduate — but while medical training persists in stressing fact rather than encouraging thought, it is unlikely that it will have much impact on our medical schools.

F.M.H.

My first impressions of the *1984 year book of family practice* did not fill me with enthusiasm. For those not familiar with the year book series, it is an American publication, containing abstracts of articles from medical journals published in the previous year. The abstracts are followed and linked by editorial comment. Although British journals are well represented, there is a strong transatlantic flavour. The concept of a tome such as this may seem daunting to the average British general practitioner, and it may take a considerable effort of will to get down to reading it (perhaps American doctors feel similarly, for they are told in the introduction that reading the book and answer-

ing a few questions on its contents can 'earn them 25 hours continuing education credit' — a thinly disguised bribe!).

However, on opening the volume at random, I was pleasantly surprised to find how much there was in it to attract my attention and sustain my interest. The book is arranged systematically, and as far as possible, articles on related topics are adjacent and are linked by editorial comment and criticism. The abstracts are generally of a high standard, and sufficient of the original data is included to allow an assessment of their validity. The selection of articles for abstraction, however, is a little idiosyncratic, and some of the articles would seem to have almost no relevance to general practice in this country (for example, a review of 85 patients with Wegener's granulomatosis, or a report on the use of amiodarone in life-threatening arrhythmias, or the measurement of serum zinc levels in myocardial infarction). Family practice may be different in America, but in the UK articles of that nature would be restricted to specialist journals. However, other articles are pertinent and useful. For example, the abstracts of two controlled trials of different managements of acute otitis media are placed side by side and linked by succinct editorial discussion; there is an abstract of a paper indicating which clinical signs are the best predictors of pneumonia in a febrile child; there are abstracts of large randomized controlled trials on the treatment of mild hypertension; and there are abstracts of recent reports of various researches into sudden infant deaths. These abstracts make stimulating reading and may have even more impact than the original articles, because of the way they are arranged and put into context by the editor.

This book contains a great deal that is of interest. However, owing to the delays involved in publication all the abstracts are from articles published at least one year before publication of the book and many are now between 18 months and two years old. The book has a comprehensive index which includes entries from the previous four volumes. For those who do not keep back copies of journals, this book could provide a useful ready reference to original research articles.

All in all, I felt that the concept of the book was good, but I suspect that most British general practitioners have access to sufficient reviews and abstracts of the current literature from the various educational journals, which most of us receive weekly or monthly through our letter boxes.

D.S.R.

*Deafness* by Ballantyne and Martin is intended for otologists, medical officers of the public health services, family doctors, paediatricians, teachers of the deaf, educational psychologists, carers for the deaf, audiology technicians and health visitors.

Books with such a wide brief rarely satisfy the requirements of any specific group. However, this is a well written, comprehensive book which will interest the general practitioner who wishes to learn about aspects of care for the deaf, beyond those with which he is normally concerned.

After making the reader aware of the size of the problem by stating that two million people in England, Scotland and Wales should be wearing hearing aids, the book goes on to deal with the anatomy and physiology of the ear. The physiology is made more interesting by including historical notes and alternative theories. This approach is a feature of most of the book and provides a pleasant format for the reader.

A guide to tuning-fork use and an interpretation of pure tone audiometry are followed by a 40 page section which deals with the more complex types of audiometry and provides considerable detail about hearing aids. This section provides more detail than is usefully required and this is also the case with a later section on surgery. However, the rest of the book is full of interest. The common problems of otitis media, glue ear and otosclerosis are

covered and the largest section of the book deals with the deaf child and acquired sensorineural deafness. The role of hereditary factors, drugs, infection, anoxia and the environment are covered, together with a special mention of rubella, which alone accounts for 20 per cent of congenital deafness.

The essential role of early diagnosis in congenital deafness is emphasized, while the difficulties of early diagnosis are explained. Failure of early diagnosis may result in an underachieving maladjusted child. However, education of the deaf child at a special school may lead to isolation from the rest of the community. The final sections rightly, but briefly, cover psychological aspects of deafness and rehabilitation.

This is the fourth edition of *Deafness* and that in itself is some indication of the success with which the book covers medical, educational, psychological and sociological aspects of deafness.

S.H.D.

*The elderly* is one of a series of books on clinical management in medical specialties. It is intended to give advice on treatment, with particular reference to drugs.

The book is divided into 12 chapters, the first of which is entitled 'The effect of ageing on pharmacokinetics and pharmacodynamics'. This is rather too detailed and technical to be relevant to general practice, but some of the information which is set out in tables could be used as a quick reference. The second chapter entitled 'Practical problems' deals with the topical subjects of polypharmacy, self-medication and compliance in the elderly. It includes several histograms, one of which shows that changing the number of drugs from one per day to four per day increases the patient error in taking their medication from less than 10 per cent to more than 50 per cent.

The final chapter, entitled 'Terminal care and long-term care', describes among other things the management of the physical problems of pain and constipation, and the psychological problems of anxiety and depression which occur in terminal illness. It deals with the relationship between these two aspects — the relevance of anxiety reducing the pain threshold. It also touches briefly on the moral dilemma of whether to treat bronchopneumonia developing in terminal illness.

The remaining seven chapters describe the management of other disorders, including metabolic and nutritional disorders and mental disorders. These chapters can be used for reference in a similar way to the British National Formulary and at times these chapters do duplicate some of the information there. However, they focus on the drugs most commonly used in treatment of the elderly, and highlight the ways in which the elderly respond to these drugs.

In summary, this book is well laid out, with clear subheadings, good use of tables and diagrams and a comprehensive index. I have described in more detail the chapters I found most useful and I would recommend these to doctors who have recently entered general practice and to trainee general practitioners. I think that this book makes a useful addition to a general practice library.

J.D.

*Oral morphine in advanced cancer* is a booklet which aims to provide a short guide to the effective use of oral morphine in the management of pain in far-advanced cancer. It is written in question and answer style and 64 question headings are packed into its 34 pages. A short index helps the hurried clinician to find the relevant problem.

The authors are well-known experts in the field of terminal care and this booklet is written in a clear and authoritative style. The authors have avoided giving the impression that morphine is a panacea by prefacing the book with details of a broad

approach to the care of the dying and closing it with an explanation of the concept of total pain. Their objective 'to help the physician or nurse to utilize a well-tried treatment more effectively' is achieved.

N.C.H.S.

*Atlas of mortality from selected diseases in England and Wales 1968–1978* is the book to consult for a comparison of disease in different areas and to check theories about possible factors influencing the distribution of disease. It is a companion volume to the *Atlas of cancer mortality in England and Wales 1968–1978* which was published in 1983. The most important causes of death are shown on a local authority area basis, separately for men and women. The small area basis used for the analysis must have involved a great deal of work for the authors but the result is a fascinating and colourful mixture of epidemiology and cartography which should be of interest to people from many walks of life.

General practice research has some of its early roots in clinical epidemiology and so many readers of the *Journal* will enjoy the stimulus provided by this new book.

N.C.H.S.

*Principles of practice management* is an international book prepared by the editors on behalf of the World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (WONCA), with contributors from six countries. However, Australian and British authors feature most strongly.

The lay-out of the book is familiar and comprehensive: access to care; the health team; relations with specialists; emergencies; promoting health; principles of management in patient care; patient education; medical records; group practice management; facilities and equipment; applied research in general family practice; the general family practice as a teaching and learning environment; and practising primary care in developing nations.

The first three topics dealt with roles, relationships and principles and this is followed by a concise summary of the equipment and skills required for most primary care emergencies. The longest chapter in the book deals with promoting health and was written by a team of Australian general practitioners and community physicians led by Robert Hall. They cover the full range of possible activities, from individual to collective, from cradle to grave and from motivation to legislation. This 50 page chapter is a mixture of anecdote and evidence, checklists and principles — all of these are of great interest to the reader because they embrace many of the principles emerging from research work in Europe and America.

There follows a series of brief chapters which provide structured check lists for: management in obstetrics, contraception, child screening, common emergencies, adult screening, diabetes, hypertension, counselling, prescribing, education aids, medical records, office management and office equipment. Finally, there are short chapters on applied research (Levenstein), teaching and learning (Fabb) and the problems of a developing nation (Rajakumar).

Like all books by several authors, this one varies enormously in content and style but the editors have achieved their aim of demonstrating common problems and needs within different systems of health care. Awareness of the importance of primary health care is increasing rapidly and so the next book to emerge from a WONCA gathering would be expected to include an international perspective from each author rather than multiple national viewpoints.

N.C.H.S.