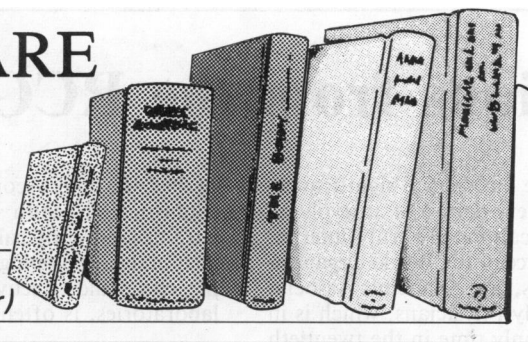


# PRIMARY CARE BOOK SHELF

NIGEL STOTT (Reviews Editor)



M.L. BURR  
A.S. PARSONS

## DIETARY FIBRE, FIBRE-DEPLETED FOODS AND DISEASE

Hugh Trowell, Denis Burkitt and Kenneth Heaton (Eds)  
Academic Press, London (1985)  
433 pages

## MISHAP OR MALPRACTICE?

Clifford Hawkins  
Blackwell Scientific Publications, Oxford (1985)  
316 pages. Price £8.50

## MRCGP PRACTICE EXAMS

John E. Sandars (Ed)  
Pastest Service, Hemel Hempstead (1985)  
122 pages. Price £7.95

Nowadays everybody believes that dietary fibre is good for you. Many of the diseases which characterize Western society are now attributed to a lack of dietary fibre. The progress of this idea during the last 15 years is one of the most fascinating stories of modern medical science, and is the theme of *Dietary fibre, fibre-depleted foods and disease*.

The editors have made outstanding contributions in this field and are thus well-placed to review the evidence. The first chapter gives a personal account by Hugh Trowell of the early development of the hypothesis that fibre is good for you. It is surprising to find no mention of Rendle Short's 1920 paper which attributed appendicitis to a lack of dietary cellulose on the basis of a wealth of epidemiological evidence. Chapter two describes the changes in the definition of fibre and contains a slightly eccentric discussion of what foods should be termed fibre-depleted; the authors make clear their disapproval of such foodstuffs.

Subsequent chapters deal with the biochemistry and physiology of dietary fibre, and the probable effects of a low intake. Many of the contributors are well-known for their work on this subject, and they provide a comprehensive review of current knowledge. The clinical and epidemiological evidence relating dietary fibre (or the lack of it) to various diseases is presented in detail and these contributions are of a high scientific standard. The book is a valuable source of information and a guide to the substantial body of literature that now exists on this topic.

Anyone who wants to persuade people of the value of fibre will find plenty of material here. Inevitably there is occasional evidence of the writers' bias but it is reassuring to find, towards the end of the book, the coda, 'One need not ... insist on the elimination of refined foods in general, and white bread in particular, as was once demanded in the heat of controversy. The unique, mouthwatering aroma and taste of freshly baked crusty white bread will surely continue to delight the senses of the fortunate.'

M.L.B.

Do not be put off by the sensational cover of *Mishap or malpractice* which has been published to celebrate the centenary of the Medical Defence Union. This is a well written and concise col-

lection of relevant and often thought provoking information.

The book highlights many of the pitfalls of practising medicine and the ways in which these have been dealt with in the past and are dealt with now. The first three chapters deal with the development of the medical defence bodies in response, initially, to the growing quackery of the nineteenth century and then to the growth of complaints against doctors in the latter decades of this century.

The chapters 'Hazards' and 'Perennial pitfalls' are as sobering as the annual report of the Medical Defence Union itself as they are illustrated by cases which could easily be the experience of every practising doctor.

The following chapter gives a clear explanation of the ways in which a complaint can be dealt with. There is also sound advice on how to survive an appearance in court as witness or defendant and a clear explanation of relevant law in language which is understandable to those unfamiliar with legal terms.

The chapters 'Consent' and 'Confidentiality' help to clarify these sometimes ill-understood and hazardous areas. Illustrative cases and incidents are again used to good effect.

Unfortunately the final judgement of the Gillick case had not been given before the book was published. This is acknowledged in the text and of course alters the advice given in this area of medical practice.

The situation in the USA and other countries is dealt with and provides a disturbing insight into what the future may hold in the UK. No fault compensation is discussed and this again is an unattractive prospect.

The final chapter looks at the many influences which might encourage or stimulate the patient to complain and it discusses how to avoid or defuse such situations.

Some readers may feel that some subjects are dealt with too briefly but each chapter is well referenced and there are also useful appendices. My overall impression was of an interesting, readable book which would be useful to all doctors not well-versed in the legal aspects of medicine. Indeed reading this book could well prevent the fresh faced houseman and the street-wise consultant or principal in general practice from falling into *Mishap or malpractice*.

A.S.P.

*MRCGP practice exams* appears at an appropriate time for trainers and trainees. The Pastest series of books is a well established service to postgraduate medical education and this book provides essential tips for every MRCGP candidate. It also gives two complete multiple choice question practice examinations and two modified essay question papers with marking schedules; two practice topic question papers, samples and marking schedules; an oral examination; log diary aids; a revision index and recommended book list.

Every teaching practice should be using this book with each new set of trainees, not as a 'read this my boy' book but as an in-house evaluation of progress and technique which involves teacher and learner in the exercises.

N.C.H.S.