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THE OXFORD COMPANION TO MEDICINE

Volume 1 A-M. Volume II N-Z

John Walton, Paul B. Beeson and Ronald Bodley Scott (Eds) Oxford University Press (1986) Volume I 812 pages. Volume II 1524 pages Price £55.00 set of two volumes

PRESENTATIONS IN PRIMARY CARE

An illustrated introduction to patient management in general practice

J.D.E. Knox Butterworths, London (1985) 132 pages.

OBSTETRICS IN OUTLINE

Michael D. Read and Stuart Mellor John Wiley, Chichester (1985) 256 pages. Price £8.95

MODIFIED ESSAY QUESTIONS FOR THE MRCGP EXAMINATION

T.S. Murray (Ed) Blackwell Scientific Publications, Oxford (1986) 192 pages. Price £8.50

LEADERSHIP FOR PRIMARY HEALTH CARE

Levels, functions and requirements based on 12 case studies. Public health papers no. 82

Daniel Flahault and Milton I. Roemer World Health Organization, Geneva (1986) 72 pages. Price Sw.fr.8.-

PRIMARY HEALTH CARE 2000: GLOBAL CHALLENGES

John Fry and John Hasler (Eds) Churchill Livingstone, Edinburgh (1986) 383 pages. Price £25.00

The Oxford companion to medicine is a two volume book of encyclopaedic content. It includes major essays of varying length on important topics affecting the practice of medicine in the broadest sense. Coverage is not as comprehensive as a dictionary but each contribution is written in as much depth as can be achieved in up to 10 000 words. The editors hope that any student or practitioner of medicine wishing to learn more about the role and responsibility of another speciality will find the essays useful. To achieve this goal each contributor was asked to discuss the historical development of his/her subject and its major importance in the present day. Shorter definitions of many terms and useful short biographies of historically famous medical men, paramedical scientists and nurses are also included.

The eight-page section on general medical practice is an essay by John Horder in which he describes the origins of 'general practice', its transatlantic cousin 'family practice' and its modern, more broadly based adopted child 'primary health care'. The work of the modern health centre is described, as is the emergence of the Royal College of General Practitioners, the American Academy of Family Physicians and the political events surrounding the rapid growth of our discipline. In contrast with the essays on other specialties academic milestones in primary health care are barely mentioned. It is to be hoped that this puzzling omission will be corrected in the next edition as the last decade has highlighted the relevance of both scientists and clinicians to academic progress in primary health care. The editors may well be partly responsible for this omission because elsewhere in the book they define 'professorial units in the various clinical disciplines' as 'units staffed in whole or in part by doctors, scientists, technicians and (very occasionally) nurses employed by a university, as well as staff employed by the hospital, of whom one or more is of professorial rank'. Thus departments of nursing, departments of general practice and other professorial units which function outside the hospital are not yet recognized.

These two volumes are beautifully produced and the editors are well aware of the impossibility of pleasing every reader. I will use and recommend these books to my library as important reference works. Subsequent editions should go from strength to strength.

N.C.H.S.

Presentations in primary care, An illustrated introduction to patient management in general practice is a book for the new trainee who has been recently liberated from the specialist hospital, and for the trainer who wishes to widen his supply of teaching aids.

Professor Knox succeeds in giving a well-balanced appetizer to general practice ranging from thorny clinical problems and health care delivery to personnel management and assessment of patients' allegations.

The book is in three sections. The first gives 36 presentations, many with colour photographs, followed by a series of questions which are answered at length in the second section. The third section consists of two short appendices on teaching in general practice.

The final section will be of particular interest to trainers while the book as a whole provides an introduction to the principles of modified essay questions for MRCGP candidates. This is a useful little volume.

E.B.S.

Obstetrics in outline is a paperback book of some 250 pages written jointly by a senior registrar and a consultant obstetrician from Manchester. It is aimed primarily at the young senior house officer about to commence his/her first hospital appointment in obstetrics. For doctors in this position, whether would-be obstetricians or trainee general practitioners, this book will be useful. Rather than having to refer to large tomes, the information that is needed to do the job is easily accessible and simply laid out with useful schematic diagrams. There is also highly practical advice on the day-to-day routines of the obstetric unit.

The authors say that 'the obstetricians aim is for 100% hospital deliveries'. Certainly this book is hospital oriented, even down to advice as to when the consultant should be informed of events. As for general practitioners, those actively involved with intrapartum care will find the book a useful refresher of both hospital procedures and recent developments, even if they prefer 'natural' methods. Indeed the book could also act as a refresher for general practitioners providing shared antenatal care, but it has to be said that a good deal of the contents would be surplus to their needs, and they would find nothing encouraging in this book.

W.J.

Modified essay questions for the MRCGP examination consists of a series of 20 modified essay questions of varying lengths, produced by a team of experienced examiners with the recommended time limit given at the beginning of each case. The questions are then repeated together with answers and a suggested marking schedule. The editor is right to point out that the marking schedules are different from those used in the examination itself and that problem-solving ability, decision-making skills and attitudes can all be tested with a modified essay question.

What are the uses of the book? Obviously it may be used by potential candidates as an aid to learning technique, but it should also prove useful in both undergraduate and postgraduate teaching. Individual trainers can use selected questions for assessment of trainees and developing a system of tutorials. Course organizers and undergraduate teachers already find modified essay questions suitable for work with small groups. There have been suggestions that successful completion of a modified essay question could be a prerequisite for completion of vocational training.

A drawback of the format used in the book is that several questions are presented per page and this makes it too easy to read several questions at once, thus compromising the chronological sequence which is an essential component of the modified essay question.

G.F.M.

Leadership for primary health care is published to complement two previous World Health Organization publications: one on training primary health care workers and the other on middlelevel management in primary health care. A yawning gap exists between theory and reality in the concepts of 'community health workers' and 'teamwork' and this new text suggests that this is caused by deficiencies in higher-level leadership.

Twelve case studies on primary health care leadership are presented from a wide range of countries. France and Finland make the only European contributions and the rest come mainly from less developed nations. The authors of each section are drawn chiefly from departments of public health, social medicine

or epidemiology and so the book dwells largely on the organization of services and the personal qualities of leaders rather than providing insight into the modern principles or primary health care.

Planners are regarded as having 'breadth' and there is no serious discussion about the training required to provide breadth at the front lines of care. Instead a diverse series of programmes are described which cobble together different hierarchies and use conventionally trained doctors/nurses/aides/community health workers for the leg work. The lower down the hierarchy the worker the lower the reward. Thus there is little new financial, organizational or functional material in this book.

However, considering the tactical tight rope walked by all World Health Organization authors it is remarkable that so many paradoxical concepts are presented in the different case studies. These paradoxes point to one of the most exciting and important aspects of modern primary health care: it does not fit into conventional vertical or hierarchial thinking and new styles of leadership are needed. The authors do not make this point explicitly but the case studies they publish reveal this to the serious reader.

Is the book important in the UK? To the average general practitioner, perhaps not. To the serious academic or student of our rapidly evolving discipline, yes. But the text must be read carefully and all summarized statements avoided in order to see the relevance of these 12 case studies.

N.C.H.S.

Primary health care 2000: global challenges, published to coincide with the WONCA conference in London in 1986, is a difficult book to review. Most books begin with an introduction indicating what the book is attempting to do. This book is different, it begins with an explanation of the difference between 'health care' and 'medical care', followed by the Alma-Ata declaration of 1978 on primary health care and this in turn is followed by a list of the contributors and the contents page.

The book is divided into three sections. The first contains chapters written mostly by fellows of the Royal College of General Practitioners on issues such as prevention, needs and collaboration. The second section contains chapters written by doctors about primary health problems in their own countries and the third section consists of the editors' assessment of these problems and suggestions about how the world should seek to achieve the aims of the Alma-Ata declaration.

I enjoyed reading each of the chapters in the first section and I learnt something new from each author. The chapters varied from the over-illustrated superb chapter by David Morley 'Looking ahead to a child survival revolution' to the well-rehearsed chapter on participation by Peter Pritchard and from the contribution by John Fry on economics, politics and society to the historical background to the Alma-Ata conference and the World Health Organization by Sir John Reid.

The second section of the book was, for me, the most interesting. The absence of reports from India and most of South America was a pity but each contributor attempted to describe the present primary health situation in his country and to look to the future. The book provides a good overview of the current relationship between primary and secondary health services in various countries together with an indication of the tensions that exist between these two areas of medicine.

M.J.W.