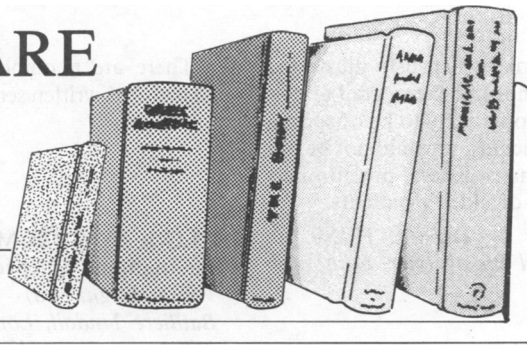


# PRIMARY CARE BOOK SHELF



**A GREAT AND GROWING EVIL**  
**The medical consequences of alcohol abuse**  
*The Royal College of Physicians*  
*Tavistock, London (1987)*  
*125 pages. Price £6.95*

This well-referenced report is probably aimed at medical and paramedical workers but could be useful to anyone who requires a readable and accurate account of the physical consequences of alcohol abuse. However, this is not the report to consult about the recognition or management of alcohol problems in general practice. Only a brief account of the management of the alcohol problem itself is given and there is no information about the treatment of the associated physical disorders.

There is a good chapter on occupation and the importance of comprehensive work policies banning alcohol. However, in the chapter on medical responsibilities there is no mention of the comprehensive work policy being applied to hospitals and medical schools where at present alcohol is often freely available. Surely doctors should abstain from alcohol before consulting and operating?

This report is to be welcomed because it complements those of our own College and the Royal College of Psychiatrists and emphasizes the common themes of prevention, the importance of the national consumption being lowered, the Blennerhassett recommendations, sensible drinking limits, the importance of early detection and hence the importance of taking drinking histories routinely, the need for funding for research and lastly the importance of the primary care team. General practitioners and trainees will use this report to update their knowledge of the strictly medical aspects of alcohol abuse.

PETER TOMSON  
*General Practitioner, Abbots Langley, Hertfordshire*

## **PRIMARY CARE OF THE ELDERLY: A PRACTICAL APPROACH**

*J. Williamson, R.G. Smith and L.E. Burley*  
*Wright, Bristol (1987)*  
*193 pages. Price £14.95*

A book on primary care of the elderly by these authors is very welcome. Although not primary care physicians themselves, they have contributed extensively to such care, and I looked forward to reading the book. However, by the end, I felt that it had not quite come up to expectations and I wondered why.

The first reason is that it is too much oriented towards geriatric medicine. This is an old problem when writing a book concerned with the community care of old people; it is very hard not to retain the pathological model. Similarly, I was concerned about the illustrative cases, most of which describe situations where a geriatrician had been consulted and the patient subsequently admitted to hospital. Surely it is in situations where the geriatrician is not called in, and the general practitioner has to confront the problem himself, that guidance is needed?

I was sorry that there was no mention of anticipatory care, which provides the general practitioner with a practical and sen-

sible approach not only to preventive activities but also health educational initiatives for his patients. Perhaps a section on the inter-relationship between health and social problems might have been helpful with emphasis on the close linkages between activities of daily living and health problems.

E. IDRIS WILLIAMS  
*Head of Department of General Practice,*  
*University of Nottingham*

## **STROKE**

**A self-help manual for stroke sufferers and their relatives**  
*R.M. Youngson*  
*David and Charles, London (1987)*  
*143 pages. Price £5.95*

As this attractively presented book is designed to help people who have been affected by strokes, I gave it to a patient who suffered a stroke two years ago. He found the book gave him valuable insights into his past problems and those which he continues to face, especially the psychological adjustment to his disability. For example it was helpful for him to know that feelings of depression and rapid mood swings are common in people who have had strokes.

He is a well-educated man but nevertheless found the medical terminology in the book difficult to digest and sometimes confusing. Sketches of the body would have been useful for indicating the particular parts referred to in the text. In spite of this criticism, this is an excellent book which can be recommended to patients who have suffered strokes and who would like to know more about their condition and how to rehabilitate themselves. It can also be recommended to the growing number of volunteers who seek to help stroke patients through agencies such as the Chest, Heart and Stroke Association.

E. GRAHAM BUCKLEY  
*Editor of the Journal*

## **SKIN DISEASE IN OLD AGE**

*Ronald Marks*  
*Martin Dunitz Ltd, London (1987)*  
*276 pages. Price £30.00*

The numbers of very old people in the population are slowly increasing and more and more of our medical resources are being directed towards them. The process of growing old affects people in different ways and it is only relatively recently that dermatologists have become more interested in the study of ageing skin. *Skin disease in old age* comes from the prolific pen of Professor Marks. The first two chapters set the scene, one describing the structure and function of the aged skin, and the other the effects of environmental hazards. The damaging effects of the ultraviolet part of the sun's rays are described and this is backed by histological evidence showing degenerative changes in the dermis after such exposure. The ways in which elderly people are affected by both the common and the rarer skin diseases are described and the differences in management dealt with in detail.