

cardiovascular ageing, epidemiology, treatment and management, social environment and preventive considerations. The main core is concerned with treatment and management.

Intended for physicians providing primary care the book is hard to recommend to general practitioners in the UK. For instance, the main treatment for heart failure in old age is given as digoxin, whereas in the UK it is usual to consider loop and thiazide diuretics first. We are told that the combination of a diuretic and a potassium saving diuretic makes it unnecessary to continue with a potassium chloride supplement, when we should really be warned that it would be dangerous to do so. Beta-adrenoceptor blockers, rather than thiazide diuretics, are considered the first choice in the treatment of hypertension. The danger of hypotension, perhaps the most important state to be detected by blood pressure apparatus, is not mentioned.

Of course there is much that is worthy in this book, although clear English is not always used, for example 'Typical cardiac oedema at any age follows gravity around the ankles when the patient is walking ...' I appreciated the way basic information is included in normal print, while advanced information is given in small print. Nevertheless, although contributions were refereed by an international board of reviewers, the claim that eclecticism has advantages over academic selectivity cannot be sustained.

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#### STRATEGIC PLANNING IN THE HEALTH SECTOR

Tom Rathwell  
*Croom Helm, London (1987)*  
179 pages. Price £19.95

In some ways this book is a strange choice for review in a general practice journal since the ethos of strategic planning represents the complete opposite of the expediency required in primary care. Although general practice is moving away from merely reacting to events, we retain a pride in our capacity to cope with the unpredictable as well as a deep-seated scepticism about the extent to which it is possible to plan.

Clearly, Tom Rathwell is not wholly a sceptic, despite having first-hand experience of the gulf between the promise of planning in the National Health Service and the frequent failure to deliver the goods. Undaunted, he describes why many models fail to reflect the reality of planning in the health care sector and, more ominously, the extent to which planning is a private game between vested interests and those bent on change, with the customers largely forgotten.

Planning is about control and the exercise of power. In the NHS planning suffers not only from internal power games but also from the exigencies of the prevailing political climate. In the final analysis it should be about needs and resources. As Tom Rathwell shows, the need for health care is not being systematically determined and available resources are tied up in maintaining the status quo. Breaking out of this maze is the task of strategic planning. While realistic about the attendant difficulties, this book supports the notion that the task can only be achieved with effective public participation in the planning process.

Sadly, few general practitioners will want to read this book. Those who do will learn a great deal about the theory and practice of planning in the NHS. I recommend it to anyone involved in the work of health authorities at district or unit level.

At a time when there is widespread and often strident criticism of the separation of general practice from the mainstream of NHS administration, this book prompts a final question: would

primary medical care services be damaged by their incorporation into a planning process which at present is so demonstrably flawed?

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#### PEOPLE WITH MENTAL HANDICAP

*Perspectives on intellectual disability*  
J. Hattersley, G.P. Hosking, D. Morrow and M. Myers  
*Faber and Faber, London (1987)*  
246 pages. Price £5.95

The government policy document *Better services for the mentally handicapped*, published in 1971, set the scene for a greater proportion of the mentally handicapped to be looked after in the community. *People with mental handicap* affirms that it is in the home environment that the handicapped have the greatest potential for personal development.

This book is written for parents, teachers, therapists, nurses and other professionals who serve and support those with learning difficulties. Teams of professional workers assess the needs and decide on the detailed management of the mentally handicapped — local health authority medical officers and consultant psychiatrists with a special interest in mental handicap are most often concerned. The general practitioner is only involved when the patient is ill and when it is necessary to support parents and other members of the family. There is much in this book to help him. Parents, on learning that a child is handicapped, may need to mourn and professional help may be necessary if later rejection of the child is to be avoided. Education, employment, sexuality, personal relationships and ageing of the mentally handicapped are dealt with and many of their problems are seen as social and educational rather than medical and as better dealt with in the community than in a residential medical institution.

The authors argue that care for the mentally handicapped in the community may require greater financial resources than care in institutions. Will these be forthcoming?

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#### JUST A WORD, DOCTOR

*A light-hearted guide to medical terms*  
Bernard J. Freedman  
*Oxford University Press (1987)*  
131 pages. Price £4.95

Words are capricious things which lead lives of their own apparently independent of the meanings originally given to them. This book is a compilation of short articles from the *British Medical Journal* about the meanings and origins of medical terms. The derivation of some of the words we commonly use in medicine is surprising and Dr Freedman's witty descriptions of how we use words makes this a very entertaining book which gives new insights into the history of medicine.

There is a fascinating account of the use of the term Caucasian to denote white Europeans, most of whom come from nowhere near the Caucasus mountains. There are discussions about flatulence and wind, fingers and digits, cocks and taps, euphemisms for killing, expressions of pain in different languages and the origins of terms such as blue blood, infarct, cataract, forceps and parotid and carotid.

An ideal Christmas present for a medical colleague.

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*Editor of the Journal*