THE HEALERS. A HISTORY OF MEDICINE IN SCOTLAND
David Hamilton
Canongate, Edinburgh (paperback edition, 1987)
318 pages. Price £5.95

David Hamilton is a transplant surgeon and, in his other role as medical historian, the Director of the Wellcome Unit for the History of Medicine at Glasgow. Much of his recent historical work has been concerned with the history of transplant surgery, but his first major contribution to the history of medicine was this book, originally published in 1981 and now available in a paperback edition.

Hamilton covers a very wide period from the ‘dark ages’ to the twentieth century, but the greatest strength of the book is in chapters four to six which deal with the eighteenth and nineteenth centuries. Until the mid-nineteenth century, Scottish medicine was supreme and medical education in the only two English universities of Oxford and Cambridge was moribund. Edinburgh and Glasgow (but not St Andrew’s and Aberdeen from both of which you could buy a degree through the post) provided a broad and excellent medical education. The roots of this excellence were at Leyden in the Netherlands, where the emphasis was on bedside clinical instruction. This stood in stark contrast to the reliance on ancient authorities which characterized such English medical education as existed. It was the teaching and lively excitement of Scottish medicine which attracted the cream of medical students to Scotland; and the production of graduates and original research was phenomenal. Students flocked to Scotland from England, North America and Europe. The number who obtained a formal qualification such as the Edinburgh MD is impressive enough: between 1750 and 1850 Oxford and Cambridge produced just over 500 medical graduates while Scotland produced over 11 000. And an unknown number, possibly as many as those who graduated, visited the Scottish medical schools for periods of a few months to a year, attended lectures and demonstrations, and then returned to their practices, but without any formal qualification.

In England it was the growth of the London and provincial university medical schools from the mid-nineteenth century which finally challenged the pre-eminent position of Edinburgh and Glasgow. Only later did Oxbridge medicine achieve a respectable level. All this and much more about Scottish medicine is told very well indeed in this excellent account, which cannot fail to interest practitioners and others who have an interest in the history of medicine. This new paperback edition deserves to be a great success.

IRVINE LOUDON
Research Associate, Wellcome Unit for the History of Medicine,
University of Oxford

RHEUMATOLOGY FOR GENERAL PRACTITIONERS
H.L.F. Currey and Sally Hull
Oxford University Press (1987)
259 pages. Price £15.00

This excellent blend of the experience of a consultant and a general practitioner on the teaching staff of the London Hospital adequately covers the whole field of rheumatology as seen in general practice. Emphasis is placed on continuity of care by one doctor and there are many helpful figures, tables and case histories.

Unfortunately, Sally Hull has a relatively short experience of handling these conditions as they present in her general practice and the book is therefore biased towards hospital orientated treatment. For example, the acute flare-up of an arthritic knee usually settles rapidly with strict rest and pain relief: intra-articular steroids are rarely necessary. Uninfected olecranon bursitis usually settles when strictly rested — if this fails, simple aspiration is all that is needed. Severe acute capsuleitis usually responds to rest in less than 18 months: anti-inflammatory drugs may help and if these fail it responds rapidly to systemic steroids.

The book also fails to mention that manipulation is used successfully by many general practitioners. All doctors should teach quadriceps drill personally: static contractions, straight-leg raising and active contractions against resistance soon give measurable results if performed several times daily.

Despite these criticisms this up-to-date book will make a valuable addition to every group practice library.

DENIS CRADDOCK
General Practitioner, Croydon

PSYCHIATRIC EMERGENCIES IN FAMILY PRACTICE
John D. Pollitt (Ed)
MTP Press, Lancaster (1987)
234 pages. Price £19.95

My mistake on receiving this book was to read it chapter by chapter. Where were the emergencies? Buried among the background information on psychiatric disorders.

The book aims to provide a quick reference for the general practitioner responding to a psychiatric emergency and it is helpful to find the chapters based on presenting problems rather than diagnosis. However, ‘emergency’ is not defined, and perspectives on that differ.

Often it is the time, place and effect on others of a person’s disordered behaviour, as much as the nature of that behaviour, which constitutes the emergency and causes greatest difficulty in general practice: for example, the Friday afternoon call from a neighbour about the elderly lady who has wandered off in her nightie and for whom ‘something must be done, Doctor’; or the
bank holiday visit from the estranged husband threatening to kill himself if his wife will not let him return. Psychiatric assessments are time consuming and the general practitioner may have several other urgent calls to make. Advice on coping with such problems might have been more forthcoming had the authors included more primary health care workers.

The book fails because it describes the acute psychiatric condition without setting it in the context which makes it an emergency.

ANGELA DOUGLAS
General Practitioner, Woodbury, Devon

ENTRAPMENT IN ROAD TRAFFIC ACCIDENTS
BASICS monographs on immediate care no. 5
Christopher J. Carney
British Association for Immediate Care, Ipswich (1987)
20 pages. Price £1.75

This interesting and informative short pamphlet deals with the management of patients who are trapped in road traffic accidents and is part of a series providing information on all aspects of immediate care. Although principally written for those doctors providing care at the site of accidents, I believe that the pamphlet is of relevance to us all.

The pamphlet contains good commonsense reminders about initial resuscitation and the importance of early observers, who act as the eyes and ears of the accident and emergency department. It gives helpful suggestions about the physical signs of the wreckage at the accident, and implications for the nature of the injuries sustained. The importance of regular formal contact between doctors providing immediate care and the emergency service is underlined, and there must be few of us who have not had difficulties in coordinating or communicating with the other services at the site of an accident.

I think the booklet is of value in pointing out some of the practical difficulties that may arise at the scene of an accident and how to manage them, but in reviewing this small part, I cannot help feeling that it would have been of greater value if the series had been published together in a larger book.

T.A.A. REILLY
Senior Lecturer and Associate Adviser in General Practice,
University of Wales College of Medicine

HELPING THE PROBLEM DRINKER
New initiatives in community care
Tim Stockwell and Sue Clement (Eds)
Croom Helm, London (1987)
298 pages. Price £22.50

There has been a revolution in the way in which we understand the nature of alcohol-related problems. We have progressed beyond the idea of two populations of drinkers — a large group of 'harm-free' social drinkers, and a minority group of 'pathological drinkers', or 'alcoholics'. It is now clear that there exists a great variation both in terms of harm and of the social circumstances in which problems arise. The book describes well, there exists a common pattern of drinking and harm ranging from little drinking with little harm to very heavy drinking with substantial harm.

Alongside this new understanding an upsurge of interest in developing community-based responses has taken place. Help-

ing the problem drinker reviews the development of these responses. It ranges from a discussion of prevention of alcohol-related problems at the local level (it is a shame that this chapter came at the end, rather than the beginning) through papers on experiments in early intervention to supporting community agents and the provision of specialist alcohol services within the community. There are two chapters on intervention in general practice. One, written by myself, provides a practical guide to intervention in general practice and the other a description of the DRAMS scheme in Scotland and its use by general practitioners. However, for the most part this book is not a practical guide but a discussion of the issues.

Although I can be seen as having a personal interest in promoting this book, nevertheless it is the only review on the development of community services. It is up-to-date, comprehensive and well written and edited. The book should be read not only by planners and researchers but by those who are participants or would-be participants, including general practitioners, of this revolution.

PETER ANDERSON
General Practitioner and Senior Registrar in
Community Medicine, Oxford

ONE BODY
A healing ministry in your church
David Aldridge
SPCK, London (1987)
107 pages. Price £4.95

This short and easy to read book is written mainly for church leaders who wish to start a healing ministry in their church. In many religious circles healing by faith and prayer is undergoing a revival, usually with beneficial results. However, occasionally nothing apparently happens and the patient is left confused and angry as a result of inexperienced counsellors. The author has a background of social work and counselling with the Samaritans and so the book is well balanced and sensible, encouraging Christians to seek healing spiritually and emotionally while working in cooperation with the medical profession.

As the author has wide practical experience the book is full of helpful case histories and insights. It is not a theological treatise on healing but rather a practical manual for the layperson. One particular gem is the chapter on meditation which takes the reader step by step through a process of meditation and inner healing. The book is worth buying for this chapter alone. I disagreed with some of the views expressed but that is only to be expected with a book concerning a contentious area. Although not directed towards the medical profession I would recommend this book to all those interested in Christian healing.

MIKE SHELTON
Senior Lecturer in General Practice,
University of Nottingham

A PRACTICAL APPROACH TO ASTHMA

Readers may have had difficulty obtaining copies of A practical approach to asthma by R. Pauwels and P.D. Snashall, published by CBA Publishing Services of Dorking, which was reviewed in the November Journal. The book is available, free of charge, from Mr Mark Webster, UK Marketing Department, Fisons Pharmaceuticals, 12 Derby Road, Loughborough LE11 0BB.