

galore. There is of course some resentment; the toilet inaccessible to a wheelchair is almost the leitmotiv of the autobiography. He describes in a very direct way, through such practical examples, the real meaning of the word 'handicapped'; something superimposed by society on a person with a disability.

In the forward, Dafydd Ellis Thomas, a member of parliament, and a friend of the author, thanks him for showing a lot of us how to live more normally. For me this was the important message from Alun Peredur Jones and I am grateful to him for sharing some of his life with me.

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#### CLINICAL DERMATOLOGY

*J A A Hunter, J A Savin and M V Dahl*  
*Blackwell, Oxford (1989)*  
*293 pages. Price £17.50*

In recent years considerable advances have been made in the anatomy, physiology and immunology of the skin and they are fundamental to the approach of this book, which provides a thoroughly modern look at dermatology. When the available knowledge about diseases allows, the authors group together those of like cause. Where this cannot be done, the basis of classification shifts to shared physiology, for example, disorders of keratinization, shared anatomy or shared microanatomy. Only as a final option do they use the old concept of grouping together diseases which look alike, as for example macular or papular rashes.

Nothing is better than seeing patients who have skin disease in the company of an expert, but some idea of the disciplined visual skill needed is conveyed in an introductory chapter which defines the terms commonly used in describing the appearance of lesions, both primary and secondary.

The layout of the book makes it a joy to read. There are two columns of text to a page, numerous diagrams and highlighted tables which provide useful summaries of aetiological factors, those diseases which can best be considered together and diagnostic features of some of the diseases being described in the text. These summary tables leave the text free for discussion of the more important items at length. A number of learning points for each chapter are set in a frame and these are clinical aphorisms based on the experience of the authors. At the back of the book details of topical and systemic medication are presented in tables printed on blue pages for rapid recognition. The colour photographs, though small, are numerous and excellent.

Two of the authors are from the Royal Infirmary, Edinburgh, and the third from the University of Minnesota. The contents

cater for both British and American readers.

I predict that this textbook will become the most popular in its field with general practitioners, although there may just possibly be too much detail for some medical students. Such an up to date account will satisfy doctors who find the detective work involved in dermatology interesting and will stimulate many who heretofore have found books on the subject merely confusing.

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#### NEUROLOGY

##### What shall I do?

*Dafydd Thomas and Bev Daily*  
*Butterworths, London (1989)*  
*115 pages. Price £6.95*

At our district hospital we have four full-time physicians. They have 'an interest' in the heart, the lungs, the gut and diabetes. Neurological disease accounts for the second largest number of deaths nationally, but a neurologist visits our district hospital only once a week. This creates the paradox whereby neurology seems both ubiquitous and remote. In this context general practitioners will welcome a small unpretentious guide to managing neurological problems written by a general practitioner and a neurologist.

Neurologists are sometimes pejoratively compared to pathologists; it is said they have little to offer in helping to solve clinical problems. Dr Thomas' commonsense approach dispels this false belief. His guidance is most useful when symptoms and patients' questions are linked to practical advice. It is less useful when he assumes that general practitioners can elicit neurological signs. Without special training in this skill, most non-neurologists lack the confidence to examine the central nervous system. This reluctance is reinforced by a belief that it is no use trying if you cannot remember any neuroanatomy. This is unfortunate; neurologists managed empirically, before the source of many clinical signs were known, and continue to do so.

As I trained in neurology I gave the book to my trainee to get a second view. He welcomed the easy to read style in which a general practitioner poses questions and a specialist replies. It seems that the publishers are producing a series using this format. My trainee and I used the topics in this book as triggers for a stimulating discussion. Well done Butterworths, Dafydd Thomas and Bev Daily.

LEONE RIDSDALE  
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