



## **RIGHTS AND RESPONSIBILITIES OF DOCTORS (second edition)**

*F Fisher and N-J MacDonald (eds)  
British Medical Journal, London (1992)  
226 pages. Price £10.95*

Scientific endeavour increases knowledge, apparent and real, continuously. Regulating the application of this knowledge is ever more necessary, particularly in the field of medicine. Clear definitions of the rights and responsibilities of doctors should be readily available to every practising doctor. The evolution of legal control of medical practice has been rapid, so this practical guide to certain aspects of the law as it affects doctors is an essential reference book. The editorial team welcome suggestions for future modifications. Updated editions will be frequently needed as only the latest advice is adequate. Indeed, in their keynote introduction, the authors advise that in certain areas, doctors should check for changes in the law since publication of this second edition.

*Rights and responsibilities of doctors* is a well laid out reference book which complements the General Medical Council's 'blue book' (which is more of a guide to the types of misconduct which can result in disciplinary proceedings). I found the material and advice to be clear, concise and realistic, though I found one possible ambiguity where a police surgeon is quoted as saying 'Relatives can be present at the examination of a person under 16 if they request it'. The children act, concentrating on the welfare of the child above all other considerations, renders this statement questionable in many circumstances. Perhaps this should read, 'if the child requests it'.

For such a dry subject, the book is curiously friendly. It is a basic essential, to be updated regularly, for every practice library.

JOHN CUMMINS

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and occupational health adviser*

## **THE DEPENDENT ELDERLY: AUTONOMY, JUSTICE AND QUALITY OF CARE**

*L Gormally (ed)  
Cambridge University Press (1992)  
202 pages. Price £24.95*

How often have ill, elderly people said to their doctor something like 'Isn't it a shame that doctors can't be like vets, and just put us down when we get past it?' The tone can be almost jokey, but the intent is serious, and the debate about euthanasia reflects the concerns and hopes of those who feel they have outlived themselves. This slim book of essays — which I found harder to read than anything else I have encountered in medicine — concentrates on the responses that we might make to these concerns, using the techniques of moral philosophy.

Largely a discussion of dependent elderly people, the book also touches on the morality of non-therapeutic embryo experimentation, of abortion, of neonatal euthanasia and of the care of those in a persistent vegetative state. The concluding themes are simple: there can be no subtypes of people, whose lives can be judged of 'no value' and therefore terminated. No matter how demented, how catastrophically cortically damaged, nor how embryonic the person, their right to justice and dignity forbid anything other than solidarity. The fact that elderly people might have made provision for others to bring about their own death, and have done so in clear consciousness and full awareness of the options, does not alter the absolute moral stance. Those who break the moral rule are corrupted by their newly acquired disposition to murder, and those who seek assistance to carry out such murder — the woman with the unwanted pregnancy, the family of the trauma victim in a persistent vegetative state or the individual accurately anticipating a slow and painful natural death — are failing in their obligation not to corrupt those around them.

The main authors argue that once philosophy is used to rationalize expedient behaviour then all roads point to the death camps. If euthanasia is permitted now for those who feel that their lives have lost value, the next step will be to impose it on those elderly people who are simply in the way of younger and more vigorous individuals.

I find this 'slippery slope' argument unconvincing, implying as it does that only one barrier stands between us and barbarism, and its practical implementation frightening. It is easy to insist on the sanctity of life, but harder to provide for that life adequately. The righteousness of moral philosophers weighs heavily on the lives of the less fortunate, few of whom seem to benefit from being denounced as corrupt or imperfect in honouring their obligations to others. Personally, I shall continue to take elderly people's weariness with life seriously and at face value, as a way of respecting their autonomy, promoting justice and — with a bit of luck — improving the quality of their care.

STEVE ILIFFE

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## **COUNSELLING AND THERAPY WITH REFUGEES**

**Psychological problems of victims of war, torture and repression**  
*G van der Veer  
John Wiley and Sons, Chichester (1992)  
275 pages. Price £29.95*

This book deals with the psychological and counselling issues encountered in refugees and victims of war, torture and repression. While the average general practitioner may not be involved with many of these cases, there is still much in this book which is of interest and value to the primary health care team.

Increasingly we are having to deal with refugees and others who, for one reason or another, leave their homes and culture in

order to settle in what to us is familiar territory, but to them is alien, foreign and fearful. *Counselling and therapy with refugees* offers many practical insights into the psychological problems produced by this sort of upheaval. For example, there are special sections in the book which deal with the problems among the children of refugees and the issue of sexual abuse.

Practical examples abound in the book. For example, in many cultures a person would never consider talking about his or her emotions outside the immediate family circle, so the general practitioner or counsellor is probably never likely to learn how the person really feels. In such cases the suggested solution is that a family member acts as an interpreter and becomes part of the counselling team, supervised by the doctor. The interpreter thus becomes a co-therapist with the doctor.

There is a useful section on the increased suicide risk in refugees. Refugees have often been in traumatic situations in their home country, then have had to escape and travel to a foreign country. At this stage their fears are increased because they often have to spend a long time waiting for their request for asylum to be processed. They feel helpless, in fear of being sent back to their own country, have no worthwhile work, are in a strange culture, and are therefore at high risk of suicide. There is a useful list of signs of increased suicide risk in such refugees.

This is a handy reference book, and could usefully be added to each practice library.

MICHAEL G SHELTON

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# **MINOR SURGERY: A TEXT AND ATLAS (second edition)**

J S Brown

Chapman and Hall, London (1992)

326 pages. Price £55.00

Many years before the new contract for general practitioners in 1990, minor surgery in general practice was practised by only a few enthusiasts. One of those was John Stuart Brown, who published many papers on his work. In 1986 the first edition of his work *Minor surgery: a text and atlas* appeared. It surpassed anything written before or since on the subject. Most importantly, it was written by a general practitioner. Having used the first edition myself for six years, I did not think it could be bettered.

However, the second edition is better. Changes have been made to reflect the increase in minor surgery in general practice with the new contract, including more on steroid injections into joints and soft tissues, cryotherapy and more techniques for treating ingrowing toenails. Also, a chapter on the medicolegal aspects of minor surgery has been added, with the help of Patrick Dando.

This is an excellent book with outstanding colour illustrations, and sound advice on all the procedures described. In addition, there are warnings on what not to do in the general practitioner's surgery, and what should be referred to a specialist surgeon. No practice library should be without this book, it is the 'bible' of minor surgery for the general practitioner.

DAVID WALL

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