

OXFORD TEXTBOOK OF MEDICINE: THIRD EDITION ON COMPACT DISC

D J Weatherall, J G G Ledinham, D A Warrell (Eds) Oxford University Press, 1996 ISBN 0192684310

The printed version of the *Oxford Textbook of Medicine (OTM)* has an honoured place in many practice libraries due to its wide coverage of the scientific basis and practice of general medicine, and its freedom from mid-atlantic style and terminology. My main problems with it have been the massively unwieldy index and the sheer labour of gathering information from different parts of the weighty tomes. Does the *OTM* on compact disc change all this?

It is now possible to search the entire text of the book for a word of phrase, search the table of contents, look up any index term or search the index, or find articles by a specified author. Figures and tables can be assessed, but more importantly copied, by clicking on buttons in the text. The ability afforded by the Windows interface to paste text (or graphics) directly to an ASCII text file or to the clipboard, dramatically improves access to the desired information. This alone justifies the purchase. The multiple choice questions module (MCQ) that accompanies the *OTM* contains 400 multiple choice questions related to the textbook and will be of use to those involved in teaching.

I have some minor 'gripes'. The absence of an 'I' cursor makes the selection of text more cumbersome than with Microsoft software such as Word. The icons on menu buttons are not very informative, though an explanatory 'help bubble' is displayed if the cursor is left over the button for a few seconds.

Most practices nowadays seem to have computers. How many that have CD-ROM facilities I do not know. If your practice has no such player I would urge you to buy one to take advantage of this new presentation of the *OTM* — particularly if you are involved with training.

ALASTAIR F WRIGHT

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A GENERAL PRACTITIONER'S GUIDE TO GENITOURINARY MEDICINE AND SEXUAL HEALTH

Chris Sonnex Cambridge University Press 1996 Price £14.95 (pbk) ISBN 0521556562

Where does the reading of medical text books fit into the busy general practitioner's (GP's) schedule? A quick poll of my partners (6 in all) revealed little free time for the reading of either fact or fiction, although one partner is often seen with a paperback on his desk and is thought to read the odd paragraph between (or during?) consultations. To be worth a read, according to my partners, the text is required to be relevant to every day clinical work, set out in an easily absorbable form, get quickly to the point and be helpful in the management of the sorts of recurrent, protracted problems that dog every GPs life. A general practitioner's guide to genitourinary medicine and sexual health by Chris Sonnex, is just that sort of text: 21 short chapters dealing with all aspects of genitourinary medicine. The format is straightforward and points are listed clearly, making the text easy to read and absorb. Each chapter stands alone, making it an ideal quick reference book. GPs will find the chapters on taking a sexual history and on contraception and genital tract infection particularly useful.

I would recommend this book not only to GPs but also to GP registrars, practice nurses, medical students and any other health professional concerned with this field — it is after all worth a read.

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STATISTICS AT SQUARE ONE

T D V Swinscow (revised by M J Campbell) BMJ Publishing Group 1996 (Ninth edition) ISBN 0727909169

Throughout my career as a medical statistician I have been suggesting to trainee clinicians that there might be better books on elementary medical statistics than *Statistics at Square One*. Despite this, the original version appears to have been very popular, presumably because it was so slim and because it was published by the BMJ.

It was essentially a series of recipes for carrying out statistical tests, with very little discussion of why one might be interested in the tests in the first place. Michael Campbell's revision has produced a text that is far better than the one written by Swinscow, but I suspect that it will be less popular because it is now considerably longer. There are 13 chapters covering, for example, data display and summary, differences between populations and samples, significance testing and confidence interval estimation and, finally, study design. Even in the revised version, study design is the last topic to be discussed. But I suppose this is a fair reflection of most clinical research in practice!

In conclusion, I would recommend this text as a convenient summary of the basic statistical methods used in medical research, but I still think that there are better texts on the market. Michael Campbells' other elementary statistics textbook¹ is a good example.

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Reference

 MJ Campbell & D Machin. Medical Statistics: A Commonsense Approach (2nd Edn). Chichester & New York: John Wiley & Sons, 1993.

GETTING TO MEDICAL SCHOOL

Joe Ruston Trotman & Co. 1996 (2nd edition) 98 pages, £6.95 (pbk) ISBN 0856602965

Politics and economics are as much to do with medicine as disease. The 1990 NHS Reforms, to relieve pressure on funds by removing inefficiencies, have also resulted in the amalgamation of London Medical Schools. Bart's and the London have merged. Charing Cross merged with the Westminster and will further merge with St Mary's in 1998. University College merged with the Middlesex and the Royal Free will join them soon.

As the number of medical schools has reduced and the selectors have become more choosy, it has resulted in increased competition for limited places. Moreover, the number of applicants is still increasing in 1991, there were 8800 applicants, and in 1995 the numbers have risen to 11600. Under these circumstances, this concise, authentic and readable book is a timely publication.

Joe Ruston has given informed advice to would-be doctors on three major activities: getting an interview, getting a conditional offer at medical school and getting the right A-levels grades. When an application is received, the selector scans through the candidate's academic achievements and other interests such as commitment to the community. The referee support is also evaluated.

In addition, the author also touches on the questions:

- What to do if you have good grades but no offer
- What to do if you hold an offer but your grades are disappointing
- How to structure the interview to your advantage.

After a list of questions for a mock interview, the author suggests what a selector should look for. For example, did the candidate answer in a positive, open and friendly way, without an irritating manner, demonstrating wider knowledge on health matters? Not only would-be doctors, but also selectors will find this book compulsive reading.

BASHIR QURESHI

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