

## *Book Reviews*

**Towards Earlier Diagnosis. A Family Doctor's Approach.** KEITH HODGKIN, B.M., B.CH., M.R.C.P. Edinburgh and London. E. & S. Livingstone Ltd. 1963. Pp. x + 459. Price 30s.

“Let me recommend this book—one of the most remarkable ever penned”, says Sherlock Holmes, and Watson would have instantly agreed.

Written largely with the student in mind, the first 30 pages are an account of the author's experience, both before and after entering general practice, of his methods and of his philosophy, and are of great interest for he has kept a record of every consultation for many years. Standards fall off, he thinks, when the list exceeds 2,500. He likes to ask himself “How have I helped at that particular consultation?” and he writes down the diagnostic reasons for his every action, much of general practice being a matter of clinical opinion, and not of clinical fact.

He divides his diagnoses into two categories—suspected or firm, i.e. confirmed by operation or pathological investigations or by the passage of time. Thus, acute appendicitis was suspected in 10.6 per 1,000 patients per year, but confirmed, for one reason or another, only in 3.6 per 1,000.

Other diagnoses, on the same scale, are:

	<i>Suspected</i>	<i>Firm</i>
Adult pulmonary tuberculosis	10.0	1.0
Schizophrenia	1.7	1.2
Carcinoma of bronchus	1.6	0.5
Carcinoma of breast	1.0	0.5
Intussusception	0.6	0.2

The main bulk of the book consists of an analysis of all he has seen, set out system by system, under three headings—common diseases with problems of recognition, common easily recognizable diseases, and the less common diseases; on each he comments on clinical pointers, complications, differential diagnosis, and so on. There are many diagrams of age incidence and of seasonal incidence.

Of acute appendicitis he says: “The family doctor must develop the ability to consider this diagnosis in a very wide range of circumstances, then to use his clinical experience to decide if the patient should be admitted to hospital for observation or operation”. Calls from patients who complain of abdominal pain are visited as soon as possible. Chronic appendicitis is not mentioned. “Influenza”, he remarks, “can be a fatal disease, and although usually mild is capable of killing large numbers of any population. The rush of work and consequent lowering of standards may cause the doctor to overlook other cases of serious disease,

e.g. meningitis, pneumonia, etc., and he may contract the disease himself and be forced to leave his patients and partners when they need him most”.

The last 40 pages are devoted to appendices, the first on incidence rates, the third on surgery accommodation, organization and instruments, the fourth on records and their analysis. The second is a summary of the author's treatment and prescribing habits, and is surprisingly easy to consult. Knowing on which page a disease is described, a finger run down the right hand column of Appendix II immediately locates his choice of method.

The book is beautifully printed and produced, the index is adequate and the price most reasonable. Dr Hodgkin is to be congratulated on a magnificent effort.

**Training of the Physician for Family Practice.** Geneva. World Health Organization 1963 (*Technical Report Series*, No. 257). London. H.M. Stationery Office. Pp. i+40. Price 3s. 6d.

This is the report of the World Health Organization expert committee, with the membership drawn from all over the world, that met in Geneva in December 1962. Before considering the problem of training for general practice the committee wisely defines this branch of medicine and its scope and objects, and then continues by reviewing the proper relationship between family doctors and other branches of the Health Service.

The discussion on training falls into four parts. The first two, undergraduate education and graduate training, which is equivalent to our preregistration year, are common to all medical graduates. The second two phases relate to special training for general practice. They are divided into postgraduate training, largely carried out in hospitals, and continuing in service training. The problems have been discussed in a very general way as they might apply to any country, and it is interesting to see that the general principles enunciated and the conclusions reached throughout the whole document are very similar to the ideas that have been put forward from time to time by the College of General Practitioners. That the College has had some influence in international circles is stressed by the fact that the last section of the booklet consists of “The Content of General Practice” produced by the Council of the College.

**Preparation of the Physician for General Practice.** Various authors, Geneva. World Health Organization, 1963 (*Public Health Papers*, No. 20). London. H.M. Stationery Office. Pp. i+114. Price 6s. 8d. Also published in French.

This booklet contains a report of a conference held in Edinburgh in 1961 by the World Health Organization that was attended by 36 doctors from all branches of the profession, including general practice, and who had a special interest in medical education. Twenty-four European