

countries were represented. The conference limited its discussions to the field of undergraduate education and did not discuss the vocational training required by the future general practitioner after qualification.

Despite the varying pattern of medical care in different European countries it seems that all of them are faced with the same problems. First, the shortage of doctors and of places in medical schools, and secondly, the ever-increasing volume of medical knowledge. The conference dealt mainly with the second of these two problems, and assumed that in every country a personal physician will be required by all its citizens.

There are two possibilities. One is to add more and more to the curriculum in the hope that all graduates will have some technical knowledge of all the specialties. The other is to use the pre-clinical and clinical departments of medical schools to teach the principles of scientific thought and method so that graduates will enter their professional career able to learn for themselves, to reason and think clearly, competent in clinical method, and understanding their responsibilities as professional people.

So many ideas are discussed in the eight papers delivered to the conference that it is not possible to review them in detail. The fact that Professor Richard Scott and Dr John Ellis were selected to represent the United Kingdom speaks for itself. Other papers deal with biochemistry, psychiatry, and social medicine as media for teaching the principles of medicine. The final paper by Dr W. Hobson, Chief, Education and Training of World Health Organization, reviews recent developments and the present position in medical undergraduate education in Europe. No one can be expected to agree with all the highly individual views expressed in this series of papers, but everyone interested in the education of general practitioners should read this booklet.

Emergencies in Medical Practice. Seventh Edition. ALLAN BIRCH, M.D., F.R.C.P. Edinburgh & London. E. & S. Livingstone Ltd. 1963. Pp. v + 784. Price 50s.

Compendium of Emergencies. H. GARDINER-HILL, M.D., F.R.C.P. Lond. Butterworths. 1963. Pp. v + 328. Price 55s.

Birch's *Emergencies in Medical Practice* is a bible to many doctors. Besides being an invaluable book for emergencies it is so packed with information, much of it unobtainable elsewhere, that it is a fascinating book to take up and dip into. Two chapters by Dr Birch himself are extremely valuable. That on "The hazards of medical procedures" is packed with warnings and hints on how to prevent trouble. That on "Medico-legal and other non-clinical emergencies" is most helpful in these days when our patients are so well versed in the law. The Montaignian essay "On what to do when there is little to be done" tells how counterfeited gin may be simulated on a N.H.S. prescription by Spirit and Tincture of Capsitum. Why not Oil of Juniper?

One minor criticism: if in future editions the main entry to a subject

were given in heavy print in the index much fluttering of pages would be saved. For instance the first page entry to coronary thrombosis refers to abdominal pain, the second leads to the main entry.

Dr Gardiner-Hill's Compendium although devoted to the same subjects as Dr Birch's is planned on different lines. Here we have a more complete description of those conditions which may be classed as emergencies, and surgical emergencies are more completely covered.

Both books are useful and the possessor of both may, if he absorbs their contents, claim to be what every general practitioner should be—a specialist in emergencies. The rush and bustle of modern life—the comparative ease with which the doctor may be summoned and arrive at an emergency leave no time for preparation. He must be ready, equipped, and have the knowledge to give this service at all times.

Cardiac Emergencies, Diagnosis and Treatment. BERTRAM A. BRADLOW, M.D., M.R.C.P., M.R.C.P.E. London. Butterworths. 1963. Pp. xiii + 178. Price 35s.

This book, as its title suggests, deals with a very restricted field, but nevertheless one of major importance. The author is a consultant cardiologist in Johannesburg who has spent 11 years—almost half his professional life—in general practice, and he states in his preface that it is intended particularly for general practitioners.

His style is clear and at times dogmatic and he is obviously a therapeutic enthusiast. Some of the treatments suggested are more suitable for hospital than domiciliary practice, by the standards of this country. For instance, noradrenaline drips for shock in myocardial infarction, the apparatus for which, he suggests, should be carried in the practitioner's car. Similarly the advice (p. 120) that "every patient on quinidine should have an ECG tracing taken before each dose" is unlikely to lead to over-prescribing!

However, the great merit of this book is that, within the limits set by the title, the author has left out no treatment worth trying, and the treatments he suggests are given with sufficient detail of dosage and technique to enable one to proceed with confidence. Some of his more dogmatic statements are not likely to meet with universal agreement, but while admitting this he claims that most of the treatments described have been tested by him in practice and found reliable.

In addition to the more conventional cardiac emergencies there is a chapter on the toxic effects of digitalis, quinidine, and procainamide and another on surgical procedures in cardiac patients giving useful advice on pre-operative management, choice of anaesthetic, etc.

This book must be recommended, but those of us who have grown complacent with our handling of cardiac emergencies—"Quarter of morphia and hope for the best"—may well find it disturbing reading.