

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.