

Book Reviews

Die Gezielte Diagnostik in der Praxis. ROBERT N. BRAUN and HANS SCHULTEN. Stuttgart. Friedrich-Karl Schattauer. 1956. Pp. 196.

Feinstruktur einer Allgemeinpraxis. ROBERT N. BRAUN and HANS SCHULTEN. Stuttgart. Friedrich-Karl Schattauer. 1961. Pp. 136.

Some 18 months ago a prominent member of the College Council handed to your reviewer a copy of Braun's *Feinstruktur einer Allgemeinpraxis* with the words: "Have a look through this, I don't know the language anyway, but we met the author at one of our conferences, and he sent me this copy."

A first look soon became a fascinated study which eventually led to personal acquaintance with the author, collaboration in some statistical work organized by the 'Working Party for the Study of General Practice' (Arbeitsgemeinschaft zur Erforschung der ärztlichen Allgemeinpraxis: AEA) led by Dr Robert N. Braun from his tiny country practice in Lower Austria, and further study of his first book *Die Gezielte Diagnostik in der Praxis*. These facts are mentioned because these books are not altogether easy to read—yet they immediately absorb one's interest because they reveal an author who tackles the whole problem of diagnosis in general practice from an angle which one immediately recognizes as corresponding to one's own experience. He is not afraid to admit that the diagnostic routine which is taught in hospital as the only scientific basis for medical action is not carried out by the general practitioner, and is, in fact, not feasible.

Instead of condemning the lack of thoroughness in our methods he investigates the reason behind it and tries to show how experienced and conscientious practitioners can carry out their work in the short time available, and yet avoid, on the whole, serious errors of judgment. The answer, according to Braun, is twofold:

1. Experience teaches the family doctor not only that common diseases occur commonly, but that he will during his professional life, no matter whether he practices in town or country in England or Austria, but allowing for seasonal and local peculiarities, encounter the same complaints at more or less regularly spaced intervals, ranging from incidence rates of the order of 10 per cent p.a. of new consultations for, e.g. myalgias, to 0.03 per cent p.a. of e.g. glaucoma. This regularity he calls the *Falleverteilungsgesetz*—the Law of Regular Incidence.

2. A very high percentage of cases—and this corresponds with the results of the College survey—will not be diagnosed in the accepted sense of the word,

but can only be classified according to the leading symptom or symptom complexes. Many of these will be minor illnesses, clearing up after a short course, either with or without treatment. Yet among this mass of clinical material there will occur, rarely, but regularly, potentially dangerous conditions—and the author considers it one of the main tasks of general-practitioner research to elaborate a diagnostic routine applicable to the conditions of general practice which will lead to the early recognition of these conditions.

Having elaborated a technique which at present is only acquired by succeeding generations of family doctors individually through years of experience, he feels that it could then be systematized, taught, and, where necessary, refined. Thus runs the argument.

The facts behind the argument form the major part of the two books. In *Die gezielte Diagnostik* the author establishes his method of statistical analysis, incidentally giving a critical review of the literature where he appears to have found British work in particular of great value. His own statistics cover a continuous period of seven years, three of which come from his present country practice and four from a working class practice in the industrial town of Wiener Neustadt.

Being struck by the similarity in incidence rates in his own two completely different types of practice, and of both with his previous practice in a middle class area in the small German town of Marburgh, he then sets out to compare and represent geographically his results with those of Horder and Horder, McGregor, and Logan and co-workers. After elaborating the differences between these statistics and making the necessary corrections, he demonstrates that the regularity of case incidence applies to all these statistics, thereby making it a basic fact from which further studies arise.

The *Feinstruktur* consists of such an elaboration, giving a closer analysis of certain symptom complexes, breaking them down into smaller units, but still not attempting to classify as 'Diagnosis' where he feels only a classification is justified.

It is interesting to compare Braun's two books with Hodgkin's *Towards earlier diagnosis*, if only because they cover a similar period of practice statistics. Both authors are deeply conscious of the need not to miss the, comparatively rare, "potentially dangerous condition" (Braun), by being constantly reminded of "misleading features and pitfalls" (Hodgkin). But whereas Hodgkin bases his analysis on clinical diagnoses—either confirmed or merely suspected—in the various systems of the body, Braun starts, so to speak, from the other end, from the complaint presented by the patient. From this he elaborates a classification which covers the whole spectrum of diagnostic possibilities from the definite and obvious diagnosis, e.g. that of a superficial skin wound, via the confirmed diagnosis which is based on a definite physical sign, e.g. inguinal hernia, to the 'typical picture' of e.g. acute appendicitis, pneumonia, whooping cough, and finally the amorphous mass of complaints where the initial opinion can only be a broad classification.

To take acute appendicitis as an example: Braun obtains an incidence rate of the 'clinical picture' of 0.17 per cent p.a. of first consultations, even considering the operation at times only a diagnostic measure, compared with Hodgkin who suspected acute appendicitis in 10.6 per 1,000 N.H.S patients p.a., confirming the diagnosis in 3.6 per 1,000; similarly,

he suspected acute mesenteric adenitis in 2.4 per 1,000, confirmation being, for obvious reasons, only rarely possible.

Though it is extremely valuable from a practical point of view to be reminded how rarely one's suspicions will be confirmed, Hodgkin's subdivision can be criticised from the semantic angle. What happens to the unconfirmed 'diagnoses' in the final classification, and where is the dividing line between e.g. "suspected bronchogenic carcinoma" with an incidence rate of 1.6 per 1,000 (confirmed 0.5 per 1,000) and "cough without other clinical features" with an incidence rate of 133 per 1,000? Braun, by his wider classification—"afebrile catarrh of the respiratory tract"—which consciously begs the question of a definite diagnosis, will also consider the possibility of e.g. bronchogenic carcinoma, but ensures at the same time that the mass of 'negative' findings will have its proper place in the classification so that it can be used statistically.

It has been said at the outset that Braun's monographs are not altogether easy to read—this is partly because the author is breaking new ground in the approach to his subject, and one can at times almost feel how he is groping for a definition here, a clarification there, all the time prying deep down into the basic differences between general practice and other fields of medicine.

For the benefit of those who are not prepared to share Dr Braun's mental effort before arriving at his conclusions as well as for those who are not acquainted with the German language, it is to be hoped that a publisher can be found who will produce an edited English version in the near future. Such a publication should, in the first place, be of great interest to the deans of the medical schools who will find there the key to the problem of the general practitioner within the whole sphere of medicine. Secondly, the postgraduate education and research committees of the College will find useful pointers for possible lines of development, and, finally, such a publication should prove of absorbing interest for any general practitioner who would like to take a critical look at his own work. At least one of the latter has found the ideas put forward by Robert Braun of immense benefit in his day-to-day work.

Diseases of Children. HUGH JOLLY, M.A., M.D., M.R.C.P., D.C.H. Oxford. Blackwell Scientific Publications. 1964. Pp. vi + 586. Price 47s. 6d.

The author has intended this book to equip medical students and general practitioners with a firm grounding in paediatrics at a time when an increasing ability to cope with problems in child health is required. The new textbook compares favourably in price and content, with other works of similar nature; it is well planned, easy to read, excellently illustrated and to the point, but inclined to be dogmatic in places. The chapters covering neonatal paediatrics are shrewdly crammed with important facts and advice, no space having been spared for irrelevancies. Although most subjects are fairly adequately dealt with, there are no references for further reading.

Dr Jolly has gained wide experience both in rural and industrial areas in this country and abroad. His simplicity of style and ability to impart