

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

knowledge should enable medical students, and new graduates, intending to embark on general practice, to take with them some of the pearls of wisdom which he has gleaned.

Chronic Bronchitis in Great Britain. LESLIE H. CAPEL, M.D., M.R.C.P., and MAXWELL CAPLIN, M.R.C.S., L.R.C.P. London. The Chest and Heart Association. 1964. Pp. 56. Price 7s. 6d.

This is yet another review of the subject. Over the past ten years—following a hundred years of neglect—there has been more written and reviewed about chronic bronchitis than pulmonary tuberculosis.

There are now two problems in chest diseases—chronic bronchitis and cancer of the lung, and they both have the same basic aetiology—sucking up atmospheric filth.

This is a very useful review of the subject by two physicians from the London Chest Hospital. They present the problems in a simple fashion particularly suitable for the medical auxiliaries, i.e. nurses, health visitors and social workers. They consider the epidemiology and the basic aetiology, the progression and evolution of the disease and state that its control and treatment lie in prevention rather than in any new and exciting medications.

A valuable section is that in which the social services may help victims of the disease—but here again the service can only be patchy and first aid, they can only serve to relieve the suffering of the victims and families and cannot really halt the progression without the patient's co-operation in giving up smoking.

Promotion of Medical Practitioners' Interest in Preventive Medicine. Twelfth Report of the Expert Committee on Professional and Technical Education of Medical and Auxiliary Personnel. W.H.O. Technical Report Series, No. 269. 1964. London. H.M. Stationery Office. 1964. Pp. 24. Price 1s. 9d.

This is the fifth World Health Organization expert committee report which directly concerns general practitioners. Like the report on the practitioner's role in mental health care it is about an area of our work where development is most needed and most possible.

This committee set out to study ways and means whereby the practice of preventive medicine may be integrated more fully and as a matter of ordinary routine with the normal curative work of all groups of medical men whose work brings them into personal contact with the public. Its report discusses the need for preventive medicine, the teaching of preventive medicine in the undergraduate curriculum, and the help required by the medical practitioner in the preventive aspects of his work.

On the need to look for means of prevention at all times in every field of medicine, the report seems to say what we all know and to say it repetitively. But clearly the authors are convinced that we do not all