

Human neurology

The Human Central Nervous System: A Synopsis and Atlas. 3rd revised ed. Ed. by R. Nieuwenhuys, J. Voogd, C. H. R. van Huijzen. Pp. xii + 437. Illustrated. DM 85. Berlin: Springer-Verlag. 1988.

In their reference to the second edition of this work, the authors state: 'This book is evidently often consulted with the aim of looking up a particular structure together with its name and its topographical relations'. Certainly when used for this purpose, this is the most outstanding neuro-anatomy book I know. Its text is clear, concise and up to date.

This 3rd revised edition appeared in 1988 and the recent literature up to 1986 has, as far as I could determine, been reviewed. At the same time, the older and very valid literature has in no way been left out of consideration. The illustrations are absolutely clear and uncluttered. They show what they set out to do and the reproduction has been such that there is no uncertainty when one looks up any feature. Included in the text is a considerable volume of detail about transmitter-specific neuronal populations. The authors have apparently published another text on this subject, but the present one is a good introduction for the beginner.

I cannot recommend this work too highly for anyone who wants to have a reliable, easily handled text for looking up any feature about the anatomy of the nervous system, including its blood supply and relevant topographical features. For those brought up on the British anatomical terminology, there may be some hesitation about the terminology used, but this is a small price to pay for an immense gain in anatomical delight. Its price is well within the reach of any neurosurgeon, neurologist or advanced student in the neurosciences when an authoritative and enjoyable anatomical text should be required.

J. C. de Villiers

Paediatric respiratory disorders

Kendig's Disorders of the Respiratory Tract in Children. 5th ed. Ed. by Victor Chernick. Consulting ed. Edwin L. Kendig, jun. Pp. xxi + 1055. Philadelphia: WB Saunders. 1990.

Kendig is the most comprehensive reference there is on respiratory disease in childhood. It aims to provide information on almost every aspect of the subject 'for the practitioner, resident, and intern in paediatrics; the chest physician; the roentgenologist; and the medical student', and it is remarkably successful in meeting these goals.

There are 91 contributors, all but three from north America. All have published previously in the field and many are recognised authorities. Approximately one-fifth of the book is devoted to pathophysiology and diagnostic methods. The remainder deals systematically with congenital and acquired disorders in children from the neonatal period to adolescence.

The index is comprehensive, the illustrations are well chosen

and clear and the quality of the printing and the binding is up to the usual high standard one has grown accustomed to from the WB Saunders Company. Chapters on host defence mechanisms, on pulmonary-function testing during exercise, on AIDS, and on breathing disorders during sleep have been added since the last edition and some chapters have been substantially revised and updated.

It is testimony to the scope of paediatric pulmonology that even a book as substantial as *Kendig* cannot do full justice to the subject. References to the literature fill the gaps but it is very difficult to find pertinent ones in long lists categorised by author. Some authors have arranged their references by subject. This is extremely useful and should have been done throughout. Also, the citation of papers by author, instead of numerically, increases substantially the length of the text, breaks the flow of the narrative, and severely limits the number of citations. Thus, many interesting and important points are left without any indication as to where they can be followed up in the literature.

Surprising omissions are sections on epidemiology of respiratory disorders and the effects of smoking and environmental pollution. To attempt to deal with intensive care in 20 pages is hopeless. There are excellent books devoted to that topic and the task should be left to them.

A copy of *Kendig* should be available for reference in every medical library, and paediatric pulmonologists and trainees preparing for the American or Canadian subspecialty examinations in paediatric pulmonology will all want their own copies. The absence of practical diagnostic approaches to common clinical symptoms and signs seriously limits the value of *Kendig* to the clinically orientated user.

M. Klein

Maxillofacial imaging

Maxillofacial Imaging. Ed. by A. M. Delbalso. Pp. viii + 799. Illustrated. Kent: Harcourt Brace Jovanovich. 1990.

The anatomy and pathology of the maxillofacial region is very complicated. However, this multi-author book has succeeded in producing a text that is very readable, clear and easy to understand. The book is divided into 23 chapters, and each chapter covers a different area or topic. The anatomy, pathology and radiological investigations, with special emphasis on computed tomography and magnetic resonance imaging are very well described. The many illustrations and reproductions are of high quality, with attention to fine detail. My only criticism is that, being a multi-author book, there is some repetition.

Emphasis is placed on the uses and principles of panoramic zonography (using the Zonarc panoramic equipment) not only in dental radiography, but also in radiography of the facial bones, temporal bones and upper cervical spine.

The chapters on the orbit sinuses, oropharynx and floor of the mouth are excellent and well written.

M. Garb

Introduction to philosophy of medicine

Philosophy of Medicine: An Introduction. Ed. by H. R. Wulff, S. A. Pedersen and R. Rosenberg. Pp. xv + 222. £14.95. Oxford: Blackwell. 1990.

This is a unique book in several ways. Firstly, it is written by an unusual combination of authors — a physician gastro-enterologist, a philosopher of science and a psychiatrist. Secondly, although it covers many difficult concepts it does so successfully, using language and examples accessible to physicians with little or no knowledge of philosophy. These characteristics combine to provide a thought-provoking and comprehensible analysis of the complex philosophical basis of modern scientific medicine and of some of the forces that will influence its future.

The book begins by describing the paradigm of modern medicine, both as science and as a practical discipline the content of which has developed gradually (by accumulation of knowledge and testing of hypotheses) and also by leaps and bounds through many scientific revolutions associated with paradigm shifts, such as Darwin's theory of evolution, Newtonian physics and Einstein's theory of relativity. Modern medicine is described as being in a phase of paradigmatic instability characterised by erosion of the individualistic mechanical model of disease and growth of epidemiology, industrial medicine, social medicine, medical ethics and the philosophy of medicine.

The core content of the book is described in three philosophical chapters. The naturalist concept of man is described from the opposing philosophical positions of empiricism (concerned primarily with observable facts) and realism (concerned with understanding non-observable underlying mechanisms). Empiricism and realism, which need to be synthesised to provide a balanced basis for naturalistic science, are further supplemented by the hermeneutic approach of the continental school of philosophy. Natural science methods seek objective truth and have contributed enormously to the advance of science and medicine. The hermeneutic approach, which uses interpretation and reflection to discover the subjective truth of the personal self, expands the concept of man (beyond that of merely a biological organism within a naturalistic framework) to include the existential aspects of the self-reflecting and free-willing person. This synthesised approach is necessary to understand a practice of medicine concerned not only with disturbances in anatomy and physiology caused by disease but also with the way in which the individual patient relates and responds to these abnormalities.

In the context of this analysis, psychiatry is described as the classic battleground between naturalistic thinking (which considers mental illness to be reducible to biological malfunction, behavioural disorder or a social construct that can be rectified by drug therapy or a psychodynamic approach to the 'hydraulics of the mind') and hermeneutic inquiry (which attempts to bring together through interpretation and reflection the horizons of understanding of patient and therapist and in this way influence the recovery of the patient).

A balanced functionalist theory of psychiatry is described as one that concedes that either potentially observable (anatomical/physiological) abnormalities in the 'hardware' of the central nervous system or unobservable abnormalities of the 'software' (programming) of the central nervous system (accessible through hermeneutical use of psychodynamic theory) can give rise to mental disorders.

Dualistic and monistic approaches to the mind-body problem and the problem of free will and determinism are briefly outlined but no resolution can yet be offered to these perennial controversies.

Application of this analysis to social medicine allows the authors to explore the change from classic epidemiology through empirical social medicine (which remains inadequate because of its basis in natural science) to critical and ideologically neutral theories of social medicine founded on three fundamental characteristics of man — exploitation of nature for our own purposes, communication with others, and emancipation from repressive social constraints.

The inclusion of a brief section on medical ethics as a philosophical discipline and of the ethical dimensions of clinical decision-making provides a succinct introduction to other more detailed texts on these topics. The authors conclude that medical ethics should be based on Kierkegaard's and Kant's concept of man as a self-reflecting being with free will, and that utilitarian considerations must therefore

usually give way to considerations that concern the autonomy of the individual and the justice of social practices.

This book is highly recommended to those who wish to develop deeper insights into the philosophical basis for medical practice and who are willing to undertake a dialogue with the book rather than just reading through it on a once-off basis.

S. R. Benatar

Cataract management

Management of Cataract in Primary Health Care Services. Pp. vi + 43. Illustrated. SFr. 15. Geneva: WHO. 1990.

Some 17 million people are needlessly blind from cataract, and this figure is increasing by 2 million persons/year.

In developed countries the availability of eye care services to those blind from cataract ensures that the large majority have their sight restored. In contrast, in developing countries, where most of the cataract blind are found, there has been over the years an accumulation of unattended persons blind from cataract. It is this issue that this book addresses.

The publication contains comprehensive guidelines on the management of cataract through primary health care. Suggested methods for the detection of cataract-blind people in the community and the provision of safe, accessible, affordable and cost-effective services are described. The training of paramedical staff to assist the ophthalmologist is discussed, and emphasis is placed on ophthalmologists performing the tasks that only they are trained to do.

Community participation in eye health activities is stressed, and the role of non-governmental organisations, both national and international, in providing technical and financial support to cataract intervention programmes is considered. The publication points out that continued evaluation should form an important and integral part of the operation of cataract intervention services. The evaluation should focus not only on the surgical output, but also on long-term visual results and complications, as well as on such factors as efficiency, effectiveness and cost.

The publication will predominantly interest those involved in organising eye care in developing countries, but will also appeal to those in developed countries who are involved in improving facilities where eye care services are currently inadequate.

A. D. Murray

Family practice management

Family Practice Management. Ed. by G. J. and C. M. I. Pistorius. Pp. 587. Illustrated. R99.50. Parow: Haum/De Jager. 1990.

When a doctor enters private practice it is more important to know HOW to do the right things than to know WHAT to do. This textbook by two experts in their respective fields, does exactly that, and no doctor, even specialists, should enter private practice without having read this book first. Every medical student should have a copy and work through it during his senior student years, while the settled general practitioner should assess his or her practice against this book.

Although some parts are very academically orientated, it is my impression that the authors intended taking the reader on a practical tour through the wilderness of private general practice, especially the minefield of financial matters. After the journey I felt enriched and confidently enthusiastic about general practice.

This book is highly recommended to all doctors intending to enter private practice.

R. J. E. Erasmus

Obstetrics and gynaecology

Essential Obstetrics and Gynaecology. By E. Malcolm Symonds. Pp. vi + 266. Illustrated. Edinburgh: Maskew Miller Longman.

According to the author, this combined obstetrics and gynaecology text of 266 pages was written for medical students in their clinical course, 'to bridge the gap between the vast postgraduate tomes and the very brief lists of facts in the "pocket" books'. To a large extent, he has succeeded in achieving his stated goal of providing a handy summary of obstetrics and gynaecology for the clinical medical student. The attractive layout, the liberal inclusion of clear, colour-enhanced line drawings and the readable prose all add up to a volume that can deservedly be described as user-friendly.

Student readers will especially benefit from some well-written chapters, such as those on normal and abnormal labour, placental and fetal growth and development, and physiological changes in pregnancy. On the other hand, the chapter on sexual dysfunction may be too Freudian for readers like myself, who have come to regard expressions such as 'frigidity' and 'penis envy' as sexist concepts belonging to a past era.

The book contains three kinds of blemishes that are serious enough to warrant cautioning the medical students to whom it is prescribed.

The first is the inclusion of outmoded or discredited treatments and procedures, such as the use of fibrinogen infusions in the management of obstetric coagulopathies (p. 103); or of oestrial determinations to monitor fetal well-being (p. 91). Similarly, radiographic pelvimetry to assess the bony pelvis (p. 158), or 'to look at head engagement in labour' (p. 160) is rarely indicated in modern obstetric practice.

Secondly, the text makes dogmatic assertions that are no longer current, or are controversial at best. The assertion that conservative management of tubal pregnancy predisposes to recurrent ectopic gestation (p. 81) is not irrefutable. Neither is the theory that intra-uterine contraceptive devices act predominantly by preventing the implantation of a fertilised oocyte (p. 171).

Finally, the present text (like most First World textbooks) lends prominence to conditions that are relatively uncommon in our environment, at the expense of those that are. Thus, a separate chapter is devoted to endometriosis and adenomyosis, while syphilis, septic abortion and uterine rupture receive only cursory treatment.

I do not doubt that 'the introduction of the Abortion Act has been a major factor in the reduction of perinatal mortality' in the UK (p. 155), but there should be a corollary to this, namely that voluntary and therapeutic pregnancy terminations, necessary though they may be, also represent fetal loss which is no less regrettable, albeit outside the perinatal definition.

Daniel J. Ncayiyana

Surgical memoirs

Surgical Roots and Branches. Ed. by R. Murley. Pp. x + 341. Illustrated. £18.50. Hamilton: Librigrig Book Distribution. 1990.

For those accustomed to reading between the lines, the description the London *Daily Telegraph* gave to Sir Reginald Murley when he became President of the Royal College of Surgeons in 1977 is a masterpiece of understatement. Among other things, he was described as 'a redoubtable standard bearer' and 'one of the dwindling number of old-style "surgical characters"'. Loosely translated, this meant that he was a holy terror to anyone who got in his way, particularly bureaucrats and ministers of health, and not only did not suffer fools gladly but did not suffer them at all.

His autobiography, one of the most recent in the *BMJ's Memoir Club* books, makes fascinating reading, not only because of the author's colourful career, but because of the insight he gives into the comings and goings in the halls of medical and surgical power. His account of the inauguration of the British National Health Service makes compelling reading, and should be read by those who participate in the debate about health care delivery models. Altogether, a book well worth the reading, and written by a formidable man whose motto might have been 'if you're going to be treated like an *enfant*, you might as well be *terrible*'.

N. C. Lee

Survival in a hostile environment

Staying Alive. Ed. by Ron Reid-Daly. Pp. ix + 259. Illustrated. R49.95. Rivonia: Ashanti. 1990.

The material presented in *Staying Alive* was derived from years of experience in bush survival techniques as taught by the author to soldiers in training. It aims to impart these strategies also to laymen who are engaged in outdoor pursuits in remote places voluntarily, or who are suddenly thrust into a hostile environment by an unexpected accident or breakdown.

The elements of survival are the provision of the basic necessities such as water, food and shelter, as well as avoiding the hostile attentions of animals or human enemies. Finally, one must be able to find a way out of the impasse or dangerous situation. These problems are tackled systematically, and easy-to-follow practical details are given, such as how to obtain water and food in arid or wild places, how to track and hunt animals (and men), improvise weapons, build shelters, make fires without matches, and orientate oneself using the stars. There is also a section on urban survival, including how to deal with rapists and other attackers, and another section outlines the various considerations in fortifying farmhouses against insurgent attacks.

The medical advice is contained in two chapters, including basic life support (cardiopulmonary resuscitation) and first aid for snake bites, heat exhaustion, frostbite, hypothermia, wounds and fractures, and rabies and malaria prophylaxis. I was unable to find any useful advice, however, on the prevention and treatment of gastro-enteritis in the bush situation, and very little on making water supplies safe. Simple lists of minimum basic necessities (such as first-aid kit contents) for hikers and others going through hostile environments are also missing, presumably because these are supplied automatically to military personnel. Similarly, what may be reasonable advice to a fit, trained 20-year-old soldier may not be practical to a middle-aged man with a paunch and no stamina. A major omission, in my opinion, is the lack of an index, which makes its use as a reference rather frustrating.

This book has something of interest for all. The advice is liberally laced with fascinating anecdotes, which make it quite readable even for the person who has no intention of going near a hostile environment. It is recommended highly for all hikers, scouts and soldiers, as well as those who like to read about the outdoors.

J. D. Knottenbelt

Urolithiasis

Urolithiasis: Medical and Surgical Reference. Ed. by M. I. Resnick and C. Y. C. Pak. Pp. x + 375. Illustrated. R53.50. Kent: Harcourt Brace Jovanovich. 1990.

Professor Pak, a physician, has made a major contribution over the last two decades to the understanding of the aetiology and pathogenesis of urolithiasis and the role of medical treatment. Professor Resnick, a urologist, is also well known in the field of urolithiasis.

The book is basically divided into two parts. The first part, the medical section, covers the physiochemistry of stone formation and the main biochemical disorders of stone disease. The second part, the surgical section, covers the interventional approaches used for managing stones, and includes chapters on chemolysis, open surgery, ureteroscopy, percutaneous management and extracorporeal shock-wave lithotripsy (ESWL).

The medical section is outstanding. It contains a number of excellent diagrams and tables, and one comes away at the end of each chapter with a clear understanding of the biochemical abnormality and its medical treatment. The surgical section is also very well written, especially the chapters on open surgery and ESWL.

This book is an important up-to-date addition to the literature on urolithiasis. The authors have achieved their goal in providing practical information for the management of patients with stone disease. It is reasonably priced and I would recommend it highly for all practising urologists and registrars in training.

R. D. Barnes

Mental health in primary health care

The Introduction of a Mental Health Component into Primary Health Care. Pp. 1-59. SFr. 11,50. Geneva: WHO. 1990.

Many countries, including South Africa, have failed to ensure that most of their citizens have access to quality mental health services. A core tenet of this book is that the introduction of a mental health component into primary health care is vital, not only because of the need to diagnose, treat, and prevent mental and neurological disorders, but also because of the practical relevance of psychosocial and behavioural sciences in general health care. The argument is made that primary health care workers, given the necessary training and supervision, have the ability to identify and manage certain priority conditions, and that developing a more decentralised system would have positive repercussions for specialised health personnel and facilities.

This book, which had substantial input in its compilation from professionals from developing countries, sets out a framework for how countries might go about introducing a mental health component into primary health care. The importance of having a clearly formulated national mental health policy, of community involvement in planning services, and of the need to co-ordinate activities with other governmental and non-governmental organisations are all stressed. A detailed discussion of the infrastructure needed to support a decentralised system is provided. Implications for training health personnel at all levels are addressed, and budgetary implications are considered.

The framework presented is general enough to be applied to any country. Nevertheless, many specific issues are of particular relevance to any South African attempt to integrate mental health services into a primary health care network. These include the necessity of marketing a new approach to mental health care; the need for dialogue with members of the communities for which services are being planned (including traditional healers); the necessity of getting people to take responsibility for their health; and possible resistance to efforts to modifying the existing structures, particularly from psychiatric specialists. Practical suggestions are given for how these and other issues may be dealt with. The importance of evaluation in demonstrating the effectiveness, acceptability, and efficiency of the new approach is stressed throughout the book, and one chapter specifically addresses the kinds of data that might be useful for patient management and health service management and planning.

This easy-to-read book has relevance beyond the area of mental health, and will, I hope, stimulate discussion within and between persons concerned with health services policy, health education and health services research.

Charles D. H. Parry

Tuberculosis in South Africa

White Plague, Black Labor: Tuberculosis and the Political Economy of Health and Disease in South Africa. Ed. by Randall M. Packard. Pp. xxii + 389. Illustrated. \$40 (cloth) and \$15,95 (paperback). California: University of California Press. 1989.

We should like to begin this review firstly by commending the author on the extensive research, analysis and literary skill he has devoted to this work, and secondly by recommending the book to all who are interested in socio-political contributions to ill-health and disease. The factual content of the book, the author's sensitive portrayal of the many miseries inflicted by apartheid policies and the insight provided into socio-political-economic influences on health and disease in South Africa, combine to make this a thought-provoking and conscientising work. It contributes to our understanding of the complex inter-relationships between social and biological change and it will become a well respected component of the literature of protest against South Africa's racial discriminatory policies.

We do, however, find that the book seems to be shaped by an oversimplifying ideology. In his preface, the author asks a question previously posed by South African research workers . . . 'since the disease (TB) is totally curable, and available control measures are sufficient to combat the disease effectively, the natural course of the epidemic can be altered to a rapid decline. Why then does the problem remain such a serious one?' He attempts to answer this ques-

tion by tracing socio-political and economic events in relation to apartheid in South Africa and by drawing analogies with TB epidemics in England and colonial Africa. This leads him to the apparently predetermined conclusion that the root cause lies in the alignment of political and economic interests within rapidly industrialising capitalistic economies. In this context, tuberculosis is described as the penalty paid by capitalist societies for their exploitation of labour. He does not attribute the early decline of tuberculosis in England (following the peak incidence) to material improvements resulting from industrialisation, but rather, primarily, to natural selection — overall resistance produced by the early elimination of genetically susceptible families and the survival of more resistant families. The gradual improvement in living and working conditions and the subsequent wide convergence of class interests committed to health reform are, however, conceded as factors responsible for the subsequent decline of tuberculosis in England.

To focus on what seems to us to be a central weakness in this book we should like to substitute the words *historical* and *historian* for the words *medical* and *doctor*, in some sentences on page 32, which relate to medicine. 'Historical facts, like any other data, have no intrinsic meaning. They are rather the materials with which *historians* and others construct hypotheses, theories and conclusions. Although these interpretative processes are often viewed by *historians* and the communities they serve as involving impersonal and objective distillations of *historical* facts, they are unavoidably shaped by the social and intellectual environment in which they occur.' When the criticism levelled at medicine in this way is applied to history, it then is apparent that his historical perspective may also have (to again use his words), 'less to do with its basis in historical fact than with its usefulness as an instrument for promoting opposing sets of political and economic interests . . .'

Another weakness is his failure to provide support for his thesis with data from any slowly industrialising non-capitalist societies he considers to have fostered different and better patterns of health and disease, with beneficial effects on tuberculosis.

A central argument in this work is that tuberculosis control measures in South Africa involve the application of exclusionary policies designed to keep the disease out of white society. Good documentation is provided for this conclusion, but the argument that 'the current push by conservative whites for stronger segregation and stiffer laws aimed at controlling the spread of illegal squatter communities would seem to indicate that a 1950s-like exercise in wall building is in the offing' (p. 319) is discredited by recent developments.

The interested reader will find much of interest in this book, both in its strengths and in its weaknesses. It is highly recommended, in particular for those who will read it with a critical and open mind, and with a view to a better understanding of South Africa and those who write about it.

S. R. Benatar
M. Savage

Medical research

Research in Medicine: A Guide to Writing a Thesis in the Medical Sciences. Ed. by G. Murrell, C. Huang and H. Ellis. Pp. xii + 105. Illustrated. £19,50 (h/b) £7,50 (p/b). Cambridge: Cambridge University Press. 1990.

Academic medicine in South Africa is going through a lean time as regular readers of the *SAMJ* will know. However, present vicissitudes apart, research in medicine will continue to be vital to human advancement, and should attract the brightest and best of the current crop of medical graduates. Most universities are adept at spotting those who have a future in this demanding field, and prospective candidates for an academic career will usually have plenty of advice available on hand.

However, there may be those who have not been talent-spotted, or who may be interested in finding out more about it, and this is a book for them. It is actually sub-titled '*A Guide to Writing a Thesis in the Medical Sciences*', but contains a great deal more useful information about the whole field of academic research. Written primarily for the UK market, it nevertheless should be of considerable value to those in South Africa who may be contemplating a course of study to a higher qualification in medicine, and gives excellent, practical advice on the preparation of a thesis. Recommended.

N. C. Lee