

Dr Robbie was dearly loved by his colleagues and all the technology and support staff, who experienced him as a gentle and fair man who performed his supervisory duties and consultation function with calmness and expertise.

Dr Robbie maintained remarkable health of body and mind until the day before his death. He was an avid reader and enjoyed classical music in all its facets.

He was married to Marie Nel, originally from South West Africa, and they would have celebrated their 35 wedding anniversary on 14 October by attending a performance of the Merry Widow.

Our condolences to Marie, with our firm belief that he had truly lived a meaningful and compassionate life.

## Books

### ***Sociology of Health and Illness***

Edited by C. Allais. Series Editors C. Allais and V. McKay. Pp. 255. Illustrated. R95. Johannesburg: Lexicon Publishers. 1995. ISBN 1-8613-436-9.

This clearly presented and accessible multi-author text should meet its primary goal of providing social and health science students with an introduction to the sociology of health and illness. Current thinking on the sociology of medicine and on sociology in medicine is presented in a way that will help such students engage this daunting conceptual territory.

Overall, this book offers a closely argued examination of issues of central importance to the health of South Africans, while periodically lapsing into fashionably correct disparagement of allopathic medicine. Several chapters reflect a sociological view which is hard to match with the social reality of South Africa, while others such as that on health policy, for example, are well grounded in recent local experience. I would caution against the simplistic application of what may be true for suburban Europe to rural South Africa — can a pregnant woman going into labour in KwaZulu/Natal really be safer at home than she would be in hospital as is suggested in the final chapter on the medicalisation of life today? Such assumptions must be challenged, especially when in chapter 12 we read a harrowing account of a preventable maternal death. It is strange to hear Ivan Illich's voice resounding down the corridors of social science academia in 1995 and yet to barely hear a whisper from David Mechanic, a medical sociologist, who since the 1970s has paid such great attention to health care in South Africa.

These criticisms notwithstanding, this text is good value for money, and is an eminently worthwhile contribution to the material available to students in the health and social sciences. The students who read this book will have a far better understanding of the social complexity surrounding health and the delivery of health care in South Africa.

David Whittaker

### ***ABC of Emergency Radiology\****

Edited by D. A. Nicholson and P. A. Driscoll. Pp. ix + 105. Illustrated. £14.95. London: BMJ. 1995. ISBN 0-7279-0832-4.

The injured or acutely ill patient is often seen after hours, when only junior and relatively inexperienced staff are available. Further, availability of specialist radiologists after hours, apart from the emergency departments of large hospitals, is very limited. Interpretation of X-rays under these conditions is difficult, and the very real possibility of making major errors in diagnosis can only increase the anxiety of the doctor expected to undertake this work.

This book is an excellent summary of the common radiographic abnormalities to be found in the injured or acutely ill patient. The text emphasises a systematic approach to interpretation. Basic radiographic anatomy is described at the beginning of each region. The ABC system of radiographic assessment of each body region is simple and logical. The reproduction of X-rays (often a major defect in similar works) is generally good.

The only area that is disappointing is the section on the Chest, where many of the X-rays are over-exposed and too dark for adequate interpretation. Another minor criticism is that the section on maxillo-facial radiography is rather too detailed and complex for the non-radiologist.

Apart from these criticisms, the book represents an easy to read, well illustrated and inexpensive text. Although there are a few similar publications, the majority cover one system only (usually musculoskeletal) and it is rare to have a text which covers all body systems.

It is strongly recommended for all emergency medicine departments and for all medical practitioners who have to practise emergency medicine without specialist radiologist cover.

A. T. Scher

### ***Assistance in Hunger Strikes. A Manual for Physicians and Other Health Personnel Dealing with Hunger Strikes***

Johannes Wier Foundation for Health and Human Rights. Pp. 42. Dfl.15. Amersfoort: Johannes Wier Foundation. 1995. ISBN 90-733550-12-2.

In 1992, the Johannes Wier Foundation for Health and Human Rights organised a seminar entitled 'Assistance for Hunger Strikers' in association with the Royal Dutch Medical Association (KNMG) and the Pharos Foundation for Refugee Health Care. The meeting had been sparked off by a highly publicised hunger strike by 180 Vietnamese refugees, and one of the many lessons learned from that episode was that the average physician simply did not possess adequate knowledge about how to handle hunger strikers. The 1992 seminar was attended by doctors, nurses and lawyers, and this booklet is a record of the proceedings.

\* Book titles marked may be ordered directly from MASA Publications, Book Department, Private Bag X1, Pinelands, 7430, tel. (021) 531-3081, fax (021) 531-4126, e-mail masact@aztec.co.za.



Hunger strikes pose a unique medical dilemma for doctors who consider the support of life a basic professional duty, and who find it intolerable to have to watch while a prisoner starves himself to death. The alternative is forcible feeding, a highly traumatic technique which often assumes all the aspects of a punishment rather than a life-saving procedure. The current guidelines in such cases have been provided by the WMA's Declaration of Tokyo which states: 'Where a prisoner refuses nourishment and is considered by the doctor as capable of forming an unimpaired and rational judgement concerning the consequences of such a voluntary refusal of nourishment, he or she shall not be fed artificially.'

Mercifully, current conditions in South Africa are now such that hunger strikes may be considered a thing of the past, at least for the foreseeable future, but human nature being what it is, this booklet should still be kept for ready reference.

**N. C. Lee**

## Books received

The receipt of these books is acknowledged, and this listing must be regarded as sufficient return for the courtesy of the sender. Books that appear to be of particular interest will be reviewed as space permits. The *SAMJ* does not publish unsolicited reviews.

***Hazards of Local Anaesthetic Injections.*** By Daniel P. Barnard. Pp. 148. Illustrated. R100. Pretoria: DP Barnard. 1994. ISBN 0-620-18666-6.

***Physical Status: The Use and Interpretation of Anthropometry.*** WHO Technical Report Series No. 854. Pp. x + 452. Sw.fr.71/US\$63.90. Geneva: WHO. 1995. ISBN 92-4-120854-6.

***Drugs used in Parasitic Diseases. WHO Model Prescribing Information.*** Second Edition. WHO. Pp. 146. Sw.fr.35/US\$31.50. Geneva: WHO. 1995. ISBN 92-4-140104-4.

***Cresols.*** Environmental Health Criteria No. 168. Pp. 144. Geneva: WHO. 1995. ISBN 92-4-157168-3.

***Anticoagulant Rodenticides.*** Environmental Health Criteria No. 175. Pp. 121. Sw.fr.21/US\$18.90. Geneva: WHO. 1995. ISBN 92-4-157175-6.