

METABOLIC DISTURBANCES

Metabolic Disturbances in Clinical Medicine. Edited by G. A. Smart, B.Sc., M.D., F.R.C.P. Pp. viii+358. Illustrations. 45s. net. London: J. & A. Churchill Ltd. 1958.

The rapid and extensive advances made in the field of biochemistry and physiology are reflected in this notable book. It deals in general with the problems of metabolism in various disease processes, and inevitably there is some overlap in the presentation of related disturbances in the systems concerned.

The current concepts in disorders of nutrition, electrolyte and water disturbances, disturbances after injury, to mention only a few, are authoritatively presented. A timely review of the modern theories in atherogenesis and atherosclerosis is comprehensively handled.

A glance at the table of contents will at once excite the interest of student and practitioner, be he specialist or general practitioner, physician or surgeon, because it offers biochemical information and principles essential to everyday practice.

This book is confidently and highly recommended, and Professor Smart and his co-authors are to be congratulated.

A.L.

CARDIOVASCULAR DISEASES

Progress in Cardiovascular Diseases. Vol. I, No. 1. Progress in Cardiac Surgery. Edited by Charles K. Friedberg, M.D. Pp. 108+ix. Illustrations. Single issues \$3.00 each, 4 successive issues \$10.00. New York: Grune & Stratton, Inc. 1958.

Although *Progress in Cardiovascular Diseases* is similar to a journal in format, it is actually a series of soft-cover monographs—each book a symposium on one special aspect of this increasingly important field, to be published at approximately quarterly intervals.

Medical literature has become so vast that even in a single field one finds it difficult to review the current articles. When that special field is the cardiovascular field the task becomes well-nigh impossible.

The appearance of a new journal for cardiovascular diseases would, at first sight therefore, seem to be undesirable. If it were not for the fact that this journal is trying to bridge a gap by reviewing the progress in cardiovascular diseases, and but for the fact that it is to be edited by Friedberg, one would still have thought that careful selection in existing cardiovascular journals would have served an equally good purpose.

This first number of *Progress in Cardiovascular Diseases*

deals with surgical aspects, and there are notable contributions from Friedberg in the form of a review; from Wood on the physician's responsibility in respect of surgical treatment of acquired valvular disease of the heart; and from Gibbon and Templeton on the current status of pump oxygenators.

The other papers are not of outstanding quality, but give a fair indication of the experience of some workers with particular cardiac defects and with particular surgical techniques.

One hopes that succeeding numbers will maintain and perhaps improve on the present standard.

A.J.B.

MODERN TRENDS IN ANAESTHESIA

Modern Trends in Anaesthesia. Edited by Frankis T. Evans, M.B., B.Sc., F.F.A.R.C.S., D.A. and T. Cecil Gray, M.D., F.F.A.R.C.S. Pp. ix+318+(13). 30 Figures. 76s.+1s. 9d. Postage. London: Butterworth & Co. (Publishers) Ltd. South African Office: Butterworth & Co. (Africa) Ltd., P.O. Box 792, Durban. 1958.

This book should not be confused with a *Modern Pract'ce of Anaesthesia* published by the same senior author and House. This is no remade second edition, but a new book that, refreshingly, lives up to its title.

There are 22 chapters, and 22 contributing authors from both sides of the North Atlantic and Scandinavia, whose names are known to any anaesthetist conscious of the leaders of his speciality. However, although the authority is predominantly English, their sources of reference are drawn from a wider circle, avoiding the insularity of thought of so much second-best medical writing from Britain and especially the USA. It is a pity that titles of papers quoted in reference were not given in a book of this nature.

This book does not cover the whole field of anaesthesia, and thus cannot be considered a conventional text-book. It is nevertheless worthy of attention. Although many chapters deal in a limited way with their subject, some may be considered as authoritative summaries of highest quality, such as the superbly written chapter on hypothermia by Gray, and the discussions of pulmonary ventilation by Dobkin, regional anaesthesia by Bonica, local anaesthetics by Geddes, and new drugs by Dundee. These all might well draw attention of postgraduate students. Important information is also assembled on hypnosis, cardio-respiratory pumps, and concepts of consciousness, all subjects difficult for the average anaesthetist to read up.

But the non-anaesthetist with no background knowledge will

also find reason for interest, because the book so often illuminates the many boundaries between anaesthesia and other specialities. Certainly, some of the remarks on statistics of fatalities and teaching and research transcend the limitation of speciality.

Judging from this book, the most important trend is for the anaesthetist to assume the role of clinical respiratory physiologist in the medical team outside the operating theatre. Thus it is to be regretted that formal chapters on thoracic surgery and neurosurgery were omitted, for much recent progress in anaesthetic and post-operative management has been made in these fields.

The book conforms to the good quality expected from the publisher, the text is well set out and apparently flawless. It is certainly important reading for the postgraduate student (and his examiner) and the prudent anaesthetist could do worse than to let it attract the attention of his surgical and especially physician colleagues.

P.A.F.

THIS SLIMMING BUSINESS

This Slimming Business. By John Yudkin, M.A., M.D., Ph.D., M.R.C.P., F.R.I.C. Pp. 190. 15s. London: MacGibbon & Kee, 1958.

Doctors are frequently asked for 'slimming diets' and are not likely to be happy about the type of advice appearing in magazines and newspapers.

The professor of dietetics, Queen Elizabeth College, London, has taken the trouble to write a small but authoritative book which many patients should be able to enjoy as well as to absorb. He writes entertainingly and has enlivened his pages with verses by Ogden Nash accompanied by amusing sketches, all bearing on food or on eating habits. He debunks many of the fallacies commonly held about weight reduction and adopts the sensible view that a varied diet which is low in carbohydrates is more likely to be maintained than the more elaborate regimes usually advocated; nor has he any time for the 'stunts' that may bring about a temporary loss of weight which disappears 'as soon as I begin to eat again, doctor'.

But isn't Dr. Yudkin expecting rather much when he asks

his reader to get through 150 out of the 190 pages before the frequently hinted at diet begins to emerge? No doubt it is all highly logical, but the over-weight person is eager to learn what to do; the rest can come afterwards. If the physician is willing to outline these directions this little book would be a real help to the more intelligent patient.

F.W.F.

EMERGENCIES IN THORACIC SURGERY

The Management of Emergencies in Thoracic Surgery. By John Borrie, M.B.E., Ch.M., F.R.C.S. (Eng.), F.R.A.C.S. Pp. xi+340. Illustrations. New York: Appleton-Century, Crofts, Inc. 1958.

This book is a classic in its subject. Pioneer work of an outstanding nature has been done by concentrating vast experience and literature on the subject of thoracic emergencies in a book of 340 pages.

Useful space is conserved by describing only the relevant anatomical, physiological and pathological facts where they are indicated. With a minimum of text, numerous illustrations ensure absolute clarity, even for those students uninitiated in thoracic surgery.

This work will be of great value, not only to the thoracic surgeon, but also to the physician and general surgeon. 'Prevention of postoperative morbidity and mortality' stands out like a sentinel throughout the book. The stress laid throughout on the management of sputum retention by comparatively simple procedures is of paramount importance.

The final chapter (Cardiac Arrest) should be read first by every doctor who is prepared to carry out a surgical procedure under local or general anaesthesia. Ideally, no medical practitioner should undertake the most minor surgical procedure unless he has first acquainted himself with the management of cardiac arrest.

The first 3 chapters demand the close attention of the nursing staff. Proper armamentarium for the performance of basic procedures will save much time and inconvenience to the patient and surgeon.

E.J.J.