

## ANATOMIE

*A New System of Anatomy.* By Sir S. Zuckerman, C.B., M.A., M.D., D.Sc., F.R.S. Pp. xiii + 579. Illustrated. R7.50. London and Cape Town: Oxford University Press. 1961.

Hier is nog een van die boeke wat geskryf is om 'n vaartbelynde kursus in die anatomie aan te bied. Die skrywer sê in sy voorwoord dat hy baie onnodige materiaal wegge laat het wat volgens sy mening onbelangrik is, maar hy gee geredelik toe dat die student 'n duidelike beeld van die verloop van sulke belangrike strukture soos die ureter, die nervus vagus en die nervus ulnaris moet hê. Die indeks toon tien verskillende verwysings na die nervus vagus. As 'n mens met geduld al tien verwysings naslaan, kan jy die stukke soos 'n legkaart by mekaar laat pas, maar selfs dan sal jy nog nie 'n begrip hê van die distribusie van die vagus nie. Net so met die nervus ulnaris. Die beskrywing eindig by die distribusie na die hipotenare spiere. As 'n mens dan die adductor pollicis en die interossei naslaan, sal jy vind dat hulle ook deur die nervus ulnaris voorsien word. Hoe moet die arme student dan al hierdie dinge bybring? Die vaartbelyning is myns insien nie juis geslaag nie.

Die illustrasies is voortreflik. Die boek is gebind in 'n wasbare omslag—'n mens kan ten minste die boek was voordat jy hom weer verkoop! J.F.v.E.K.

## METABOLIC DISORDERS

*Thannhauser's Textbook of Metabolism and Metabolic Disorders.* 2nd ed. Ed. by N. Zöllner. Pp. xiv + 462. \$17.50. New York and London: Grune & Stratton, 1962.

This is a good reference book on intermediate metabolism in the German style, and the translator has certainly done his best to cut up the original alexandrinous sentences and portmanteau polysyllabification. It is rather an unusual mixture of pure biochemistry and clinical medicine, and it is the latter which suffers. Waldenstrom's clinical section on proteins is interesting but rather difficult to read, and can only be considered as a comparison to a clinical lecture, not a substitute. It is already a little out of date, for instance the 'protein-losing gastro-enteropathies' are dismissed with a brief mention, evidently inserted as an afterthought.

I think the clinical section on diabetes is out of place, but recommend anyone interested to read it, since it indicates briefly the German approach to management of the patient. Basic dietary ideas are the same as our own, but unsaturated fat is not even mentioned. Insulin is recommended for the obese, mildly diabetic male. The recommended treatment of diabetic coma is that which was in wide use about 20 years ago. The classification of diabetes mellitus is rather naïve, thus the younger type have 'fair blue iris' and 'relative areflexia', while the older 'counter-regulation diabetics' are 'pyknic and sthenic', and 'pituitary signs may be present', whatever these things may mean. The discussion on pathogenesis and histology fails to mention any recent ideas or research.

The biochemical side of the book is largely beyond my capabilities to judge, but appears to be sound and moderately full, with large bibliographies. This would seem to be a reference work for research workers and clinical biochemists. It includes sections on general metabolism, oxidation, various enzyme groups, thyroid metabolism, carbohydrate metabolism, and protein and amino-acid metabolism. W.P.U.J.

## BACTERIOLOGY FOR TECHNOLOGISTS

*Handbook of Bacteriological Technique.* By F. J. Baker, F.I.M.L.T., F.I.S.T., F.R.M.S. Pp. ix + 369. Illustrated. R5.20. London and Durban: Butterworths. 1962.

Mr. Baker is already familiar to most medical technologists as part-author of 'An Introduction to Medical Laboratory Technology'. This, his second contribution, is of the same high standard.

Mr. Baker has managed to cover remarkably fully the techniques for the isolation and identification of micro-organisms. Aspects covered include chapters on stains and media, antigen-antibody reactions, chemotherapy, virology, parasitology, and medical mycology.

This book should prove of great help not only to the trainee technologist, but also to his more senior colleague.

A.A.F.

## HALOTHANE

*Halothane (Fluothane).* By C. R. Stephen, B.Sc., M.D., C.M. and D.M. Little, Jr., M.D. Pp. viii + 142. Illustrated. R4.80. Postage 27½c. Baltimore: Williams & Wilkins Co.; and London: Baillière, Tindall & Cox. 1961.

This is a delightfully straightforward, accurate, and authoritative assessment of halothane after 5 years of universal employment in every branch of clinical anaesthesia. The basic and practical approach will suit general practitioners, particularly those not familiar with the results of research relating to the newer anaesthetics, as fully reported in the specialist anaesthetic journals; its balanced conservatism contrasts nicely with the enterprising but controversial review article by Michael Johnstone in a recent number of *Anesthesiology*. Rather surprisingly this strongly bound book contains only 3 times as many words as the article by Johnstone, and actually less details.

J.W.M.