
BOOK REVIEWS

Top Tips For Gps – A Beginner’s Guide To General Practice. Knut Schroeder Radcliffe, 2000. £17.95 Illust. PB. Pp134. ISBN No. 1-85775-440-9.

‘Top Tips for GPs’ describes itself as a beginners guide and it is very definitely aimed at new GP registrars with little or no experience of Primary Care.

The ‘tips’ are short paragraphs. Occasionally illustrated with mildly amusing cartoons, presented under bold headings. They cover topics from ‘The Doctors Bag’ and ‘Handling Complaints’ to ‘Use Music to relax’ and all shades of advice in between. The advice is generally sensible and clearly laid out. All the tips concentrate on administrative rather than clinical areas and, inevitably, they are geared towards NHS practice. The penultimate chapter covers summative assessment and the MRCGP examination.

Whilst many of the tips are undoubtedly useful, there is no groundbreaking information here. Much of the advice is available elsewhere and, irritatingly, a significant number of the tips simply redirect you to your trainer, a course of action I hope many registrars would think of without the aid of Knut Schroeder. The book is, however, easy to read and finding an appropriate tip is fairly straightforward with the aid of a comprehensive contents list and complete index.

This book is probably best read before starting your first RMO/GP Registrar post rather than used as a reference book once in practice. It is not a bad book but there are better texts available and I would recommend borrowing ‘Top Tips’ from a library before you buy it.

Capt P Carter RAMC

A Guide To Laboratory Investigations. M McGhee. Radcliffe, 2000. £17.99. PB. Pp 151. ISBN No. 1-85775-357-7.

This excellent little manual, now in its third edition, gives a simple, concise overview of all commonly used laboratory investigations. It is conveniently divided into 6 chapters to aid retrieval of specific information such as haematology, fertility and microbiology and gives sound advice on the significance of results with practical suggestions for further investigation and follow up.

Within each chapter, each investigation is accompanied by normal values where appropriate and important differences in the paediatric population are noted. Abnormal test results are explained with suggestions as to possible diagnoses and

important confounding factors are highlighted. In the section on biochemistry for example, factors which may affect the result are listed together with useful practical details such as which type of tube to use, storage of the sample and restrictions on food and drink prior to testing. For instance, bananas will affect the measurement of urinary urobilinogen! Although not intended as a textbook, it is packed with useful clinical information alongside the laboratory facts and figures, making it very user-friendly.

Aimed primarily at GPs, this book is also targeted at community nurses and hospital doctors. Although didactic by necessity, it nonetheless manages to be both interesting and easily readable whilst not compromising on its prime function as a reference guide.

Maj L Woolrich RAMC

ABC of One to Seven. B Valman. BMJ Books, 1999. £17.95. Illust PB. Pp 160. ISBN No. 0-7279-1232-1.

It was interesting to be asked to review the new edition of this book as we have had it on the shelf of our practice library for some time but I have referred to it hardly at all! I note that it is on the RDMC scaled list of General Practice texts (as is ‘The First Year of Life’ in the ABC series by the same author).

This book aims ‘to provide straightforward advice on the diseases, emotional problems and developmental disorders of early childhood’. It is written in the characteristic style of this popular BMJ series with text covering the left hand side of the page accompanied by illustrations on the right. The author is a Consultant Paediatrician but there is input from other relevant primary and secondary health care professionals. It is marketed towards primary care, in particular GPs, medical students, nurses and health visitors.

The book consists of 40 short chapters covering the core topics in paediatric medicine including respiratory tract infection, asthma, abdominal pain, diarrhoea, growth failure, development and orthopaedic problems.

Overall, I found that the material was covered in a superficial and sometimes unstructured way. Some of the chapters were disappointing and lacked the depth that I had hoped for. As an example, the chapter on asthma discussed the management of acute and chronic symptoms in rather loose terms with no mention of the BTS guidelines. I was rather frustrated throughout by the rather

ambiguous and repetitive photographs and illustrations accompanying the text. The illustrations were often not labelled and their connection to the text was tenuous at times!

There were however some very good chapters on topics that are frequently overlooked in standard paediatric texts and which are very pertinent to General Practice. In particular, there was a good section on the practical management of UTI and enuresis. The chapters on infectious diseases and paediatric dermatology were well covered and illustrated in colour. There was also a very clear and informative chapter on minor orthopaedic problems written by a Consultant Orthopaedic Surgeon.

In summary, as a GP, I found the majority of chapters rather superficial and uninformative. I felt that it might be more appropriate for some of the professions allied to medicine e.g. health visitors, practice nurses or school nurses. It would not seem to be suitable for the majority of GPs who will have had some hospital training in paediatrics or for paediatric SHO's undergoing vocational training. I would probably consult an alternative text in the first instance if I needed to look up a paediatric topic. It did, however, have a few really good chapters, as discussed above and I would commend it to you for those particular subjects.

Maj R Sutcliffe RAMC (V)

Handbook of Disaster Medicine: Emergency Medicine in Mass Casualty Situations. J. De Boer and M Dubouloz (eds). Coronet Books 2000. HB. Pp 503. ISBN No. 90-6764-316-5 (VSP International Science Publishers) and ISBN No. 90-5805-010-6 (Van derWees).

In their introduction the editors describe how this book developed from the curriculum of the International Society of Disaster Medicine (ISDM). The ISDM was founded in 1970 and the Society's aims included promoting uniform guidelines in education and training for disaster medicine. The contributor list is impressive - spanning Europe, Australia and America and includes representatives from ICRC, SAMU and WHO. The book is divided into a number of sections covering Medical Care, Public Health, Disaster Management, Education and Training.

There is some very good material in this book but you have to work hard to find it.

The Medical Care section is difficult to follow. This may reflect problems with translation. For example, the chapter on Anaesthesia and Resuscitation refer to 'Sober' and 'Non-Sober' patients and how this influences anaesthetic technique but the context given is whether these patients

are fasted or not. The chapter on Communicable diseases is, however, well structured and practical.

The section on Public Health provides a back ground for understanding many of the issues involved in complex humanitarian emergencies and brings together information on nutrition, water requirements and epidemiology.

The section on Disaster Management is wide ranging including material as diverse as "Rehabilitation" to "EMS support of executive protection and counter terrorism operations". This section contains some valuable material on concepts, planning and definitions but the quality of chapters varies greatly.

There is some unusual material in the book that is not readily available in other publications. An example is the article on "Adapted surgical technologies under extreme field and/or disaster constraints in developing countries" by Bernd Domres. This includes use of wooden external fixators for fracture management, field autotransfusion and the intravenous coconut drip.

Although the title is "Handbook" this is more a reference text and would be a useful addition to military postgraduate libraries. The sections on Public Health and Disaster management will provide background information for people preparing for the DMCC examination or one of the MSc courses in Emergency Planning and disaster management. Much of the medical care section is less useful: training and reading in trauma management and resuscitation for members of the AMS is better addressed by the HA TLS and DSTS courses and manuals.

Maj PF Mahoney RAMC (V)
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General Practitioners Handbook - Second Edition. Norman Ellis and David Grantham. Radcliffe, 2000. £17.95. PB. Pp v + 203. ISBN No. 1-85775-408-9.

This book is a summary of some of the main non clinical areas of NHS General Practice. It is divided into 16 chapters and analyses a number of important issues. The topics covered vary from fees and allowances to employment law, Primary Care Trusts and Primary Care Groups, practice agreements, terms of service and more. At the beginning of the chapters there are clear directions of where to obtain further clarification or detail.

The book is well structured. It is clearly and concisely written. By the very nature of the subject matter, a book like this will tend to be rather dry - it is! This is unavoidable. It is, however, concise and much to its credit is under 200 pages, although it is all text and

no pictures.

Non clinical practice is a very significant part of being an NHS GP. You can be 'the best doctor in the world', but if you willingly or unwillingly cross the line as an employer, breach your terms of service, or don't read the small print of your practice agreement, you may well end up bankrupt or being struck off. This is an area that is generally poorly understood and poorly taught, mainly because the original documents like the 'Red Book' are so difficult to read and understand.

I think this is compulsory reading for registrars entering NHS practice. It is also a useful quick reference for those in the early stages of being a principal. It is also worth reading as a military doctor before an NHS practice attachment, or if you intend to sit the MRCGP examination.

Dr M Coombe
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A Short History of Neurology The British Contribution. F Clifford Rose. Butterworth-Heinemann 1999. £27.50. PB.Pp256. ISBN No.0-7506-4165-7.

The title of Rose's book is misleading. A collection of disjointed essays, it is not a history. Nor is it strictly British, with a chapter provided by two French neurologists and devoted to their country's contribution. There is no introduction by the editor to propose his thesis of what, indeed, the British contribution might have been. Nor in the end, does he attempt any conclusion from what he has collected.

The book opens on a promising note with an excellent piece on Thomas Willis. The chapter on the convergence of anatomy and pathology with its lengthy digressions on historic plates and illustrations would have benefited from the inclusion of some of these so that the reader could form his own opinion. There is an inexplicable chapter on book collecting. Another chapter, - reputedly a discussion of Hughlings Jackson and modern neuroscience, this reader found to be impenetrable theory, speculation, and jargon.

Curiously, Sir William Osler is not mentioned. The Editor has written some of the more delightful vignettes in his chapters on Fothergill, Whytt, and Charles Bell. A history of British neurology however, warrants a more considered testimony.

Col D Lounsbury MD FACP
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Neurology and Medicine RAC Hughes and GD Perkin. BMJ Books, 1999. £45.00. HB. Pp 430. ISBN No.0-7279-1224-0.

Criticism of medical-surgical specialisation has abated over the years as even the

strongest critics seem to have accepted this process as inevitable. Recently, neurology has also followed this trend. It is common, for example, to find practitioners who deal only with the problems of epilepsy, or stroke, or movement disorders. Increasingly the cost of this specialisation is lost time and study in general medical preparation. It is possible in the United States today to train in neurology with little or no prior hospital training in general (internal) medicine. Conversely, neurology continues to be the most frequent castaway of the busy general practitioner struggling to keep pace with the information age.

Hughes and Perkin succeed brilliantly in editing a clear, concise, and readable synopsis of the "borderland between neurology and general medicine". Both are British neurologists who edited the Journal of Neurology, Neuro-surgery, and Psychiatry. This book compiles a series of essays, each one devoted to a medical specialty and previously published in the journal. Every chapter is written by two authors: "one with a passport to travel in neurology and the other with credentials" in a medical specialty. Chapters are devoted to neurological aspects of: haematology (primarily coagulopathies and stroke), cardiology, the endocrinology of diabetes and the pituitary, gastroenterology, nephrology, hepatology, pulmonary medicine, dermatology, rheumatology and pregnancy.

Each chapter comprises a stand-alone review; but they are so carefully edited that the series as a whole reads as if it were written by a single author. The authors do not assume the reader has an extensive background in their field. The description of intravascular thrombus formation (a major cause of stroke) as the interplay among vascular endothelium, platelets, and the coagulation pathways is the best, and most concise, I have ever read. Pathophysiology is explained in sequence with its neurological implications. Thus malignant lymphomas are categorised prior to a discussion of peripheral and central nervous system involvement, the evolution of hepatic failure is described in tandem with its neurological sequelae. The always daunting challenge of polyendocrine pituitary disorders is presented in very clear format. Included is a discussion of "diagnostic pitfalls" where the patient presents atypically.

The plates in the dermatology chapter are entirely, and gratefully, in colour which is more than can be said for many modern dermatology texts.

Much of neurology is the neurological manifestation of systemic disease. Confronting the borderland of neurology and medicine has been attempted before in texts (some considerably heftier than this one), but never as successfully as in this

work. I was so impressed with this book that criticism is difficult. Though the editors are careful to define and limit the scope of their work, the protean manifestations of HIV infection will be found inadequately discussed by many readers. Nevertheless, the authors and editors have compiled a valuable contribution to "the battle to learn and keep up to date". The finished product is a textbook that is a pleasure to read and which should appeal equally to the specialist and the generalist in neurology and medicine. I hope their effort sees regular and timely updated editions.

Col D. Lounsbury, MD FACP
US Medical Liaison

Neurological Injury Critical Care Focus (3). Helen F Galley. BMJ 2000. £14.95. PB. Pp vii-61. ISBN No. 0-7279-1596-7.

Being the third in the series of books called 'Critical Care Focus', this one, dedicated to Neurological Injury is far from comprehensive in its coverage of neurological injury in its broadest sense. However, this should not be looked upon as a criticism since such a book would only become a good door-stop very quickly. As an introduction, especially for those moving into Neurology, Neurosurgery or Critical Care environments for the first time, it is very good. The chapters on head injury management, modern surgical and radiological treatment options for aneurysmal subarachnoid haemorrhage and its medical managements are very useful for those who only need to scratch the surface of these extremely difficult and contentious areas. It highlights contemporary thoughts on management, discusses areas of controversy and is authoritative in its content.

Overall, I feel that, at £14.95. it can be highly recommended as an introduction to this very complex field.

Maj N Buxton, FRCS(Ed)(Neuro.Surg),
RAMC(V)

Prescribing in Pregnancy Third Edition. Peter Rubin. BMJ 2000. £19.95. PB. Pp vii-198. ISBN No. 0-7279-1449-9.

The recently re-published and updated version of Prescribing in Pregnancy should be available to all that are likely to prescribe to women in the childbearing years. As well as providing excellent information on the direct effects of medication upon the mother and fetus, it provides guidance on the management of the common problems encountered in pregnancy. As an example the chapter on the treatment of minor and self-limiting conditions gives advice on the management of nausea and vomiting, heartburn, constipation and infestations.

Key points that are highlighted are to try non-drug treatments first, select which medication to use carefully and use the lowest dose for the shortest time possible.

The authors of the chapters have considerable knowledge and experience in their field. Topics include the use of anticoagulants, the treatment of cardiovascular disease, endocrine disease, epilepsy and anticonvulsant drugs, prescribing for the traveller and the use of drugs in breastfeeding. I was particularly interested in the chapter on the effect of drugs of abuse upon the mother and fetus.

Overall, Prescribing in Pregnancy is an excellent book. It provides background evidence and more advice than can be found in the British National Formulary and is to be highly recommended to all clinicians.

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Spotlight on General Practice: Preparing for the demands of clinical governance and revalidation. Sally Irvine and Hilary Haman. Radcliffe, 2001. £18.95. PB. Pp vii+222 ISBN No.1-8575-496-4.

Changes in the way people see their own health needs, and their regard for the professionals who try to meet those needs, have necessitated fundamental changes in the way health care should be delivered. This book specifically addresses the developments that will have the greatest influence upon general practitioners, namely managerially led clinical governance, and professionally led revalidation of doctors.

Professor Mike Pringle, Chairman of Council RCGP, acknowledges the authors in the foreword as experts in diagnosing and addressing dysfunction within general practice. Although initially surprising that neither author is medically qualified, this proves advantageous in allowing a balanced and dispassionate view of how general practice delivers patient care. The book concentrates on resolving the issues that could potentially hamper the effective integration of clinical governance and revalidation within a practice. Suggested approaches are drawn from lessons learned within real NHS practices, although many of the strategies would be equally applicable within DMS.

The 222-page soft back is easily readable, with especially useful summary boxes, examples of personal and practice development plans, bullet-pointed appendices and a comprehensive reference list. It provides encouragement that the current challenges facing general practitioners are by no means insurmountable, and it is very reassuring

that DMS already routinely implement some of the suggested strategies.

Professor Pringle describes this book as a "bible" for understanding how to develop a modern general practice, and who am I to disagree? I would add a cautionary note however. As this text is likely to prove invaluable for GP trainers, GP registrars, practice nurses and practice managers alike, perhaps your library needs more than one copy.

Sqn Ldr R Withnall RAF
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Statistics with confidence. Confidence intervals and statistical guidelines 2nd Edition. Douglas G Altman, David Machin, Trevor N Bryant, Martin J Gardner. *BMJ* 2000. £19.95. Pp viii – 240. ISBN No.0-7279-1375-1.

With increasing developments in medical research all medical staff need to be critically aware of research findings and their relevance to clinical practice. This publication is felt to provide an essential resource for the medical researcher undertaking quantitative studies.

This publication is a development from the successful first edition. Whilst the first edition primarily consisted of a variety of articles regarding statistical guidelines published in the *BMJ* over the period 1986 to 1988 this new and expanded edition makes substantial changes. The major change relates to the increasing general acceptance of *confidence intervals*. With quantitative research there has been an overemphasis on hypothesis testing and the use of *p values*. Whilst *P values* dichotomise results as significant or non-significant *confidence intervals* provide a more useful approach to interpreting study results. Many medical researchers should be interested in determining the size of difference of a measured outcome between groups, rather than a simple indication or whether or not it is statistically significant. *Confidence intervals* are relevant whenever an inference is to be made from study results to the wider world and they are useful in both large and small studies and where there is variability of the characteristics being studied. It should be stressed that the International Committee of Medical Journal Editors (1) now expects scientific papers to contain *confidence intervals* when appropriate.

The book encloses an excellent computer programme, Confidence Interval Analysis (CIA). This can run on Windows 95, 98 or NT and provides a tool for confidence interval calculations. It is very 'user friendly' and inherently draws on information in the book and allows the user to clearly work on 90%, 95% and 99% confidence levels.

It should be noted that although the

publication is not written as a general statistical textbook (there are already a number of good books available) it is an excellent resource for all quantitative medical researchers and is therefore highly recommended.

Maj DA Jenkins

(i) International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. *BMJ* 1988; **296**: 401-5.

Hunter's Diseases of Occupations. P. Baxter, PH Adams, T-C Aw, A Cockcroft & JM Harrington. Arnold, 1999. £155.00. Pp 1001. ISBN 0-340-67750-3

"Hunter" has held an affectionate place in the minds of British and Commonwealth occupational physicians since the first edition was published in 1955. After the eponymous author's death in 1978 a variety of distinguished editors have continued Donald Hunter's tradition of excellence (albeit in an altered format) and his marvellous blend of medicine, history and personal observation has been replaced with a series of more steely and objective editions.

The 9th is no exception to this trend. Its 44 chapters arranged in 11 sections show little overlap or repetition in their respective contents. The first section on occupational medical history and definition of occupational disease is completed by excellent chapters on hazard assessments and medico-legal considerations, all written by well known subject matter experts. As such this should be compulsory reading by all entrants into the specialty, GPs and SpRs alike.

Succeeding chapters well describe hazards encountered in the work environment e.g. under "Gases" the poorer health of anaesthetists as compared with other doctors is speculatively related to "job factors such as sustained mental stress, long hours or inadequate time to rest and eat", but the suicide rate in this speciality is shown not to be significantly different from that amongst doctors as a whole. Excellent chapters of particular relevance to the Armed Forces include "Welding, fumes & inhalational fevers" (McMillan), "Heat & Cold" (Howard Oakley), "Raised Barometric Pressure" (Elliott) and "Flying" (Gibson). Wide ranging and topical chapters on diseases related to ergonomic and mechanical factors, work and mental health and occupational lung disorders complement others on occupational diseases of the skin and occupational cancer. The sheer readability of all sections is a major selling point for this edition (as it was for previous ones) and the price should not deter those who require it as a standard

text on their bookshelves. As a recommended text for the Tri-Service Diploma in Occupational Medicine course it should therefore, in the opinion of this reviewer, be available in every Service medical centre. Its conclusion in form of the historical appendix by Carter on "Diseases of Occupations" is a model of compactness and a joy to read.

In any printed text there will be inevitable gaps as new knowledge and new occupational case law come into the public domain. Ideally one would like to see "Hunter" in a regularly updated, electronic format - although the necessary cash

injection - perhaps from an industrial or pharmaceutical foundation - to enable the publisher to do this may not easily be forthcoming. A final note - it is not generally remembered that Donald Hunter in his lifetime opposed the establishment of the Faculty of Occupational Medicine on the grounds that it would provide a haven on the premises of his Royal College for those who could not pass the MRCP. Any for whom this point is still important will therefore be mollified by the FRCP which appears after the names of the editors of the 9th edition.

NK Cooper