

BOOK REVIEWS

Good Health in the 21st Century: A family doctor's unconventional guide Carole Hungerford

This book has been written for a large target audience encompassing parents, patients and doctors resulting in a topical 'easy' read which is thought provoking rather than clinically educational. The subject matter addresses topical issues of the day encompassing medical progress, politics of health, mass food production, lifestyle and culture.

Initially, I thought this would be 'another' alternative remedies book continually questioning the medical model but it acknowledges all the benefits of evidence based medicine and addresses our current 'health' industry.

Good Health in the 21st Century is a thought provoking read, questioning policy, practice and future developments and how we address the rising incidences of asthma, depression, obesity and cancers with the prediction that the current generation will not outlive their parents.

Nothing here is new or rocket science but it will make you think – a medical coffee book read with some insight into our future development.

Major Sharon Beatty

The Complete MRCGP Study Guide: 2nd Ed Sarah Gear. Radcliffe Publishing 2006. ISBN No. 1-85775-780-7

Having sat the MRCGP examination at the end of 2005 it was a pleasure, in a perverse sort of way, to review a study guide covering every aspect of the membership assessment. I would perhaps discover where I could have made life easier for myself whilst studying. It was also refreshing to look at the MRCGP from another author's perspective; I had used six revision books for my attempt.

'The Complete MRCGP Study Guide' is split neatly in to three sections. The first covers up to date guidelines, clinical evidence and emerging research on common clinical cases seen in primary care. It is essentially a 'Hot Topics' section with quotable evidence for the written paper and assistance with the MCQ paper. The second section is dedicated to non-clinical aspects of modern primary care. This covers a range of topics including a brief history of general practice, consultation models and financial aspects of modern practice. Finally the third section of the guide looks at the four modules of the MRCGP examination.

The author admits in the 'How to use this Book Section' that no one volume can cover everything you need to know for the MRCGP. This is true but the title would lead you to believe this is that volume. In fact to successfully cover all parts of the MRCGP you would need to buy a separate MCQ question book and a text which covered critical appraisal style assessments. Sarah Gear pays only lip service to these two areas of study and offers no tips on the approach to answering such questions on the examination paper.

This is a good, clear, thoroughly researched and updated volume. However, I might suggest that the next edition is called 'The 'not quite' Complete MRCGP Study Guide' due to some areas of omission as detailed above.

In summary: although I believe separate text books are better

for the individual components of the MRCGP examination, I would still recommend this book as a starting point for registrars thinking about taking on the challenge of membership prior to the compulsory nMRCGP in 2008.

Deeper into Diving 2nd Ed. Lippmann J and Mitchell S 2005 pp 512. JL Publications, Melbourne Australia www.submarinerpublications.com UK Distributor: Underwater World Publications Ltd (www.divernet.com) £32.95 ISBN: 0-9752290-1-X

Although this is a well known diving text in Australasia it has perhaps not had the attention which should be its due in the Northern hemisphere. This is a pity as one author has a formidable grasp of the theoretical and practical aspects of modern diving, and the other is a diving and hyperbaric physician with an extensive record of "stretching the envelope" most notably in personally completing the world's deepest wreck dive (178m depth) in 2002. Both authors have extensive other publications to their name, and this book represents a distillation of their teaching on how to get the most out of diving, but always in a manner which ensures a safe return to shore.

The first of the book's four sections covers the biophysics and physiology of diving in a manner very familiar to JRAMC readers who have undertaken the SUM course at INM Alverstoke. However the second section on the development and application of dive tables as well as dive computers is both detailed and comprehensible. This is a subject where the book goes further than most diving medical texts, as the practical requirements of 21st century diving may be summarised as: "deeper, longer and least decompression time" – indeed this section is as good an explanation of what is sometimes a poorly taught set of topics as one will find anywhere.

The third section covers diving at altitude and is concise without sacrificing the detail necessary for planning a diving expedition at any height above sea level. More and more adventurous training expeditions with a scientific purpose take place under such conditions, and the fourth section on Technical Diving follows on well and comprehensively – both authors' personal contributions to this aspect of diving coming over admirably.

As a book on the practice of safe diving the title can be unreservedly recommended. It is not a diving medical text and thus should be in the medical library rather than on the personal bookshelf of the non-diving physician.

But for those with an interest of actually getting into and under water the relatively high price of the second edition is an investment well worth making as the contents cover areas of diving practice found in few other popular books on the subject.

As a medical educator I particularly liked the short pieces at the end on careers in diving medicine (physician, nurse, diving medical technician, hyperbaric technician ending with "get involved in research and education") culminating with: "*like diving itself establishing the path to such a career is an adventure with some obstacles that will need to be overcome.*" Doctors in the Armed Forces however have some of the best opportunities in this area at an early stage in their careers.

NK Cooper Lt Col RAMC

Treating Victims of Mass Disaster and Terrorism.
Housley J and Beutler LE 2007 pp vii +72. Hogrefe
& Huber £16.45 ISBN: 0-88937-321-3

This small book by a well known senior Clinical Psychologist (Beutler) and a Researcher (Housley) - the latter with experience of directing an extensive US Medical Reserve Corps research programme into appropriate psychological input for disaster response and trauma intervention measures - has a deceptively large amount of practical direction within its covers for the medical practitioner approaching the subject for the first time. In the Preface the authors freely admit that this volume represents but one approach towards the most effective and efficient means of assisting survivors of mass disasters which occur regularly in our present world; though military medical officers, amongst others, are likely to find themselves involved in providing relief to such patients whether the site of the disaster is local or else further afield, hence this book is relevant to them.

The flavour of the book can be gauged from its references to the Twin Towers disaster in New York which are both concise and relevant, as are the practical instructions for first on scene *personnel viz. "ensure that physical and safety needs (medical, shelter, food etc) are provided before addressing the emotional impacts of the trauma. Keep the initial focus on meeting basic needs and preserving stamina (p.36)."*

The methodology of psychological care described is American and the early emphasis on resilience, normal and common responses to traumatic events, rather than focussing on PTSD, is most welcome. Chapter 1 provides an excellent summary of some of the recent work in this area: epidemiology, course and prognosis including risk factors, diagnosis and differential diagnosis, but, once 'Principle-Driven Treatment and Assessment' is introduced the reader is easily distracted.

Fortunately, with very little effort, one arrives at the subsequent chapters where various models are discussed, and plenty of practical information is provided on diagnosis and treatment / intervention. All of this is relevant whatever model one is utilising, especially the pages on 'Things to do' and 'Things to avoid' (including CISD).

The authors follow the main body of information with reminders on the principles/core skills ('Field Smarts') driving their 3-stage model, and reinforce the axiom that to take care of others one has to take care of oneself. The two case vignettes have limited value when one considers the numerous potential presentations one could experience. The references and resources are useful, and an interested reader will no doubt want to access other material including the Psychological First Aid: Field Manual references.

For a concise text that is easy to read CTB would recommend this edition of *Advances in Psychotherapy to military mental health professionals* early in their careers; and NKC feels that for the Occupational Physician, and one would venture to say the military GP (all of whom have to practice Occupational Medicine in the military setting) plus every PGMO sitting the DMCC examination this text is a useful introduction to the problems and practicalities of psychological intervention following mass disasters or terrorist attacks. Certainly it should be available from the DMSD Library, although its American emphasis could rule it out of the personal booklist of many RAMC Medical Officers. Although the price might be thought a trifle expensive at just under £17.00 plus postage and packing for such a slim book, the physical size of this self-contained guide in itself might be its value.

This is a developing area, and we eagerly await the findings of the MOD study on Trauma Risk Management (TRIM), so for now access this title via a medical library.

The DMSD library service might consider saving a few pounds by subscribing to the series as there are a number of future titles which should also be worth a read namely *Problem and Pathological Gambling, Alcohol Problems, and Chronic Pain*, all of which are seen in the surgeries of military GPs and some of which are contracted by health care professionals as a direct result of trying to keep up to date.

CT Barker
Lt Col RAMC

NK Cooper
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