we preferred to allow a "free-hand" in presenting personal opinions . . . ' There is an undoubted need for a book aimed at the uninitiated that relates recent advances in gastrointestinal neurophysiology to clinical practice, but this, I fear, is not it; such a book will require more dictatorial editing than is evident here. In all fairness, I must emphasise that this book will be invaluable for those who have already acquired an interest in this field, and some familiarity with the terminology and concepts.

DAVID WINGATE

Management of abdominal hernias. By H B Devlin. (Pp. 221; illustrated; £60.) London: Butterworths, 1988.

If any one operation can be called a staple diet of the general surgeon, hernia repair must have strong claims for being that operation. The author, whose personal dedication to the task of trying to raise the standards of surgical management of abdominal hernias is well known, has written a book of scholarship, wisdom and flair into which he has managed to incorporate a mass of detail in a most digestible way. Just as in any other surgical field, it is the attention to detail that often makes the crucial difference between success and failure, and it is a measure of Mr Devlin's success that he manages to keep the detail interesting.

After an excellent historical introduction, there are 19 further chapters. Some have headings that are obviously expected; anatomy, principles, anaesthesia, and complications. Others are descriptions of the individual types of hernia including some rare forms such as the supravescical which this reviewer had never heard of! But there are also chapters which are less obvious and less commonly met with in a book about hernia. Particularly interesting were those on the logistics and economics of hernia repair and the diagnosis of a lump in the groin in an adult.

The illustrations are black and white shaded diagrams of a high level of clarity and accuracy, there are some interesting biographical notes, and a good set of references numbering nearly 700. The index is relatively brief but performed adequately on some testing.

For some years to come this will be a standby for references by all practising general surgeons and recommended reading for surgical trainees.

MICHAEL HOBBSLEY

Mainstream medicine: gastroenterology. Edited by P W Brunt, M S Losowsky and A E Read. (Pp. 382; £12.95.) London: Heinemann, 1988.

The hard pressed gastroenterologist may be forgiven for wondering why yet another book on gastroenterology has appeared on the market.

Inspection of the preface will perhaps explain why. The authors state that they are attempting to provide a quick overview of gastroenterology designed principally for examination candidates for the MRCP. Given that most readers of this journal will be far beyond this stage in their careers, the book will therefore be of little relevance to them personally.

Those wishing to recommend books to junior colleagues, or to brush up on very basic facts in gastroenterology might, however, be tempted to acquire the book. If they are so tempted what will they find?

The book is set out in a commendable way, with an attempt at an analysis of the important gastrointestinal symptoms in addition to the more classical organ based approach, but there is much repetition between the first problem orientated section and the second disease orientated section of the book.

The sections on the presentation and management of common conditions, whilst being a brave attempt at providing a guide to clinical problem solving, are, largely because of the constraints of space, rather too skeletal to be helpful. For example, the procedure for investigating a patient with diarrhoea is summarised by a list of possible investigations, without indication of the order of their performance or the utility of the information provided. This may be acceptable for MRCP Part I but will not help those with patient problems to solve.

The section on investigation of alimentary disease also suffers from being too scanty, again overcovering non-routine investigations without an explanation of their utility or current status in diagnosis.

The greater part of the book comprises a review of gut disease based on standard anatomically assigned regions and provides pretty standard information available in other books.

On the positive side, it is nice to see a chapter in the book on diet and gastrointestinal disease, but rather strange to see alcohol in this section as one of the essential dietary nutrients!

Overall, it is difficult to see that anyone will use this book other than as a crammer for MRCP. If the inclusion in the book of lists of procedures and diagnoses without explanation of importance, such as appendices 1 and 2, is justified on the basis of the nature of the current MRCP exam, it is surely time that the MRCP exam was changed!

If you need to take Part 1, MRCP (and my sympathies are with you if you do) you may be inclined to buy this book. If you have got beyond that stage in your career, you will undoubtedly find that other books provide you with more specific diagnostic help and disease orientated information.

D G THOMPSON