associated with parasympathetic autonomic neuropathy, which is, in turn, associated with accelerated gastric emptying. As the disease becomes chronic, we hypothesise that a sympathetic neuropathy occurs as well, which manifests itself as delayed gastric emptying.

The findings of Dumitrascu *et al* support this notion as their study shows that patients with chronic renal failure may have accelerated, normal, or delayed gastric emptying depending upon whether the parasympathetic or sympathetic nervous systems are involved. While their findings do not exactly parallel the findings of our study, their results do suggest that the autonomic nervous system has a variable influence on retarding or accelerating the rate of gastric emptying in either disorder.

T NOWAK
Department of Medicine,
University Hospital,
550 N University Blvd,
Room 2300, Indianapolis,
Indiana 46202-5000, USA

- 1 Dumitrascu DL, Barnert J, Kirschner T, Wienbeck M. Antral emptying of semisolid meal measured by real-time ultrasonography in chronic renal failure. *Dig Dis Sci* 1995; 40: 636-44.

BOOK REVIEWS

The History of Gastroenterology. Edited by P S Chen, T S Chen. (Pp 313; illustrated; £48). Carnforth: Parthenon Publishing, 1995. ISBN 1-85070-365-5.

Not only those who share Henry Ford's view of history might have somewhat negative feelings about this book. The title is astonishingly pretentious. Surely, if you are going to call your book *The History of Gastroenterology* (note: the first word here is the definite rather than indefinite article), you would be pretty committed to ensuring that the contents lived up to the expectations so engendered.

What we have on offer here is: a one page preface; 255 pages of reprints of selected joys from the gastroenterological literature; a 22 page chronology of our specialty from 30 000 BC to 1990; and a selected 16 page list of interesting publications. Surely, the very term history implies a narrative in which a series of events is recorded. This is a series of snapshots and, even if one was in a hurry (and history is emphatically not for those who feel that time moves at high velocity) the fare offered in this book would seem insubstantial.

I had rather hoped that the preface would have explained what this book was hoping to achieve. After outlining some of the reasons why gastroenterology has progressed in recent decades, the editors suggest 'When so much has happened a taking of stock is warranted. The appreciation of our present successes directs our attention for a backward look' (sic) If I have understood this correctly, the authors feel it is time to call a (temporary) halt to progress so we can look over our shoulder at where we are going. I think that is a strange justification for a history. Surely, the curious among us need no excuse to study the past and learn what lessons it may have for the present.

There are, however, some real treasures here. The opening quintet of essays relating to gastrointestinal physiology are by Baron, Wold, Davenport, Wingate, and Gregory – surely some of the most beautiful writers ever to have interested themselves in the human gut. Yet each of these is surpassed by Chris Booth whose piece on 'What has technology done to gastroenterology' is very possible the finest piece of writing ever to have graced the pages of this journal (*Gut* 1985; 26: 1088-94). This essay is required reading for those embarking on a career in clinical gastroenterology who may be tempted to the view that skills in fiberoptic endoscopy are somehow the end rather than the means to an end.

If you can live with this book's misnomer, you will find several further treasures. Find out that both Hippocrates and Aereates the Cappadocian may have described Crohn's disease before Christ (let alone Crohn). You can learn how Benevinius (1442-1502) described the features of ileus. He was also a physician to the Borgias so had plenty of time to study acute postprandial problems in their many guests who so frequently became fatally ill after a nice family meal. We have to move into the 18th century to learn how our colleagues of former time, Reaumur, Hunter, and Spallanzani worked out that the stomach secreted acid. They did, however, have some difficulty in determining the type of acid-phosphoric and lactic were prominent contenders before the right answer emerged.

Perhaps the most refreshing aspect of this book is that we are constantly reminded that we work in a specialty that is steeped in history and occasionally in antiquity. We spend so much of our time at the frontier between the present and the future, that is to say, between what is known and what is not known, that it is easy to overlook the lessons of the past.

IAN FORGACS

Liver Biopsy Interpretation (5th ed). By P J Scheuer, J H Lefkowitz. (Pp 315; illustrated; £50.00). London: W B Saunders, 1994.

For nearly 30 years, 'Scheuer' has been the pre-eminent bench book available to pathologists for help with the interpretation of liver biopsies. The first edition, which was published in 1968, set a standard that was very hard to follow. Although there is now a number of competitors in the field, Professor Scheuer has always maintained his position by judiciously publishing an ever better new edition every five years or so. This, the fifth edition, has perhaps undergone more changes than any other. Most importantly, Peter Scheuer has been joined as a coauthor by another distinguished hepatopathologist, Dr Jay Lefkowitz of Columbia University, New York.

The book is so well known, rightly described by Dame Shiela Sherlock in its foreword as the 'bible of liver biopsy interpretation', that the job of the reviewer is a little different from the traditional one. Here, readers will wish to know how it has changed, and if it is improved by those changes.

The book is now published by Saunders, as volume 31 in the *Major Problems in Pathology* series, and has taken on a new enlarged (B5) format. I was surprised to discover how much this change, together with the use of glossy paper, has improved the overall feel of the book. There are only a few more pages than in the fourth edition, but this one includes about

20% more illustrations and the number of colour pictures has trebled (now forming about one third in all). All of the photomicrographs have significantly increased in size, and many, using the same originals as in the previous addition, appear altogether clearer. As before, colour reproduction has been used mainly where it has clear advantages. The references are now shown in Vancouver style.

It remains strictly a bench book and does not attempt to compete with larger texts. The overall structure of the chapters is familiar to regular readers, but transplantation has now graduated to a chapter of its own, making 17 in all, and that on electron microscopy has been expanded by the inclusion of other new techniques such as PCR and in situ hybridisation. The text remains as concise and to the point as one has come to expect and the references are extraordinarily up to date, a large proportion having been published since the fourth edition. As before, each chapter also includes a valuable list of general reading. Although every section has been revised to a greater or lesser extent, those fields where advances have been greatest since 1988, for example in hepatitis and transplantation, have seen the most change.

In conclusion, yes, the fifth edition is even better than the fourth. This remains the best and most authoritative manual on the interpretation of liver biopsies, as well as being highly competitively priced. It is a must for anyone involved in liver biopsy diagnosis.

D G D WIGHT

Physiological and Clinical Aspects of Short Chain Fatty Acids. Edited by J H Cummings, J L Rombeau, T Sakata. (Pp 575; illustrated; £85). Cambridge: Cambridge University Press, 1995. ISBN 0-521-44048-3.

Fatty acids are the major product of bacterial fermentation of dietary carbohydrates in the gastrointestinal tract, and constitute the route through which energy can be extracted from carbohydrate and protein that is not digested and absorbed in the small intestine. Research suggests that they may protect against large bowel disease and may also exert a modulatory role in the control of blood sugar and cholesterol. This book is the first comprehensive volume to look at the importance of the production of short chain fatty acids and the metabolism and health of humans and other animals. It literally contains all you ever wanted to know about short chain fatty acids but were too scared to ask and contains contributions by almost everybody who is anybody in this area ranging from biochemists through rumen and colonic physiologists, nutritionists to clinicians. This work is like a rare plant adapted for certain specialist grazers and browsers. It is not a book for the generalist. Although certain aspects are vitally important it will appeal only to those curious scientists and physicians who have ever looked up from their endoscopes to speculate on the multifarious roles of the teeming billions of colonic bacteria.

Women may have been the dark continent for Freud, but the gastroenterologist's dark continent is the colon; we can only but guess at the variety of its functions and marvel at its adaptability. The colon works in series with the liver to metabolise almost every organic molecule that the body might be exposed to. It uses anaerobic and reductive mechanisms to breakdown complex macromolecules while