BOOK REVIEW

A Diagnostic Guide to Clinical Gastroenterology. Edited by D Kumar, J Christensen. (Pp 468; illustrated; £60.) Churchill Livingstone, 1996. ISBN 0-44-3051305.

'The gloved finger coated with lubricant (an anaesthetic lubricant in patients with much inflammation) is passed slowly and gently, the examiner sliding it in an arc curving over the perineal body'. The art of medicine is not yet dead, not at least in the hands of, or more correctly at the finger tip of, Professor James Christensen, joint editor and one of the 21 contributors to this Anglo-American collaboration.

Professor Christensen's opening chapter 'Clinical History and Examination' is a timely reiteration of the clinical methods we were or should have been taught as undergraduates. He reminds us of what the initial clinical interview can and should achieve, not only in terms of information gathered but of equal importance the building of rapport and confidence. This chapter is the prelude to the first section of the book, which reviews the tests and techniques currently available including those in the areas of imaging, endoscopy, nutritional assessment, pH measurements, and manometry.

All are lucidly written containing sound practical advice and more than adequately backed by references and recommendations for further reading. But why do those writing

about the introduction of the endoscope perpetuate the notion that a patient can swallow the instrument. I would ask Professors Christensen and Summers to attempt swallowing with a mouth piece between their incisor teeth.

For me the star of this section is the chapter entitled 'Laparoscopic Surgery', which deals mainly with the diagnostic applications of this technique. In Britain but perhaps not elsewhere the advance of therapeutic laparoscopy has overshadowed the diagnostic potential of the laparoscope. Soper and Jones provide a balanced and global review of its role in the management of many common abdominal problems including liver disease, ascites, malignancy, trauma and pain, comparing its often favourable sensitivity to CT and MR scanning.

Despite the general acceptance that psychological factors are often of major importance in digestive tract disease, only a minority of gastroenterologists routinely attempt to assess or measure objectively the psychological status of their patients. In the final chapter of this first section entitled 'Psychological Measurement', Burnett and Whitehead persuasively discuss why we should do so more frequently. They review the value and relevance of the wide range of inventorial instruments available for assessing quality of life and the detection and measurement of psychological distress, affective, personality and cognitive disorders, making practical suggestions for their application in clinical gastroenterology.

The second section, which aims to guide the clinician in the appropriate application of these methods and techniques to everyday gastrointestinal disease presentations, including chest pain, dyspepsia, abdominal pain, disturbed bowel function, rectal bleeding and jaundice, covers these areas in conventional fashion.

Many contributors in addition to examining the indications for positive investigation, fully discuss those situations when further investigation is likely to be inappropriate or unrewarding. For this I assume it can be inferred that the majority are therefore practising clinicians fully cognisant of the constraints imposed by their respective health services.

The text is complemented by radiographs, line drawings, figures, summary boxes, and photographs, many in colour, all of which contribute to the success of the book, which will undoubtedly provide a valuable resource for the preparation of lectures and clinical presentations. In addition it will aid the construction of management guidelines, the current thirst for which seems to be inexhaustible.

M J LANCASTER SMITH

NOTE

Abdominal imaging

A course on abdominal imaging will be held at Jackson Hole, Wyoming, Grand Teton National Park, USA, on 30 June–4 July 1997. Further information from: Janice Ford Benner, University of Pennsylvania Medical Center, 3400 Spruce Street, 1 Silverstein Building, Philadelphia, PA 19104, USA. Tel: 215 662 6904; Fax: 215 349 5925.