

Notes and activities

BSG Research Award 1981

A three page summary of personal research work is invited by the Research Committee who will recommend to Council the recipient of the award for 1981. A bibliography may also be submitted if desired. The award consists of a medal and £100 prize. Entrants must be 40 years or less (on 31 December 1981) but need not be a member of the BSG. All (or a substantial part) of the work must have been performed in the UK or Eire. The recipient will be required to deliver a 40 minute lecture at the Plenary Session of the Spring meeting in 1982. Applications (six copies) should be made to: The Honorary Secretary, BSG, The Rayne Institute, 5 University Street, London WC1E 6JJ, by 1 November 1981.

Hopkins Endoscopy Prize

The Hopkins Endoscopy Prize will be awarded annually at the Spring Meeting of the British Society of Gastroenterology on the recommendation of the Endoscopy Committee. The prize will consist of a cheque and a permanent memento. The prize will be awarded for the best essay on a technical innovation in the field of endoscopy, or a new method using existing endoscopic equipment. Entries for the 1982 prize are invited, and should be submitted to the Secretary of the Endoscopy Committee, BSG Secretariat, The Rayne Institute, 5 University Street, London WC1N 6JJ, before 1 January 1982.

7th International Intensive Course in Abdominal Ultrasound

This course will be held at Besançon, France, 14-16 April 1982. Details from Cours US, Secretariat, Département de Radiologie Viscérale (Professor Francis Weill), 2 Place St Jacques Chu Besançon 25000, France.

Third International Symposium on Gastroenterology

This symposium will be held at Bolzano, Italy, 9-10 October 1981. Details from Department of Gastroenterology, General Regional Hospital, 1-39100 Bolzano, Italy.

Books

Secretary Diarrhea Edited by M Field, John S Fordtran, and Stanley G Schultz. (Pp. 227. Illustrated. \$36'00.) American Physiology Society: Bethesda, Md. 1980.

This series of reviews, written almost entirely by the leading investigators in the United States of America, is an erudite and well-produced update on the mechanisms, control, and pharmacotherapy of intestinal secretion. It is a book for the super-specialist. Transport physiologists and clinical investigators interested in the mechanisms of intestinal secretion will find it stimulating and thoroughly good value, even though it is now some three years out of date. The chapters on isolated brush border vesicles by Murer, the pharmacological approaches to secretory diarrhoea by Powell and Field, and factors affecting pathogenic colonisation by Moon contained much that was, for me, new and fascinating. The enthusiastic amateur, on the other hand, may have difficulty in gaining a clear impression of some of the concepts discussed because of differences in emphasis and interpretation among the different authors. For example, Schultz does not discuss the possible role of ion exchange (Na:H and Cl:HCO_3) in small intestinal transport, although this is mentioned in chapter 15 by Powell and Field. The role of calmodulin in mediating secretion induced by cyclic AMP and calcium entry is omitted by Field in his chapter on the regulation of small intestinal ion transport by cyclic nucleotides and calcium, but included in the chapter on the pharmacological approaches to the treatment of secretory diarrhoea, written jointly by Powell and Field. Finally, Schlatz and Kimberg discuss cyclic GMP in relation to ion absorption, whereas Field suggests that it may mediate secretion. These differences in emphasis and the evidence for them make the book interesting to the expert, but possibly confusing for the amateur. The practising clinician may find the sections on non-infectious causes of secretory diarrhoea and its treatment particularly interesting and useful. Nevertheless, the book does not provide a practical guide on how to investigate most of the diarrhoea problems he will encounter. Secretary diar-

rhoea as defined by Gardner in chapter 12 constitutes only a very small proportion of the diarrhoea problems referred to the gastroenterologist.

N W READ

Progress in Medical Genetics Volume IV Genetics of Gastrointestinal Disease (New series) Edited by A G Steinberg, A G Bearn, A G Motulsky, and Barton Childs. (Pp. 255; Illustrated. £23.) W B Saunders: Philadelphia. 1980.

This volume is timely, as it is eight years since the last book on this subject was published. Six conditions are reviewed: peptic ulcer, familial polyposis coli, hereditary hyperbilirubinaemias, haemochromatosis, the hepatic porphyrias, and diabetes mellitus. The main theme is that clinical entities have more than one genetic basis. This splitting of a disease might be expected to lead to improvement in treatment as well as more accurate genetic counselling.

To the clinical gastroenterologist the most useful sections are Dr Jerome Rotter's account of the division of duodenal ulcer into two types—the 50% who have the hyperpepsinogaemia gene and the associated hyperchlorhydria and the other half who are normopepsinogaemic and have normal maximal acid outputs, and Barton Childs's description of the genetic bases of Gilbert's syndrome. At least three different genetic defects have already been shown to result in this type of hyperbilirubinaemia, the clinical importance of which may be its contribution to the severity of other liver conditions.

Those struggling to understand the relationship between HLA and coeliac disease or chronic infective hepatitis will find useful the discussions on HLA associations in the chapters on haemochromatosis and diabetes. I found useful the description of the clinical aspects of each of the hepatic porphyrias.

The best chapter is that by Edmond Murphy and Ann Krush on polyposis coli and any physician or surgeon concerned with the management of a polyposis family will benefit from reading its clinical sections, though they may not agree with the opinion that barium enema is a more sensitive screening test than colonoscopy.

R B MCCONNELL