

## Correspondence

### Diagnosis of oesophageal spasm by ergometrine provocation

Sir,

We have recently published our findings on oesophageal spasm and the value of ergometrine provocation in its diagnosis (*Gut* 1982; 23: 89–97). We misquoted figures from Buxton's study and reported three patients who died with coronary artery spasm after a dose of ergometrine which was 0.17 mg and not 1.7 mg as stated in our paper. Our recommendation, however, to give 0.5 mg of ergometrine is safe provided that the screening criteria are followed. These should include a normal 12-lead ECG obtained during spontaneous chest pain, and resuscitative facilities should be available during the ergometrine test. Responses to small doses of ergometrine – 0.05 mg should first be assessed and after five minutes, incremental doses can then be given.

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stomach (I L Taylor), GI hormones (Chey and Rominger), extraintestinal manifestations of GI disease (Kraft and Wang), GI surgery (Den Besten, Doty and Pitt) and nutrition (Baker and Jeejeebhoy) are clear, useful summaries. As might be expected the chapters are very well referenced (many having over 200 and, one, over 400) and the majority are from the year in question, 1979–1980. Therein, of course, lies the problem. The book was published in 1982 (I received it in the same week in which I saw the review of volume 1), no doubt this review will appear in 1983, yet the volume is concerned with the literature of 1980. If gastroenterology advances at such a pace that an annual of this type is out date on publication then its appeal must be limited. I do not believe, however, that the field advances so rapidly and this leaves us with the question of whether intervals of 12 months between issues is too short.

I can commend the book as a good series of helpful reviews of several aspects of gastroenterology in 1980, which, by and large, is not too far off the 'current' state of the art.

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**Radiology of the small bowel. Modern enteroclysis technique and atlas** By J L Sellink and R E Miller. (Pp. 485; illustrated; \$54.50, Dfl.125.00). The Hague: Martinus Nijhoff, 1982.

The first edition of this book was published in 1976 with Dr Sellink as the sole author. During subsequent years close collaboration with Professor Miller, Chief of Gastro-Intestinal Radiology at the Indiana School of Medicine, led to the decision to publish this second edition under their joint authorship. The main changes from the first edition are the adaptation of certain terminology to that commonly used in the USA, the addition of a chapter devoted to the use of the enteroclysis technique in children, and some expansion of the chapters devoted to the pathology of the small intestine.

After short chapters on the anatomy and physiology of the small intestine there is an interesting account of the various contrast media used in small bowel examinations, including a well-argued description of the fate of these media during their passage down the gut, and the relationship between these changes and the accuracy of the resulting examination. This is followed by chapters on methods of examination including a very detailed account of the authors own technique of enteroclysis, an examination generally known in the UK as a small bowel enema. Subsequent chapters deal with the basic signs of abnormality, inflam-

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## Books

**Current gastroenterology.** Vol. 2. Edited by G L Gitnick. (Pp. 546; illustrated; £44.50). Chichester, Sussex: Wiley, 1982.

This is the second volume of a series of books which it is the author's intention to see published annually. This laudable aim is to assimilate advances made in gastroenterology in each 12 months' period for clinicians and basic scientists. Dr Gitnick has gathered a group of experts to review their own particular fields of interest, to summarise the year's literature and assess any advances made. Undoubtedly, the writers, all from the North American continent, are well chosen and apparently each chapter has been subject to peer review.

We have excellent reviews from Di Magno and Go on the pancreas, Sachar and Walfish on Crohn's disease and ulcerative colitis, Snape, Battle and Ouyang on the colon, Hollander and Weinstein on the small intestine, Ramming on GI cancer and Morrissey, Browning, and Reichelderfer on endoscopy. Chapters on the oesophagus (Winans),