patients who have to have stomas often receive little attention and advice. Therefore it is timely that an edition of *Clinics in gastroenterology* should be devoted entirely to stomas and their care. The editors have planned their edition wisely and have produced a very attractive table of contents, including such important appendices as details about international ostomy associations and the list of manufacturers of ostomy aids.

When there are 23 contributors on a relatively small subject repetition is inevitable. There are 10 nurses or nurse/stoma therapists all contributing on minor variations of the main stoma theme and so repetition makes the nursing sections rather tedious, particularly if they are read consecutively. In general the chapters by the surgeons are better written and scientifically more valid than those by the nurses. I do not wish to appear carping or chauvinistic, but I was struck by this difference in almost all the sections. Presumably the surgeons have very much more experience in writing and in having their views criticised than do the nurses. Most of the nursing section are reminiscent of articles written for stoma association news letters rather than for scientific journals. In the section on the sexual implications of stoma surgery the first chapter by a surgeon is well written, sensitive and extremely helpful. The second section by a nurse/stoma therapist adds nothing to the preceding chapter and could well have been omitted. The nurses also present some information that, I feel needs editorial comment. One of the nurse/enterostomal therapists appears to recognise a stoma called a 'wet colostomy'. In this, one or both ureters is implanted into a colostomy. She says 'The colon then drains faeces and urine giving a liquid output; this produces problems in management such as leakage and odour'. One would hope that such stomas are never created anywhere in the world. If they are, the editors should have commissioned a special chapter telling surgeons which stomas should never be performed including 'wet colostomies'! I think that the editors should make it clear that whenever it is necessary to divert urine and colonic faeces, this must be done separately with a 'dry colostomy' and a separate urinary conduit with an everted stoma to which a urostomy appliance can be stuck.

In another chapter a nurse/stoma therapist tells us about squamous metaplasia, which is the encroachment of epithelial cells onto the stomal mucosa. She says that this condition resolves in the presence of antibiotics, but relapses when they are withdrawn. For severe metaplasia she says that 'penicillin 200-250 mg may be prescribed twice daily; once started this treatment must be continued

permanently'. I find this a fascinating concept and, if it is true, would be most interested to know the mechanisms involved. If there is published scientific evidence on this subject then the appropriate reference ought to be cited. On the other hand, if it is an unsubstantiated opinion, the editors should have insisted on this being made clear.

I have read and re-read sections of this book with great interest and profit. If I criticise it as being only good in parts, the good parts are very good and overall it is well worth buying.

JOHN ALEXANDER-WILLIAMS

Drugs and appetite Edited by T Silverstone. (Pp. 187; illustrated; £14.20). London: Academic Press. 1982.

I found this a useful little book, editorially tight, with a good team of 10 contributors. There is inevitably some artificiality in separating out the mechanisms of food intake and its regulation by drugs from the larger issue of energy balance and also the influence of such factors as food on intake. Nevertheless, within these clear limits the book contains excellent up-to-date reviews of research and concepts by Smith on the effect of food intake on feeding, and by Blundell on the behavioural pharmacological approach. The editor weighs in with excellent reviews of recent attempts to measure hunger in the human experiment and of the clinical pharmacology of appetite. Those interested in treating obesity with drugs will also value the cautionary and realistic chapter on this subject. Szmukler takes on the daunting task of reviewing the drug treatment possibilities for anorexia nervosa and does it competently. I was disappointed to learn that there is not yet a drug that is specific for the pathological desire to slim which seems to be at the heart of the condition!

The book is well-introduced and indexed, and provides some good bibliographies.

A H CRISP

Kidney disease: 3 Hepatorenal disorders By S P Wilkinson. (Pp. 208; illustrated; SFr98.) New York: Marcel Dekker, 1982.

The title of this book might encourage potential readers who are neither nephrologists nor hepatologists to hope that it might clear the fog surrounding the term 'hepatorenal syndrome'. The author does this by disposing of the term altogether and attempting to classify the cause and different types of renal failure seen in liver disease. Though this task is completely achieved, the murk remains,