after two months. In the more severe patients, even though the acid levels were still low after two months, they showed a significant increase over the convalescent levels. These observations clearly suggest that hypochlorhydria in typhoid patients was secondary to infection and not a primary defect. Secondly, regarding the role of fever in causing hypochlorhydria, a prolonged suppressive effect of high body temperature on acid secretion has never been demonstrated. Studies in experimental animals have shown a transient hypochlorhydria which recovers completely within a short time of 24 hours or so. As we measured the acid output one week after the fever had subsided in both typhoid as well as non-typhoid patients, it is very unlikely that fever could have contributed significantly to hypochlorhydria.

Superficial gastritis was present in only seven out of 27 patients which is the same as that found in the normal healthy Indian population. Besides, there was no correlation between the severity of typhoid fever and the presence of gastritis. Therefore, it seems highly unlikely that superficial gastritis could be an important factor in causing hypochlorhydria. The aetiology of gastritis, however, is unclear, whether it is because of typhoid infection or any other secondary bacterial invasion is purely speculative.

J C VII, B S ANAND, AND H K CHUTTANI
Department of Gastroenterology,
G G Pant Hospital,
New Delhi, India.

References

3 Tyagi KP, Mukhopadhyay AK, Aggarwal HK et al. Gastric mucosal morphology in tropics and influence of spices, tea and smoking. Nutr Metab 1974; 17: 129–35.

Books


Current opinion in gastroenterology. Volume 1, Number 1: Large intestine and gastrointestinal infections Bimonthly review, (Pp. 120 per issue, not illustrated; £10.00, or £25.00 for six issues.) London: Gower Academic Journals, 1985.

In an era when institutional libraries have less to spend on journal subscriptions, it is getting harder to keep up with the ever increasing volume of published papers in our subspecialty. Lists of papers by title, as in Current contents or in the computer data-bases, are of limited value; they are uncrítica, and only useful if there is access to the journals themselves. Two recent publications seek to overcome these problems by offering a critical evaluation of the published literature of the preceding year.

Two distinguished Americans, Frank Moody and Norton Greenberger reviewed 10 000 papers from 250 journals, and from these made a selection of about 200 papers from 50 journals. These are summarised in the Year book of digestive diseases, arranged under appropriate subject headings. The summaries are lengthy and often include diagrams and tables from the original paper; they contain the substance of the paper and only the detail is omitted. Each summary, moreover, is followed by a commentary from one of the editors; these commentaries are stimulating, provocative, and thoughtful as might be expected from these two men. The book does not cover basic science related to gastroenterology and is presumably aimed at those whose interests are strictly clinical. It is perhaps surprising that all the papers that were finally selected come from North American or British journals (with one exception: the European Journal of Physiology is represented even though its British and American counterparts are not.) Does this imply that there were no memorable papers in journals from Europe, Japan, etc?

Current opinion in gastroenterology is a bimonthly review journal. Each issue covers two main topics, and a number of reviews by different authors are included under each topic. Each review carries a selection of references, annotated by the author, and often indicated as being either of 'specialist interest' or, rarely, of 'outstanding interest'. The annotations vary from critical mini-summaries to single sentences. Each of the two main sections concludes with a more extensive list of references which includes those selected by each reviewer. The contributors to this issue – who, despite an international editorial board, are all from the UK – tend to lack the authority of their American counterparts, and some of the reviews are somewhat leaden. Editorial policy on annotation of references needs to be more consistent, and we should be told whether we can regard the main list of references as complete, and if not, the criteria for selection. On the credit side, basic as well as clinical science is
Books


This volume, the fifth in the series Contemporary issues in gastroenterology, contains eight chapters. After an introductory chapter on peptides of the gastrointestinal tract by Francesco Carlei, Stephen Bloom, and Julia Polak there are five chapters on individual types of hormone secreting tumour covering Zollinger-Ellison syndrome, glucagonoma, somatostatinoma, VIPoma and miscellaneous tumours. Finally there are chapters on chemotherapy and on the surgical approach to such tumours. There are signs of some laxity in editorial control, with variation in the form and content of the different chapters, and a degree of overlap in some areas, notably the management of Zollinger-Ellison syndrome. This can lead to confusion, as the approach to the patient with Zollinger-Ellison syndrome described in chapter 2 appears to differ from that described in chapter 8. The differences in the text are not helped by what appears to be a faulty flow chart in chapter 2 which suggests that if the primary tumour is not found at laparotomy it should then be excised conservatively. It is hard to judge exactly what has gone wrong, but probably the two main sections of the flow chart have somehow become interposed, with nonsensical results. This may be a printing error, as there are quite a lot of misprints scattered around in the book.

The introductory chapter is as excellent as its authors would lead us to expect, and is beautifully illustrated. One might quarrel with the authors’ loyal defence of their continued use of the APUD cell concept and its unfortunate derivative term APUDoma, when many people are moving away from the use of these terms, recognising that although they have had historical usefulness in drawing attention to the similarity of endocrine and other cells, the term is inaccurate and no longer as necessary or helpful as it was a few years ago.

It is a shame about the erroneous summary of suggested treatment for Zollinger-Ellison syndrome, as chapter 2 is otherwise both comprehensive and impressive. Those chapters on glucagonoma, somatostatinoma and VIPoma are all perfectly straightforward and good accounts of their topics. Chapter 6 is probably surplus to requirements in this book, not being concerned with particular tumour syndromes, and really repeating a lot of what is discussed elsewhere on endocrine cells and their tumours in general. It might perhaps have been better to use the space for other topics such as insulinoma or carcinoid tumours, both of which are so much commoner than other types of endocrine cell tumours of the gut. The chemotherapy chapter in fact only deals with insulinoma and carcinoid tumours, so these are covered at least from the point of view of chemotherapy, although other endocrine tumours are not. Similarly the chapter on the surgical approach deals more with insulinomas and carcinoid tumours than with others.

Gastrointestinal endocrinology is a curious subject. It is fascinating and still advancing rapidly, so books such as this are helpful in keeping the clinicians, at whom it is aimed, up to date. The vast majority of clinicians, however, are unlikely to have to deal with more than a handful of patients suffering from conditions described in it during the whole of their working lifetime. Overall this is a well written and well produced volume, but I think it is another one to refer to in the library rather than to buy it for one’s own collection.

RICHARD F HARVEY


This book comprises individual chapters on the ‘major’ minerals (calcium, magnesium, iron) and some trace minerals (zinc, copper, selenium, chromium), with a final chapter devoted to manganese and the ‘ultratrace’ minerals (molybdenum, vanadium, nickel, silicon, arsenic). Each mineral is allocated space on the basis of what is known about it with the exception of zinc, which is covered in excessive detail.

There is no doubt that books like this fulfil a useful role by gathering together information on a circumscribed topic. Some of the chapters are good, notably that on iron. The book is not, however, a