diagnosis of the acutely painful abdomen that is all too often left to the most inexperienced at the most inconvenient times.

C G CLARK

Atlas of gastrointestinal endoscopy By Fred E Silverstein and Guido N J Tytgat. (12 chapters; illustrated; £79.95.) Edinburgh: Churchill Livingstone, 1987.

This Atlas comprises a foreword by Professor Kurt J Isselbacher, a preface, acknowledgements, 12 chapters, a bibliography, a list of suggested readings and an index. The pagination is by individual chapter, and (to me) a confusing convention. There is a lavish number of colour photographs of endoscopic appearances, usually of excellent quality but occasionally inaccurate in their colour rendering. Each photograph is accompanied by a descriptive text and often by clear, well labelled line drawings. There are, in addition, occasional diagrams – for example, to explain points of anatomy, some Tables to amplify textual points and a small number of radiographs and ultrasonographs. In addition, there is the running text of each chapter. The text is not referenced but the list of sources under suggested readings is up to date and useful.

The purpose and value of an atlas is in the mind and the eye of the user. How much background knowledge does the author expect of his readers? In this instance there is plenty for the novice and the expert. Should an atlas include much basic anatomy? I think too much has been included. Should technique be discussed and if so in how much detail? There are other excellent guides to the techniques of endoscopy. An atlas is not, in my opinion, the best vehicle. Are a list of causes of a disorder – for example, acute upper gastrointestinal bleeding, and a discussion on management, proper to an atlas? I feel the authors have included some superfluous matter in this respect. Does therapeutic endoscopy require special treatment in an atlas or should it merely be referred to en passant as appropriate? I would have welcomed greater emphasis being given to endoscopic therapy. How many radiographs and especially appearances at ERCP should properly be included? Some authors have attempted to present radiographic, endoscopic and histopathological appearances under the same covers. This is not always successful. I do feel, however, that there is a paucity of radiographs in this atlas.

It is my impression that Fred Silverstein and Guido Tytgat have spread the butter widely, but occasionally a little thinly. The core contents of the atlas, the endoscopic photographs, are however of high quality and in this respect the authors have achieved their stated objective '... to provide an organised series of

photographs documenting the appearance of gastrointestinal organs in health and disease'. There is an increasing number of atlases of endoscopy available and the requirements of readers will vary. All such atlases are expensive. Go to the bookshop, compare and contrast. But there ought to be at least one on your shelf and in your unit.

K F R SCHILLER

Current gastroenterology Edited by G Gitnick. (Pp. 429; illustrated; £55.00.) Edinburgh: Churchill Livingstone, 1987.

Current Gastroenterology, in the words of its editor, aims to distill from a vast body of information material that is practical and pertinent to the modern gastroenterologist. With over 20 contributors, the book contains seven chapters on the oesophagus, stomach, small intestine, colon, pancreas, gastrointestinal cancer and endoscopy. There is a final section derived from papers presented at a University of Chicago Symposium on Inflammatory Bowel Disease to honour and commemorate the contributions made by Dr Joseph B Kirsner.

The chapters on oesophagus and stomach review more than 300 references (predominantly of material published between 1985–6) which emphasise continuing preoccupations with the nature and treatment of gastrooesophageal reflux and ulcer disease. The pathogenesis of these common, and often troublesome, conditions is still not well understood. Despite such an extensive literature, it is a sobering thought that newer therapies are scarcely better than a good old dose of antacids, which is only just superior to placebo in effect. The role of the latest oral prostaglandin derivatives is also reviewed.

Coverage of the small intestine and colon extends to approximately 130 text pages, and encompasses almost 300 references. A considerable amount of text is devoted to Crohn's disease, its pathogenesis, diagnosis, and management. Levitt's amusing review of the immunological aspects of inflammatory bowel disease helped to maintain a balanced perspective, especially as papers on this aspect of colonic inflammatory disease have now reached pandemic proportions. I liked this chapter most because of its thorough critical approach, and its coverage of colon cancers, polyps and tumour markers was particularly welcome and effectively presented. Clearly all is not gas (or hot air) when Dr Levitt wields his pen. The succeeding chapters on gastrointestinal cancer and endoscopy provide compact overviews, although some material appeared in preceding chapters thus leading to repetitiveness.

Overall, this volume succeeds in providing an extremely wide, if somewhat superficial, coverage of the mainstream scope of gastroenterology. As the