

report by Shorrock *et al*³ who, although observing a stimulatory effect of De-Nol *in vitro*, failed to detect a similar increase in HCO₃ secretion in man. In Konturek's paper² significant results were obtained with drug concentrations of at least 10 mg/ml, but in Shorrock's experiment 10 mg/ml was still an ineffective dose.

We have recently treated 10 patients with endoscopic duodenitis (but devoid of gastric abnormalities and with normal basal values of bicarbonate secretion) with De-Nol 600 mg bid for four weeks. Basal alkaline secretion was determined, by Feldman's method, before treatment and 10 hours after the last dose of the drug. No significant changes in gastric bicarbonate output was observed.

A comparison of our results with Konturek's and Shorrock's findings seems to indicate that the stimulatory activity (if any) of therapeutic doses of De-Nol on gastric alkaline secretion in man is transient. Thus, as stated by Rees,⁴ this effect appears to have little relevance to the ulcer healing properties of colloidal bismuth.

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References

- 1 Konturek SJ, Kwiczen N, Obtulowicz W, *et al*. Vagal cholinergic control of gastric alkaline secretion in normal subjects and duodenal ulcer patients. *Gut* 1987; **28**: 739-44.
- 2 Konturek SJ, Bilski J, Kwiczen N, Obtulowicz W, Kopp B, Oleksy J. De-Nol stimulates gastric and duodenal alkaline secretion through prostaglandin dependent mechanism. *Gut* 1987; **28**: 1557-63.
- 3 Shorrock CJ, Crampton J, Gibbons L, Rees WDW. Effect of bismuth subcitrate on gastric bicarbonate secretion *in vitro* and in man [Abstract]. *Gut* 1987; **28**: A1342.
- 4 Rees WDW. Mucus-bicarbonate barrier-shield or sieve. *Gut* 1987; **28**: 1553-6.

Book reviews

Manual of gastroenterologic procedures. 2nd ed. Edited by D A Drossman. (Pp. 266; illustrated; \$23.50.) New York: Raven Press, 1987.

This short book from the University of North Carolina Medical School aims to provide a guide to the indications, contra-indications, preparation, equipment, techniques and complications of the most commonly performed gastroenterological procedures. After a chapter on how to organise a gastrointestinal procedure unit, about 35 techniques are

concisely described under the headings tubes, endoscopy, needles, therapeutic procedures and procedures for paediatric patients. The text is clearly laid out, largely in note form, pertinently referenced and ring bound.

Unfortunately, as the editor acknowledges, the value of this as of any other compendium of clinical procedures is compromised by the impracticability of learning many techniques other than by apprenticeship, and by the inability of the instructions provided to take account of more recent methodological improvements or of differences in practice dictated by local needs and facilities. In the latter context, for instance, readers outside North America may find some of the devices and drugs recommended unfamiliar – for example, hurricane spray, unobtainable (catcher's mask) or obsolete (intravenous diazepam), and the US addresses of sources of equipment superfluous. The apparently idiosyncratic selection of procedures described perhaps also reflects the book's geographic origins. There are chapters, for example, on oesophageal dilatation but not intubation, on the PABA but not the pancreolauryl test and on the secretin tests but not the Lundh meal or calcium infusion test for pancreatic insufficiency and gastrinoma, respectively; the saline loading test for gastric emptying scarcely merits inclusion. While within these limitations most of the text is unexceptionable, individual readers will probably disagree with some of its assertions – for example, 'all patients having ERCP must be operative candidates', p 104) and regret some of its omissions – for example, no list of complications or mention of the Trucut needle in the chapter on liver biopsy.

The book is intended for physicians, nurses, technicians, and students. Clinicians learning a new technique, however, require a more critical approach and may prefer to consult larger texts and original articles. The manual's usefulness to nurses and technicians will be limited by discrepancies between the procedures as detailed here and as done in their own units. Students need a text which concentrates more on the clinical context of gastrointestinal procedures than on their practical minutiae. It may not be possible to write a wholly successful procedural guide for such a diverse readership; regrettably, this attempt cannot be recommended unreservedly.

D S RAMPTON

Pathology of the pancreas by AH Cruickshank. (Pp. 275; illustrated; £74.) Berlin: Springer-Verlag, 1986.

An occasional biopsy from a stout hearted surgeon, fine needle aspirates from a 'meddlesome' radiologist and autopsy sections too autolysed for assessment

make up the usual tally of pathologists dealing with the pancreas. Here therefore is a scholarly work to stimulate interest. The book is based on the authors 30 years experience and covers the whole of pancreatic pathology in a conventional style. The initial chapters are on the normal gland and subsequent chapters work through arterial disease of the pancreas, endocrine disease, tumours, and pancreatitis in all its various forms. The pancreas is not a photogenic organ in black and white and therefore the quality of illustration, especially the gross dissections is a tribute to Dr Cruickshank's industry. It would have been helpful to have some hints on pancreatic dissection at autopsy and the preparation of the specimen.

The scholarly nature of this book for me is reflected in the antiquity of many of the references. For example, referring to acute haemorrhagic pancreatitis Dr Cruickshank writes 'the macroscopic appearances have been well described by Opie (1910) and there is little to be added . . .' Indeed most accounts are given in historical perspective and almost a quarter of the chapters begin with a pre-20th century reference.

The pathology is mostly that seen at autopsy and it is a shame there is not a section on biopsy problems with pancreatic disease. Although I have nothing but praise for this book (excluding its cost) I confess to finding it hard to read. Perhaps this is the learned style and the use, by Springer-Verlag, of two columns of tightly set print per page. This keeps the volume thin but it requires concentration to extract the data required. There is a lack of authoritative works on pancreatic pathology and this is a valuable contribution.

ASHLEY PRICE

Hepatocellular carcinoma by T Nakashima and M Kojiro. (Pp. 267; illustrated; DM390.) Berlin: Springer-Verlag, 1986.

This is a beautiful book, which illustrates the strong aesthetic component of pathology. It represents the authors' accumulated experience of over 400 autopsies on patients with hepatocellular carcinoma, the findings from which are lavishly and expertly illustrated. The quality of the colour figures is outstanding. They cover macroscopic appearances, the results of injection studies and histology. Good use is made of large histological sections and of postmortem angiography, but techniques are not given. There are chapters dealing with the relation of hepatocellular carcinoma to various types of cirrhosis and to infection with hepatitis B virus, with arterial embolisation therapy, and with experimental carcinogenesis and tissue culture. Interestingly, the book spans the centuries by combining the meticulous macroscopic descriptions of nineteenth century pathologists with

the twentieth century techniques of electron microscopy, radiography, and immunocytochemistry.

The classification of hepatocellular carcinoma adopted in the book is derived from that of the World Health Organisation, and is fully explained and illustrated. Interestingly data are presented on the relationship between histological grade and macroscopic tumour spread and size. Unfortunately fibrolamellar carcinoma, which is rare in Japan, is not among the variants discussed although a very similar appearance to this tumour is seen in Figure 2.16. There are 250 references at the end of the book, including some to papers from the mid-1980s. Altogether this is the well produced, attractive volume which should be considered by anyone working in the field of human liver cancer.

PETER J SCHEUER

Liver disease and gallstones: the facts. By Alan G Johnson and David R Triger. (Pp. 109; illustrated; £7.50.) Oxford: Oxford University Press, 1987.

On reading the title and seeing the size of this book the average postgraduate student might have believed that here at last was a small and authoritative text book of hepatology which might help to propel him forward in his chosen career. Unfortunately, despite its authoritative title it is in fact intended to be read by patients and their relatives, and it is one of a series of nearly 30 books on a variety of medical topics, all produced for the same consumer group.

The volume is written by two academic gastroenterologists, one a surgeon, the other a physician, both with a special expertise of hepatology. Within its 105 pages there are short chapters on methods of investigation of liver disease, gall stones, jaundice, hepatitis, cirrhosis, alcoholic liver disease, cancer etc, and there are more specialised sections on tropical liver disease, the complications of liver disease, and liver transplantation. The style is uncomplicated, the information and advice given is sensible, and though many lay readers might have difficulty in following some parts of the text there are simple line drawings to help with the anatomy and a series of black and white photographs of various aspects of clinical liver disease. One or two of the latter might have a salutary effect on any intending alcoholics!

Whilst aimed at the educated lay reader, one cannot but help comment on how much factual information has been squeezed into such a small space, and that nurses and perhaps the occasional undergraduate medical student would also benefit from seeing this book. As an exercise in seeing what is expected with regard to good communication with patients it would be useful as there is no doubt that books such as this would not be required if the