The logical basis of the argument is not clear, and the worked examples add little to the argument, and do not seem to simplify the calculation. In comparison with Siegel's classic on Non-parametric statistics, which uses worked examples to explain the logic of the argument (or for that matter other statistical classics, such as Snedocor and Tukey) this book is neither particularly convincing nor very helpful; the worked examples are no more than the substitution of numbers for symbols in the various equations.

A computer software disk* supplied to me did not greatly improve matters; while it allows one to calculate confidence intervals either from data given in the book or from personal data, it does not allow the data to be saved to or transferred from another source, and it is only a device for calculation, not explanation. In exenuation, I should point that this was a test disk and possibly not identical with the version to be published.

If the use of confidence intervals diminishes erroneous inferences from data then, presumably, the literature is replete with such errors. But is it? There is no clear evidence on this point put forward by the authors. Have reviewers in the past allowed the publication of ambiguous statistics and will this henceforth cease? Again, there is no clear message. Am I an old fogey who simply resents the introduction of new methods? Perhaps.

Nevertheless, if the method had not been already imposed by editorial edict, I wonder whether this book would have won many converts. I doubt it.

DAVID WINGATE

*The CIA disk which accompanies the book is available at a full price of £65 in the 5" or 3 1/2" format.

Clinical gastroenterology. Vol 2 No 2. Adverse drug reactions in the differential diagnosis of GI and liver diseases. Edited by J Bircher. (Pp. 269; illustrated; price not stated) London: Bailliére Tindall, 1988. Injury caused by drugs replaced syphilis long ago as the most versatile and important mimic of disease. The diagnosis can be made only after the possibility has been entertained, and too many times it has not. The physician must of course take an adequate treatment history, but will then often have to consult a reference book to check whether a drug the patient has had is known to cause the problem presented. This is such a book for gastroenterologists, edited by a clinical pharmacologist but written mostly by experienced clinicians and pathologists with their heart in gut and liver.

The editor briefly summarises the criteria for diagnosing an adverse drug reaction, and then different drug induced problems are dealt with in turn: oesophageal lesions; non-specific abdominal symptoms; pancreatitis; GI bleeding; malabsorption; diarrhoea and constipation; acute and chronic hepatitis; cholestasis; fatty change; granulomatous hepatitis; hepatic vascular lesions; liver tumours. All these chapters compactly describe the features which characterise these diseases and symptoms when they are caused by various drugs, and distinguish what is well established from what is less certain. Most sketch out what is known about the pathogenesis. The bibliography is enormous, up to 1987, and readers will be pleased to find their work quoted. Although this is primarily a reference book some chapters are also interesting to read, for instance those on non-specific symptoms, and on fatty change.

I hope that every gastroenterology unit will not only use this book, but also keep a log of its use. That could lead to significant improvement in the reporting of suspected adverse reactions to the Committee on Safety of Medicines or its counterparts.

ANDREW HERNHEIMER


In his preface, the editor outlines the aim of the book: to provide an assessment of the management options in terms of current optimal therapy. Some of the chapters provide guidance about the interpretation and treatment of symptoms and symptom complexes, including haemorrhage from the upper and lower alimentary tract; functional dyspepsia; constipation and chronic diarrhoea; traveller’s diarrhoea; malabsorption and jaundice. Other chapters review the management of specific diseases such as oesophageal disorders; peptic ulceration; diseases of the gall bladder; ulcerative colitis; Crohn’s disease; pancreatitis; pancreatic cancer; viral hepatitis; chronic liver disease; and the problems of immuno-compromised individuals. In addition, there are chapters on the management of the sequelae of disease processes (such as fistulae) and also of the consequences of operative interference with the viscera of the alimentary tract. Further chapters outline the interpretation of abnormal liver function tests; the value of screening for alimentary cancers; and the use of enteral and parenteral nutrition.

The book achieves its objectives and can therefore be regarded as a success. There are, of course, some omissions and one can differ from some of the views and recommendations. For example, starting at the beginning, the section on oesophageal diseases does not mention the importance of avoiding food and
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drink before recumbency – and no tilting of the bed or taking of drugs is going to prevent reflux under those circumstances. Nor is there mention of domperidone, nor cисаприд. And similarly with other chapters. These are relatively minor points, however, but the editor may think it worthwhile to actively seek feed back, because a few changes and additions will make the next edition of the book even more useful.
The book can be recommended to gastroenterologists and general physicians.

K G WORMSLEY

Topics in gastroenterology 16. Edited by D P Jewell and J R Lowes. (Pp. 288; illustrated; £37.50.) London: Blackwell, 1989. This volume is the 16th of the series of publications arising from the now well established Oxford Post-graduate Course.

The choice of topics progresses anatomically down the gastrointestinal tract from oesophagus to duodenal ulcer to immunology of the intestine and finally to anorectal disease. This choice, is safe but somewhat uninspiring. In the oesophageal section there is a very readable chapter on chest pain by Chuck Pope but the other contributions in the section comprise information readily available elsewhere.
The section on duodenal ulcer is equally noteable for its lack of mention of Campylobacter pylori (a remarkable feat in 1988-89) as for its overemphasis on omeprazole.
The section on intestinal immunology and infection offers more promising reading to the general purchaser with good reviews of the cellular basis of allergy, immune deficiency and lymphomas together with concise advice on AIDS as it affects the gut. It is difficult, however, to see why such a specific topic as immunity in schistosomiasis should have been afforded a whole chapter in the book. What is the general physician or the trainee (to whom the book is aimed) to do with such detailed information.

Perhaps the most useful section in the volume is that on anorectal disease. Recent advances in this area have begun to clarify the hitherto impenetrable fog of ignorance which has surrounded anorectal physiology. With critical reviews by Bartolo and Read the general reviewer will be rapidly apprised of current thinking. The frequent repetition of concepts between chapters is however somewhat unnecessary and indicates a need for more reductionist editing.

The tail end of the book finds a chapter on piles which was clearcut, focussed, didactic and practical as befits a surgical writer on a surgical topic, with practical do’s and don’ts for management based on much, presumably personal experience.
The fact that such volumes continue to be published each year, suggests that they continue to be bought. For the non-gastrointestinal generalist wishing to be updated by brief summaries, the information within will no doubt be satisfactory. Many cost conscious readers, however, will be deterred by the cost of £37.50 for the volume and may decide that the current wealth of information flooding without cost through the post to most British gastroenterologists will suffice to keep them up to date.

D G THOMPSON

News

British Society of Gastroenterology
The 1989 Annual Meeting of the British Society of Gastroenterology was held at Trinity College, Dublin, on 27 to 29 September, 1989, under the Presidency of Dr J H Baron. The location of the meeting in a historic College in the heart of a Georgian city that has been designated as European Cultural Capital for 1990 was a welcome change from the remote and windswept campuses that have housed some of the Society’s previous meetings; the deluge of scientific submissions and participants was therefore no surprise. The meeting was structured according to what has become – albeit recent – tradition, with the first day devoted to a ‘Teaching half-day’, and several symposia organised by sections of the Society. Free papers and poster sessions filled the first two days, with the plenary session (including plenary posters) reserved for the third morning. Highlights of the scientific programme included a lecture on Campylobacter pylori by Dr B Marshall (Endoscopy Foundation Lecturer), on enteric infections by Professor J Holmgren (Sir Arthur Hurst Lecturer), and a New Perspectives Lecture by Professor K F Sewing on drug research. An unusually full scientific programme was matched by an equally comprehensive social programme, beginning with a State Reception at Iveagh House, and concluding with the conference dinner in the Royal Hospital, Kilmainham. After this experience of the Irish capital members may be forgiven for asking why this should not be a permanent venue for the Society; a question to which the hard pressed but indefatigable local secretariat might be tempted to offer an expletive answer.

Dr Roger Williams will become President of the Society for the year 1989/90.