Books. News


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 notable 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 appraised 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.

K G WORMSLEY

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.