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COMMUNICATIONS Two copies of the manuscript and figures should be addressed to the Editor, *Gut*, BMA House, Tavistock Square, London WC1H 9JR, UK. Manuscripts should follow the Vancouver conventions (see *Br Med J* 1979; i: 532-5. *Gut* 1979; 20: 651-2). They should be in double-spaced typewriting on one side of the paper only. The title page should include the name of the author with initials or distinguishing first name only, and the name and address of the hospital or laboratory where the work was performed. The paper must include a precise summary of the work of less than 200 words. Excessive use of abbreviation is discouraged. A covering letter signed by all authors must state that the data have not been published elsewhere in whole or in part and that all authors agree to publication in *Gut*. Previous publication in abstract form must be disclosed in a footnote. Papers must not be published elsewhere without prior permission of the Editorial Committee.

ACKNOWLEDGEMENT OF MANUSCRIPTS Manuscripts will only be acknowledged if an addressed postcard is enclosed.

ILLUSTRATIONS *Photographs* Unmounted photographs on glossy paper should be provided. *Diagrams* will usually be reduced to 71 mm wide. Illustrations should not be inserted in the text but marked on the back with the figure numbers, title of paper and name of author. All photographs, graphs, diagrams should be referred to as figures and should be numbered consecutively in the text in Arabic numerals. The legends for illustrations should be typed on a separate sheet.

ETHICS Ethical aspects will be considered in the assessment of papers (see the Medical Research Council's publications on the ethics of human experimentation, and the World Medical Association's code of ethics, known as the Declaration of Helsinki (see *Br Med J* 1964; 2: 177)).

SI UNITS All measurements except blood pressure are expressed in SI units. In tables, and illustrations values are given in SI units, but a conversion factor must be supplied. For general guidance on the International System of Units and some useful conversion factors, see *The SI for Health Professions* (WHO, 1977). **NB: Such conversion is the responsibility of the author.**

REFERENCES These follow the Vancouver system - that is, references numbered consecutively in the text and listed numerically with titles abbreviated in the style of *Index Medicus*, *Standard journal article* - (list all authors when six or less; when seven or more, list first three and add *et al*): James A, Joyce B, Harvey T. Effect of longterm cimetidine. *Gut* 1979; 20: 123-4. **NB: Accurate punctuation is essential.**

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butors from other institutions to provide a balanced picture of childhood motility disorders, and their diagnosis and management. The emphasis is on infancy, but that is only to be expected; for the most part, children are born with these disorders and it is only to be expected that they will be diagnosed in early life. The chapters vary in scope from reviews to accounts of single research projects, but this is the state of the art in this field, and (almost) none of the chapters are dull. The only discordant note in the book is a chapter on 'pro-kinetic drugs' by two authors from the 'Janssen Research Foundation'. Half of the chapter is devoted to the discussion of two drugs (one not yet licensed in the USA, the other neither in the UK nor the USA) that, by an amazing coincidence, are manufactured by a pharmaceutical company that shares the name and address of the research foundation. Perhaps a firmer editorial hand was needed here. . . .

This is a slim volume, but like its topic, the subject is relatively infant. It is the more unfortunate that the price of the book is precociously mature; one can only hope that this will not deter both paediatricians and gastroenterologists from buying this book.

DAVID WINGATE

Nutrition and immunology—Contemporary issues in clinical nutrition II. Edited by R K Chandra. (Pp. 352; illustrated; \$96.) New York: Liss Inc, 1988.

The connection between nutrition and immunology is a fascinating one and is of special interest, particularly to developing countries. It is certainly not exaggerated that malnutrition is the major cause of secondary immune deficiencies in the world, as stated in the introduction to this volume. As one reads on it becomes obvious that one major problem in elucidating the role of nutrition on the immune system is the fact that most studies are done in children with protein calorie malnutrition—usually with infections—where there is not a deficiency of only one nutrient. The effects of single nutrient deficiencies are mostly investigated in animal studies where the extrapolation to human conditions is only possible with great caution. Based on this background, the book is timely and 19 authors have reviewed the world literature and tried to separate fact from fiction in this difficult area of research. The balance of this book is slightly tipped to the nutritional side, and only three authors are—by their affiliation—identifiable as immunologists. The effects of under nutrition on cytokine responses and on plasma inhibitory factors are covered as well as the effects of lipid disturbances, vitamins, iron, zinc and other trace element deficiencies. I believe, as a personal hobby of the editor, the

effects of over nutrition are also covered. Although the book is well edited, it is not quite clear to me how 'Immunoparesis caused by viral and bacterial infections' and 'Immunological aspects and diabetes mellitus' fit into this worthwhile volume. I personally liked the chapters on lipids, vitamin B and iron deficiency best; they were well structured, well referenced and critically assessed.

This book is certainly valuable for PhD students embarking on research in this field. It is less rewarding for 'pure' immunologists who would have liked a more thorough and critical discussion of the immunological results presented. It is also of interest for paediatricians intending to work in developing countries or looking after children with chronic malabsorptive states.

The price of \$69 probably makes it out of reach for the interested individual, but the money is certainly well spent for departmental and/or institute libraries.

STEPHAN STROBEL

Books received

Gastrointestinal and hepatobiliary physiology diagnosis and treatment. Edited by J Picazo. (Pp. 175; illustrated; £30.00.) Lancaster: MTP Press Ltd, 1987.

Vasopressin analogs and portal hypertension. Edited by D Lebrech and A T Blei. (Pp. 174; illustrated; no price stated.) Paris: John Libbey Eurotexts, 1987.

Animal models of portal hypertension. Edited by S K Sarin and N C Nayak. (141; illustrated; Rs. 200/-.) New Delhi: King Publishing House, 1988.

Advances in internal medicine, Vol 33. Edited by G H Stollerman *et al.* (Pp. 542; illustrated; £45.50.) Chicago: Year Book Medical Publishers, 1988.

Gut regulatory peptides: their role in health and disease. Edited by E Blazquez. (Pp. 236; illustrated; £84.10.) Basel: S Karger A G, 1987.

Spondyloarthropathies: involvement of the gut. Edited by H Mielants and E M Veys. (Pp. 456; illustrated; Dfl. 275.00.) Amsterdam: Elsevier Scientific Publishers, 1987.

Key developments in gastroenterology. Edited by P R Salmon. (Pp. 194; illustrated; £26.50.) Chichester: John Wiley, 1988.

Cellular calcium and phosphate transport in health and disease. Edited by F Bonner and M Peterlik. (Pp. 448; illustrated; \$78.00.) New York: Alan R Liss, Inc, 1988.