Books

**Perspective in colon and rectal surgery.** Edited by T R Schrock. (Pp. 152; illustrated; $165 US; $193 Int.) St Louis: Quality Medical Publishing Inc, 1988. This is a new hard cover publication in colorectal disease. It is to be biannual and aims to bridge the gap between medical books and journals. The venture is orchestrated by an editor (Dr T R Schrock) and a board of eight associate editors (six Americans, one Canadian, one Briton) all known in the field. This first volume has about 150 pages and is divided up into sections which include features, focus on technique, foundations, consultation, complication reports and outside insights. There are 14 contributors, all acknowledged experts, to the volume and comments are made by two of the editorial board in addition. It is therefore a catholic work of a review nature, the subjects discussed are mostly topical. There are two feature articles, namely pelvic floor disorders (D C C Bartolo) and familial adenomatous polyposis (D G Jagelman). Both are well written, up to date and well referenced (n=128, n=47 respectively). Comment on each is given by an editor (D A Rothenberger, T R Schrock) which is followed by a short retort (‘Last word’) by the authors. This feature allows of a certain element of controversy which cannot by its nature be as effective as a living discussion but is nevertheless useful. ‘Focus on technique’ deals with stapling (V W Fazio), polyglycolic acid sling procedures for preventing irradiation damage to the small bowel (D F Devereux) and procedures to exclude small bowel from the pelvis and to fill the dead space after pelvic exenteration for malignancy (P H Sugarbaker). These articles are all clear and well illustrated with an emphasis on technique rather than results. There is no editorial comment and no real discussion.

‘Foundations’ is a somewhat mysterious heading an explanation of which is not forthcoming in the editor’s preface. It includes one article on colonic absorption (J H Pemberton, S F Phillips) which deals with the physiology (normal and deranged) in about 11 pages and uses 72 references. It must be said that many of these are before 1980 but there are several up to date. The article is well written and clearly laid out and useful to the colorectal surgeon. The remaining section, consultation (acute lower GI bleeding, K A Forde, W A Webb); complication report (pelvic and perianastomotic complications after ileoanal anastomosis, R R Dozois; Addisomian crisis following colectomy for ulcerative colitis, O H Clark) are useful practical articles based on case discussions and a didactic style. The final medical article (‘Outside insights’; prevention of hepatitis B in surgeons and their patients, C F Reese and R K Ockner) is an informative account which discusses virology, precautions and vaccination. A final article (‘Sidelines’, K Berger) discusses editing and contributing to medical publications, much of which is obvious but its inclusion in an otherwise purely medical volume is unusual. The general layout is clear with tables highlighted in stipple. Radiographs and line drawings are well produced and the paper and binding of high quality.

The two volumes per year are accompanied by a monthly newsletter ‘Colonic and rectal surgery outlook’ which features abstracts and commentary. The quality of outlook in terms of an up to date cover of the literature will be a major factor in determining the worth of the entire publication ($165 (US) and $193 (international)). In the present volume, the feature articles and foundation are good reviews but the remainder are not equivalent to detailed publications. While recognising that the editors have set out to offer consumable information (not so easily obtained from original articles) that it is more up to date than can be obtained from most formal books, they have only partially succeeded here. This is probably due to the choice of articles which over the next year or so will probably broaden to give the venture wider cover of the field. Thus recommendation will depend on the quality within the next year or so.

R J Nicholls

**Recent advances in gastroenterology – 7.** Edited by R E Pounder. (Pp. 400; illustrated; £35.) Edinburgh: Churchill Livingstone, 1988, and **Current gastroenterology.** Vol. 8. Edited by G Gitnick. (Pp. 431; illustrated; £53-50.) Chicago: Year Book Medical Publishers Inc, 1988. There is no question that these books are in direct competition. Every year sees a torrent of published books on gastroenterology (and more than a trickle of new journals) which remain unread by most clinicians. Accordingly, each editor has assembled a team of contributors who do the reading for us, and tell us what they think we ought to know about what is new (or what has just been rediscovered). As the data base is the same for both books, they ought to be very similar. That they are not reflects not only the personal preferences of the editor, but also the different preoccupations of clinicians on each side of the Atlantic.

Science is very smart in the USA at the moment, and this is reflected in Gitnick’s book in which much space is devoted to physiology and pathophysiology. Last summer in New Orleans, an American friend who is part of the NIH grant review system told me that ‘clinical relevance’ is not a desirable attribute of
a medical research project; science is all. This may explain a 73 page chapter on gastrointestinal hormones which contains almost nothing that any clinician needs to know, although doubtless many things that a clinical scientist should know. Ten Italians have been imported from Bologna to write two relatively short chapters on the management and clinical aspects of inflammatory bowel disease; presumably a task too intellectually demeaning for an American at this point in time. The structure of the American book is orthodox, with chapters devoted to different organs, to cancer, endoscopy and nutrition, leaving the onus of deciding what to report on the individual contributors.

In the UK, on the other hand, we are deeply into clinical strategies and cost benefit analysis; we will clutch at any new straw if it might help to balance our wretched management budgets. The emphasis in the Pounder book is on the trendy — lasers, campylobacter, cancer and the elderly. The editorial input is much more ‘up front’, as clearly the content of the book is dictated by the choice of topics. This gives the book a feeling which is at the same time both more topical and more ephemeral. Here basic science is not spread, like butter, evenly throughout, but comes in discrete chunks (the pel in Frank Cooper’s Oxford marmalade?) with chapters on such matters as molecular genetics and colonic physiology, while one on veterinary gastroenterology also caters for the more adventurous moonlighter. An important feature is a helpful index to the year’s output of review articles, for which every registrar struggling to prepare a case for presentation should be truly grateful.

Both books suffer from indifferent prose; it isn’t easy to write a review of the literature which will keep the reader awake, but some of the authors don’t even seem to be trying. Try this as a sample: ‘Understanding constipation was once very simple, but that is no longer true, although treatment remains a problem.’ In the UK team, Ian Forgaes deserves commendation for bucking the trend towards verbal tedium, while, for the US, David Lieberman manages to convey the excitement of the new developments in endoscopy.

Which book? My penchant towards physiology and pathophysiology led me to predict that I would opt for the US volume, but in the event, I found the UK book a better guide to what seems to matter to us just now.

Why not both books? One answer is cost: these books appear every year, and they don’t get any cheaper. Probably the major determinant is time: people who don’t have time to follow the journals will be unlikely to have time to read both of these books or, for that matter, even one of them. Which would be a pity.

DAVID WINGATE

It is a pleasure to review a book which targets a particular audience and achieves just the right level of information for that readership. This book is aimed at senior medical undergraduates above all, and gives a remarkably complete overview of nutrition as seen from the viewpoint of a British medical school. Dr Pennington has contrived to combine effectively the practical and the theoretical, though throughout, the emphasis appropriately is on the practical. The book is in eight principle sections covering physiology and biochemistry, diet and nutritional requirements, malnutrition, enteral nutrition, parenteral nutrition, nutrition in disease, diet and disease and drugs and nutrition. Inevitably in a short book such as this, the style is didactic, but each chapter is adequately referenced. One area that I should have liked to have seen included was a section on dietary assessment, because it seems to me that medical students and doctors should understand the problems of the techniques used by their dietitian colleagues and therefore use such assessments with an appropriate knowledge of inherent inaccuracies. This would enable a more critical approach to publish dietary survey data. All in all this is a very good and useful introductory book to nutrition.

D J POWELL-TUCK

This is a short, excellently illustrated book. It gives a very clear description of how to perform some of the commonly used therapeutic methods in gastrointestinal endoscopy.

Its American authors are well known as excellent lecturers and teachers on their topics and the material here is packaged so that it can be used readily for teaching and is published as an alternative format as a slide atlas of techniques of therapeutic endoscopy. Luckily, I was only sent the book format for review: I still feel guilty about using other people’s slides for teaching so I have escaped this temptation. The reproductions of endoscopic photographs are above average quality. The colour illustrations by Susan C Tilberry are of a clear comic strip quality: better than Beano and nearly as good as the best in Eagle.

The book covers therapy for gastrointestinal bleeding, sclerotherapy for varices, dilatation, prosthesis placement and thermal palliative treatment for GI cancer, percutaneous gastrostomy, endoscopic sphincterotomy and management of biliary tract obstruction and polypectomy. It is practical and