even assuming a high level of literacy among patients, I doubt whether they will find this book easy, or even always reassuring. Will patients benefit from a picture of a fibresigmoidoscope and light source or a tabulated comparison of seven clinical trials of the use of bran? I doubt it. Nor will they necessarily be reassured by the photograph of the author, sigmoidoscope at the ready, contemplating a patient in the knee-chest position.

Geoff Watt's account of the relevant physiology may seem simplistic to physicians, but I suspect is much closer to what patients want to know and are able to understand. He reviews different modalities of treatment, including not only diet and hypnosis, but also alternative medicine. There is much less stress on the travails of diagnosis; this is obviously correct for patients who cannot be expected to buy books until they know which disease they have.

These are two authors who both have erudition and empathy, which are not altogether concealed by a fluid style and a ready wit. The difference in their approach is symbolised by the appendices; Grant Thompson provides a list of references, whereas Geoff Watts provides a glossary of medical terms and a list of useful addresses. I don't think that most patients are up to the price or the intellectual effort required by Dr Thompson. I do think that physicians should read Mr Watts to find out what our patients think about us; the most telling chapter in his book is the one in which patients speak about their illness – and their doctors. It is perhaps pertinent to remember that the categories of 'us' and 'them' are not immutable; while patients do not evolve into doctors, most doctors end up as patients. If every physician read Grant Thompson, and every patient read Geoff Watts, the sum of human misery might be much diminished.

DAVID WINGATE

Motilin. Edited by Z Itoh. (Pp 264; illustrated; \$59.00.) Troy MO: Academic Press, 1990.

It is now 23 years since J C Brown isolated motilin, and 17 years since he determined its chemical structure. Given the almost frantic pace of research into regulatory peptides in the last two decades, it would seem reasonable to assume that, by now, the place of this peptide in the hierarchy of gastrointestinal control systems had been established. Not so; motilin remains an enigma. This book of essays summarises the corpus of knowledge that has accumulated, but in doing so it also reveals the scientific questions that remain unanswered. The volume is edited by Zen Itoh, who has been a major contributor in this field; in his preface, he tells us that 'John C Brown commented that motilin performs many clear, specific, and important functions, and yet seems to be a forgotten hormone.' It isn't clear where or when this comment was made, but it is not in this book, for on page 11, Brown concludes the first chapter by stating that '... a clear physiological role for motilin remains to be defined, although the possibilities are many and varied.'

There are obvious difficulties in a narrative with no endpoint, and the uninformed reader needs judicious and critical guidance through a maze of often conflicting scientific evidence. It is on this level that the book sometimes disappoints. Although all the authors are 'experts,' not all are equally capable of a dispassionate critique. Some of the reviews are

excellent, notably the chapters by Brown (Vancouver), Fox (McMaster), Lee and Chey (Rochester NY), and Peeters (Leuven). The editor and his colleagues have adopted a somewhat different approach in which they have described their own experimental work in some detail; this would be more acceptable if they had extended this to the work of others. There is some editorial inconsistency; in one of his chapters, Itoh does not refer to the migrating motor complex by the generally accepted abbreviation of 'MMC' but refers only to 'Phase III activity'; in another chapter from the same laboratory, this phenomenon is referred to as the 'IMC' which is subdivided into the 'GI-IMC' and 'I-IMC.' For the benefit of the non-expert, some consistency of terminology should have been imposed.

It is disappointing to find that there has been some rewriting of history over two important aspects of motilin. The ability of exogenous motilin to induce a migrating complex was, as noted in chapter 13, reported in 1975 by two groups (a Japanese group and an Anglo-German group) working entirely independently. In chapter 11, it was '... first reported in 1975 ...' by the Japanese group and '... and soon confirmed by others ...' in 1976 and 1978. The ability of erythromycin to mimic the effect of exogenous motilin was, as stated in chapter 14, reported by the Japanese group in 1984, but the same chapter does not mention that this phenomenon had been reported in the previous year by others to the Pharmacological Society in England. For most readers, however, these are trivial points; what matters is that we now have the prospect of erythromycin analogues as potent gastric prokinetic drugs, already of proved value in the management of diabetic gastroparesis. It is here that the current interest in motilin, and hence in this book, resides. While the vexed scientific question of whether motilin really is a 'gut hormone' remains unresolved, this book, albeit imperfect, is essential reading for those who would like to understand the background to a new therapeutic modality in gastroenterology.

DAVID WINGATE

Pancreatic transplantation. By C G Groth. (Pp 413; illustrated.) Philadelphia: W B Saunders, 1988.

This well produced and comprehensively edited book gives an excellent review of the state of the art of pancreatic transplantation. The historical and background experimental work is considered in the opening chapters. There follows a section on patient selection and thereafter the important subject of graft retrieval, especially as it relates to liver transplant from the same donor. Carl Groth contributes both of these chapters, as well as being an integral member or the single author of another six of the total 27 chapters. He has brought together the big names in this volume – Belzer, Calne, Corry, Dubernard, Morris, Najarian, Starzl, Sutherland, as well as many other important workers from his own and other teams.

Expert critiques of the advantages and disadvantages of different surgical approaches are presented in individual chapters, then a review section by the general editor follows concluding that exocrine drainage via the urinary bladder is the most valuable current technique. There remain problems related to the inclusion of a duodenal patch close to the

ampulla of Vater when anastomosis to the bladder is used for a whole organ graft. Overall there seem few major advantages for whole organ grafts to a body and tail of pancreas segmental graft. The last method also interferes least with liver transplant from the same donor.

The metabolic disadvantages of endocrine release into systemic veins versus portal drainage seem minimal and few will follow techniques of portal venous drainage unless great advantages can be shown.

The exciting possibility of successful islet transplantation in humans is drawing nearer as good results with larger animal models are reviewed in the penultimate chapter. Overall, an excellent book and highly recommended.

C W IMRIE

Emergency abdominal surgery. Edited by R C N Williamson and M J Cooper. (Pp 296; illustrated; £40.00.) Edinburgh: Churchill Livingstone, 1989.

This book is volume 17 in the popular 'Clinical Surgery International' series. The editors have marshalled 31 distinguished contributors who have provided 18 chapters between them. The first chapter is entitled 'New diagnostic techniques' and comprises the important fields of computer-aided diagnosis, imaging and laparoscopy, and peritoneal lavage. Otherwise, each chapter provides a comprehensive and up to date review on the field of emergency abdominal surgery. Reading the individual chapters has been a rewarding, but rather humiliating experience for this reviewer. It is salutary to recognise how much change there has been in all areas in this field and how impossible a task it is to keep up with these advances by reading the original literature. Yet if the general surgeon has one overriding responsibility it is the care of patients requiring emergency abdominal surgery. Thus, the editors are to be congratulated on having brought together such a distinguished team of contributors from all over the English speaking world to produce this very useful volume. At a reasonable price of £40.00, it deserves a place on every general surgeon's bookshelf rather than just in the medical school library.

M HOBSLEY

Annual of gastrointestinal endoscopy. By P B Cotton, G N J Tytgat, and C B Williams. (Pp 185; illustrated; £40.) London: Current Science, 1989.

The *Annual of Gastrointestinal Endoscopy* is a sister publication of the well established *Current Opinion in Gastroenterology*, in which each reviewer comments on publications of importance in his or her subject and the chapter concludes with annotated references. It is a comprehensive review of the endoscopic literature for 1988 undertaken by a distinguished panel of endoscopists (very much the Who's Who of endoscopy) and well illustrated to add to the teaching element. The start is inauspicious with a chapter on the relation between surgery and endoscopy, which is very weak, followed by one on the nursing role in endoscopy, which is rather better, and then an unnecessary chapter entitled 'Looking

forward to Sydney' where the prospects for the forthcoming Australia meeting are reviewed. Despite such a poor start, when the meat of the publication is presented it is of very good quality indeed. The reviewers are renowned endoscopists who manage to combine a review of 1988 publications with comments from their own personal extensive experience and from earlier important studies. The illustrations used also add to the teaching content and so it is a good blend of being updated on the current state of the literature and deriving benefit from the special expertise of the writers. The comments on the papers reviewed are made in a practical and often forthright manner which I welcomed. For example, when referring to an endoscopic technique for carrying out a percutaneous caecostomy, the reviewer comments: 'this seems like a lot of fancy manipulation for the benefit gained.' Absolutely right. Another study is referred to as 'woolley'.

In this busy world where keeping up to date is fast becoming a full time task, I would indeed recommend this *Annual* because it brings the readership up to date with the literature as it was in 1988, and illustrations and practical comments mean that it will be useful to all grades of endoscopists. All aspects of endoscopy are covered from various therapeutic manoeuvres with upper gastrointestinal endoscopy to endoscopic retrograde cholangiopancreatography, laparoscopy, and colonoscopy. Towards the end there is a rather futuristic article anticipating forthcoming developments, which I found informative; for example, definition of the image with the video endoscopy system is likely to be improved further still, increasing the number of pixels from the current 33–100 000 to perhaps even 1 million.

The final chapter is on documentation, which is helpful albeit weakened by being far too long. The publication concludes in the same way as *Current Opinion* by listing the papers reviewed under subject headings and listing the journals scanned. I therefore commend this book as a genuinely useful addition to the literature, and one for all active endoscopy units to have in the department.

D G COLIN-JONES

Geriatric Gastroenterology. By William A Sodeman Jr, Thomas A Saladin, William P Boyd Jr. (Pp 211; illustrated; £25.) Sidcup, Kent: WB Saunders, 1989.

Curiously enough there are several books on geriatric gastroenterology, although this is the

first one to use the title. Since most major texts on 'non-geriatric' gastroenterology do not mention elderly patients one wonders who is right – those who produce books of over 1500 pages in which problems specifically relating to the elderly are not mentioned, or those whose books of 200 to 600 pages deal specifically with the subject. Indeed, is 'geriatric gastroenterology' a true entity or are the authors merely regurgitating facts from more general texts and adding 'in the elderly' like salt and pepper at random intervals across the pages? Like the authors of *Geriatric Gastroenterology*, I believe that there is a place for descriptions of gastrointestinal and hepatobiliary disease in the roughly 18% of the population over age 65 despite the fact that there are few diseases exclusive to this age group.

This short American book was written 'with the needs of the primary care physician in mind' and aimed at providing 'a handy guide for the management of these (elderly) patients.' In Britain I suppose the equivalent of the primary care physician is probably not a general practitioner but a district general hospital geriatrician who will find much of what is written here in existing major textbooks. None the less, there are sections of the book which provide very useful reviews difficult to find elsewhere. The three chapters on the colon by Sodeman are excellent. Those on the oesophagus, stomach, and small intestine are adequate, although the work of the Tufts group on nutrition and absorption in old age and on the possible importance of achlorhydria in the elderly is ignored. The chapter on hepatobiliary disorders – 16 pages out of 211 – is pathetic. Only five references to publications in 1985 are given, none later, elsewhere in the book references go up to 1987. The section on chronic liver disease is particularly weak, it is underreferenced and full of platitudes and mistakes.

I believe that gastroenterologists, hepatologists, and certainly surgeons are now taking a greater interest in the geriatric population who certainly need their skills. I don't suppose many of them would be seen dead opening a textbook of geriatric medicine, so those interested in complementing their existing knowledge and in getting some access to publications on geriatrics could do worse than read the 'tube' chapters in this book. Sadly, there is almost nothing on nutrition and very little on pancreatic disease.

In stockbroking language this is not a 'buy.' The best I can do is a weak recommendation to borrow and if the word geriatric still embarrasses you then ask the library to put out the book in a plain brown wrapper.

O F W JONES

Collins reference dictionary: medical quotations. By John Dainth and Amanda Isaacs. (Pp 264; £4.95.) London: Collins, 1990.

The whole imposing edifice of modern medicine is like the celebrated tower of Pisa – slightly off balance. Charles, Prince of Wales (contemporary)

If you prefer to preface your text with an aphorism, or relieve the statistical solemnity of the average lecture with a moment of light relief, then this is an ideal source book. It is a compilation of quotations from the great and not so great on medical themes, covering topics from abortion, abstinence, and accidents through indigestion, mind, and sex to worry, wounds, x rays, and youth. Some are serious – the Hippocratic Oath is quoted in full – or even pompous, but most are pithy and apt. Even if you have no professional need of the wit and wisdom of the ages, you will undoubtedly enjoy browsing through the pages of this book; you would have enjoyed it more, if it had been better produced. As it is, not only the aphorisms but also the paper seems to have been recycled; the book has the feel of a larger and better produced paperback that has shrunk after being left out in the rain. On the other hand, as a medical reviewer, it is a pleasure to be able, for once, to recommend a purchase that will not threaten financial ruin, and will also make you laugh.

DAVID WINGATE

NOTE

Top ten

As a public service, this week I list the top ten silliest titled magazines featured in British Rate and Data.

- The Driving Member
- Small Wars and Insurgencies
- Making It With Plastics
- Gut
- No Dig International
- Disasters
- Farm Gate Review
- Just Pigs
- Turkeys
- Hog International

Readers who have worked on any of these titles are invited to submit alternative suggestions.

From *Journalist's Week* 10 August 1990