

Gut

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Gut publishes original papers and reviews concerned with practice and clinical research in gastroenterology. The field includes the basic science, molecular biology, physiology and diseases of the alimentary tract, the liver and pancreas including epidemiological, medical, surgical, radiological or histopathological aspects. Case reports will only be accepted if of exceptional merit. Letters related to articles published in *Gut* or with topics of general professional interest are welcomed. Authors are encouraged to include the names and addresses of four experts whom the authors consider suitable to peer review their work.

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 Papers must not be published elsewhere without prior permission of the Editorial Committee.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. 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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ment can be initiated. This section closes with a short contribution from Mark Peppercorn on antiarrhoeal agents, antimicrobials, and potential new drug treatments, followed by a brief review of enteral and parenteral nutrition.

The primary thrust of the book, medical and nutritional treatment, is appropriate but peripheral issues take up considerable space so that few reviews of medical treatment are comprehensive although they provide good access to recent literature. The format for each chapter is good. In the second edition each author might incorporate how he interprets and applies the clinical trials and whether the authors' drug usage is based on clinical trials or personal experience. The second edition could become a useful vade mecum in a difficult and challenging area.

R N ALLAN

Gastrointestinal motility: which test? Edited by N W Read. (Pp 294; illustrated; £35.) Petersfield: Wrightson Biomedical Publishing, 1989.

In his preface, Professor Nick Read describes this as a 'state of the art' book. It is indeed. A particular feature is that the book as a whole has an unexpectedly greater value than the sum of the parts. Based on a symposium reviewing clinical tests of gastrointestinal motility, a distinguished international authorship describes in some 30 chapters the application and role of the multiplicity of tests of gastrointestinal motor function now available. Naturally enough they begin with the oesophagus, progressing to the anorectum. Every one of the authors is an expert in his field and almost all the contributions are written with fluency and clarity. At the end of each major section (oesophagus, stomach, small intestine, etc) the editor provides a summary chapter, adding critical comment, balance, and clinical context to the immediately foregoing contributions.

So far, so good, it might seem. The weakness is that all the authors are experts in – and enthusiasts for – the tests they describe and, with a few conspicuous exceptions, seem reluctant to express any harsh judgment on them. Thus tests which to date have clearly failed to gain any appreciable application in clinical practice are optimistically described as having research use with potential clinical relevance, or something similar. Positive thinking and enthusiasm are commendable but one suspects that some contact with reality is being lost. Despite the title 'which test,' there is hardly a mention of costs or cost-benefit considerations for the tests described, which seems to indicate that the authors hold such concerns to be irrelevant.

Paradoxically, therefore, the book as a whole actually portrays the present clinical evaluation of gastrointestinal motility rather well. Much up to date information is accurately and lucidly described, and the reader is exposed to all the uncertainties, the enthusiasms, the incredible profusion of new tests that 'complement existing techniques,' and the reluctance to condemn any putative diagnostic procedure as useless or impractical. Rightly, in my partisan view, the reader will also sense that behind all this there is evidence that gastrointestinal motility dis-

orders we do not yet properly recognise or understand are the basis of much distress and discomfort in patients.

This is indeed a state of the art book. Sadly, it reveals that the state of the art is desperately inadequate to the task confronting it. I commend the book to established investigators in gastrointestinal motility as a stimulus to reflection and self criticism, and to young investigators ready to accept the challenge of taking the subject forward.

R C HEADING

Diagnostic tests in gastroenterology. By A D Beattie. (Pp 264; illustrated; £19.95.) London: Chapman and Hall Medical, 1989.

Dr Beattie's new volume provides a recipe book for the gastroenterology unit. He describes every conceivable test (and a few more) relating to the gastrointestinal tract, liver, and pancreas. The methods for all these tests are described in detail (with references to the original studies), followed by a short 'evaluation' of each test. I would have liked a little more emphasis on this evaluation, with liberal references to the recent publications concerning the comparison and utility of the different investigations.

Overall, I think the book is a great success. It passed the critical test when a professor wanted details of the fluorescein string test which is not mentioned in any other textbook on my bookshelf (perhaps for good reason).

The Royal College of Pathologists has just published *Codes of Practice for Pathology Departments*, in which it emphasises the need for each department to maintain an up to date record of the methods of all the tests used by a laboratory. With audit on its way, perhaps it will help the gastroenterologist to have his techniques written down, rather than passed on by the traditional method of 'See one . . . do one . . . teach one.'

R POUNDER

Advances in drug therapy of gastrointestinal ulceration. By A Garner and B J R Whittle. (Pp 306; illustrated; £40.) Chichester: John Wiley, 1989.

These are the proceedings of a Biological Council Symposium on Drug Action, which is an event held in London every spring. This symposium took place in April 1988. It was obviously successful as Andrew Garner and Brendan Whittle have put together an above average book about peptic ulceration. The first half concentrates on peptic ulcer disease and existing treatment, but the second half is concerned with basic research on gastroduodenal ulceration and protection.

The aim was to highlight targets which may be explored in search of new or improved antiulcer drugs – if such compounds are needed. All the usual topics and contributors are covered, but the book is beautifully presented, has many useful illustrations, and is fully referenced. It is an unusually good book for anybody interested in drugs and peptic ulceration.

R POUNDER

NOTES

Shirley McGealey – Technical Editor

Shirley McGealey has recently completed more than seven years as Technical Editor of *Gut*, the culmination of an association with the BMJ Publishing Group of more than 20 years. Throughout she was committed to excellence. Her particular qualities were intelligence, an independent mind, vigour, and great good humour. Money and ambition were of little importance. She insisted on leaving quietly without formality or fuss and, given the option, would certainly not have published this appreciation. The journal and the British Society of Gastroenterology are greatly in her debt. We welcome her successors Sue Burkhart and Norma Pearce who will be 'job sharing' with the same commitment to maintaining the quality of the journal.

ROBERT ALLAN
Editor

Royal Society of Medicine Section of Colorectal Proctology

The following awards have been made:

Frederick Salmon Medal to B C Morson, St Mark's Hospital, London.

John of Arderne Medal to J H Scholefield, ICRF Colorectal Cancer Unit, St Mark's Hospital, London.

Burroughs Wellcome Visiting Professor in Clinical Science: D Rothenberger, University of Minnesota.

Sugarless – the way forward

An international symposium will be held at the University of Newcastle upon Tyne on 19–21 September 1990 to discuss ways of reducing sugar consumption. Details from: Professor A Rugg-Gunn, Dental School, Framlington Place, Newcastle upon Tyne NE2 4BW, UK. Tel: 091 222 7859 (department secretary).

Fifth International Workshop on Therapeutic Endoscopy

This will be held by The Chinese University of Hong Kong and the Hong Kong Society of Digestive Endoscopy from 11–13 December 1990. Further details can be obtained from Dr Joseph Leung, Department of Medicine, Prince of Wales Hospital, Shatin, NT, Hong Kong. Tel: (852)-6363128/5. Fax: (852)-6350075.