

Gut

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Gut publishes original papers, short rapid communications 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 should include the names and addresses of four experts whom the authors consider suitable to peer review their work.

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

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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 *BMJ* 1964; ii: 177)).

SI UNITS All measurements except blood pressure are expressed in SI units. In tables and illustrations values are

given in SI units. 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 journal titles abbreviated in the style of *Index Medicus, Standard journal article*. List up to six authors, then add *et al.*

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There are good chapters present, as well as the introductory one, and areas of real practical advice. There is a comprehensive chapter on complications of laser, which should certainly be read before starting laser therapy. You may think that gastroenterologists have a difficult time in using this sophisticated equipment but it seems to be nothing compared with the bronchoscopists who have the complication of the laser causing the fibrescope to ignite . . . inside the patient! The author describing this experience indicates that he undertook research to ascertain why this occurred but ran out of bronchoscopes on which to experiment – and, I would have thought, volunteers too! The end of the book looks at photodynamic therapy, with a detailed chapter on the scientific basis for using this exciting new technique, which is clearly in an early phase of development.

On the whole I found this book disappointing. A combination of repetition in the chapters and rehashing published work seriously detracts from its worth. The reader does not wish to read out of date material which has been published before, but proper, up to date, critical reviews. There is a need for such a book, and there are valuable areas within it which would be of real help to the future use of lasers in endoscopy but it cannot be warmly recommended.

D C COLIN JONES

Chronic pancreatitis. Edited by H G Beger, M Buchler, H Ditschuneit, P Malfetheiner. (Pp 574; illustrated; DM 106.) Berlin: Springer-Verlag, 1990.

This book is another in a series stemming from symposia held at Ulm, West Germany. The meeting organisers/editors view the product as an up to date account of chronic pancreatitis including aetiology, pathophysiology, morphology, conservative and operative treatment – with emphasis on recent data of experimental and clinical research. The truth is that the first two aspects are a recantation of 30 year old dogma which has proved ineffectual except insofar as it ensures a steady source of material for surgical jugglery, and microscopic analysis. And, as for novel research components, these are covered in two chapters of which one tells us that there is no reproducible animal model and the other gives data from a handful of heterogeneous cases. All newish aspects – including pancreatic duct stenting and abnormalities in peptidergic innervation – occupy less than 10% of the text's 558 pages; philosophical considerations, for example possible causes of pancreatic pain, and the concept of

feedback regulation on exocrine pancreatic secretion, contribute another 10%; diagnostic tests and conventional medical treatment some 15%; vignettes some 10%; so that the bulk of the book is written by surgeons – an apt commentary on the 'state of the art'.

Chronic pancreatitis has been on the clinical map for over a century – and is not, as a devotee of the standard pathogenetic partyline proclaims, a modern ailment. The disease maims initially through pain and the fear of it, and later through piecemeal surgical ablation which accelerates the onset of diabetes and maldigestion. Clinicians who agonise over these patients know that a duct decompression procedure, when feasible, affords dramatic pain relief in the short term. Longitudinal studies, spanning more than a decade, are few and in any case meaningless without the vital information missing from all published surgical accounts – that is, whether the patient remains pain free after returning to his former employment and lifestyle. The same criticism applies to resectional procedures which take up no less than 100 pages of this book and, even more confusingly, a subtitle 'new horizons' does little except to grant the patient the luxury of retaining the pylorus or duodenum! Physicians baffled by all this may seek the safer terrain of disease definition, classification, and natural history. They will come away even more disillusioned since one of them, a proponent of taxonomy, now regressively and uncritically exhorts that 'alcoholic-induced chronic pancreatitis is a discrete entity'. It is good to find a sobering account by Ammann from Zurich. A lifetime's experience in managing chronic pancreatitis leads him to conclude that: 'the controversies on diagnosis and therapy . . . are as marked today as 30 years ago despite many international meetings of classification, a marked improvement of diagnostic techniques, and the large and increasing amount of literature'. That article is a gem, teasing pancreatologists into answering why certain patients escape painful vicissitudes and why pancreatic calculi may disappear with the passage of time.

In summary, basic science and clinical researchers will not learn much from this book, but should realise that the oft quoted ductal theory for aetiology has outlived its usefulness and is inherently flawed: that realisation would it is hoped motivate them into seeking alternative explanations. This is not a book for consultant gastroenterologists either, unless they are actively involved in running a pancreatobiliary service. For those few people the book offers valuable practical tips.

JOAN M BRAGANZA

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NOTES

Gastrointestinal Oncology

The Royal College of Radiologists is holding a meeting entitled Gastrointestinal Oncology on 29–30 November 1991 at the Royal College of Radiologists. Further details from: Conference Department, Royal College of Radiologists, 38 Portland Place, London W1N 3DG. Tel: 071 636 4432.

Sir Francis Avery Jones BSG Research Award 1991

Applications are invited by the Education Committee of the British Society of Gastroenterology, who will recommend to Council the recipient of the 1992 award. Applications should include:

- (1) A manuscript (2 A4 pages only) describing the work conducted.
- (2) A bibliography of relevant personal publications.
- (3) An outline of the proposed content of the lecture, including title.
- (4) A written statement confirming that all or a substantial part of the work has been personally conducted in the United Kingdom or Eire.

The award consists of a medal and a £100 prize. Entrants must be 40 years of age or less on 31 December 1992 but need not be a member of the BSG. The recipient will be required to deliver a 40 minute lecture at the Spring Meeting of the Society in 1992. Applications (15 copies) should be made to: The Honorary Secretary, BSG, 3 St Andrew's Place, Regent's Park, London NW1 4LB by 1 December 1991.