

BOOK REVIEWS

Colonic diverticular disease. By Malcolm C Veidenheimer and Patricia L Roberts. (Pp 174; illustrated; £49.50.) Oxford: Blackwell Scientific, 1991.

This is a delightful, easy to read, little monograph from the Lahey Clinic in Massachusetts. The Clinic has a long tradition of interest and experience in the management of diverticular disease. Twenty years ago in 1971 Dr Bentley Colcock, towards the end of his distinguished career, published a monograph also entitled *Diverticular disease of the colon*. As the natural successor to Bentley Colcock the senior author, Dr Veidenheimer, has continued an interest in diverticular disease with the combined attributes of a wise physician and a thoughtful and skilful surgeon. One hopes that the junior author is already planning another book of the same name to be published in 2011.

Even by then it is unlikely that we will know all the answers about the management of complicated diverticular disease, nor are we likely to have achieved the eradication of the underlying tendency to form diverticula in the colon. The authors state 'with advances in medical treatment and technology, including broad spectrum antibiotics, new imaging techniques, and better pre-operation and post operative care, the treatment of patients with diverticulitis has improved over the years.' This may be true at the Lahey Clinic but for many surgeons this is still a difficult to manage, dangerous malady.

It is a quaintly old fashioned book; it looks as if it was lovingly created, typeset, and published in either Cambridge in New England or Oxford in Old England. The quality of the illustrations throughout the book is good but even the admirable line drawings, mostly by Francis E Steckel, are more in the style of the 1970s than of today. The references are mostly ancient and more seem to be from before the late 1970s than since. Their advice is conservative and reiteration of their views on investigation and management would guarantee success in higher examinations in surgery. The logical arguments of the presentation of results is clear and easy to read. The reader does not have to struggle to follow the arguments. It is a book that the enthusiast can pick up and read from end to end with hardly a stop which is more than can be said for most monographs these days.

J ALEXANDER-WILLIAMS

The esophagus. By Donald O Castell. (Pp 842; illustrated; £105.) Boston: Little, Brown, and Company, 1992.

The oesophagus has done well for books in recent years and one might question the need for another. Dr Castell has, however, produced an excellent and useful tome that fills a gap in the market. It is also reasonably priced by today's standards.

There are 40 chapters by acknowledged experts who provide comprehensive coverage of pathophysiology, diagnosis, and treatment of oesophageal disease. Most of the chapters are excellent and several are outstanding. An

example of the latter is the chapter on anatomy and physiology. This is usually put in to make a book look complete, but in this case it is well worth a read. Also worth a read are the chapters on oesophagitis in the immunocompromised patient and on cutaneous diseases and the oesophagus. It is rather unfair to individual contributors to pick favourites in this way, but this is a book with wide appeal and I am sure that most who open it will find something of interest.

Inevitably, not all is perfect. Some of the contributors seem reluctant to express their own opinions on controversial matters and some sections are short on detail. These are minor criticisms, however, of a book that should stand the test of time. This book should be on the shelves of all clinicians with a serious interest in the oesophagus. It should also be available for reference in every oesophageal laboratory. I have just placed my order for a second copy.

J BANCEWICZ

Drugs in gastroenterology. Edited by P C Braga, M Guslandi, A Tittobello. (Pp 533; illustrated; \$79.50.) New York: Raven Press, 1991.

Alimentary pharmacology used to be simple. Until 15 years ago there were fewer treatments available, their mode of action was straight forward, and gastroenterology was not overwhelmed by papers on the pharmacology of new drugs and their clinical comparisons. Since then there has been a therapeutic revolution. New drugs are more specific, more potent, tested and evaluated in more detail, and ultimately more competitive. Consequently, research in gastroenterology has been increasingly taken up in pharmacological studies and there has been an explosion in published works on gastrointestinal pharmacology. Comprehensive reviews are few and scattered.

This book attempts to draw the facts together into a pharmacopoeia of gastroenterology and it succeeds to an extent. An introductory chapter on basic pathophysiology in each therapeutic area is followed by chapters on the individual compounds. These have the standard format covering chemistry, pharmacodynamics, pharmacokinetics, and clinical pharmacology, etc with generous detail and comprehensive references which just reach into 1990. It has multiple authors but most are from Milan, the pharmacological capital of Italy.

The coverage of specifically gastrointestinal drugs is extensive but corticosteroids, immunosuppressants, interferon, and similar agents are not included. Ulcer healing, market dominating drugs take up half the book whereas inflammatory bowel disease has one chapter on 5-Aminosalicylic acid, perhaps reflecting the priorities of the pharmacologist rather than the gastroenterologist. Antidiarrhoeals and laxatives are barely mentioned.

The topics covered are done well and provide good summaries of information available in 1990. There are gaps and there may be too much basic pharmacology for the clinical gastroenterologist. This is a useful reference book, however, that should have a place in any departmental library.

R H TAYLOR

Gastrointestinal emergencies. Edited by Mark B Taylor. (Pp 644; illustrated; £81.) Baltimore: Williams and Wilkins, 1992.

The declared aim in the preface of this book is to provide the reader with an analysis of the many gastrointestinal emergencies which may confront gastroenterologists or surgeons. The problem with text books is that many of the subjects are out of date by the time of printing. Although this is to some extent true in this book, it is a good and comprehensive baseline of the pathophysiology and acute management of a range of gastrointestinal emergencies. It is, however, occasionally uneven. Each chapter is well referenced but not all actually deal with gastrointestinal emergencies. Nevertheless, all are relevant and are of interest to the gastroenterologist. An example of this is the chapter on therapeutic biliary endoscopy, which is certainly of interest, but does not fall into the strict definition of a gastrointestinal emergency. Along the same lines, it would have been of value to have a chapter on laparoscopic cholecystectomy and its problems.

Of particular interest is the section on complications of procedures such as upper gastrointestinal endoscopy and colonoscopy, ERCP and its therapeutic applications, sclerotherapy, liver biopsy, and percutaneous endoscopic gastrostomy. These are of value and are well written but if percutaneous endoscopic gastrostomy is justified as a chapter associated with significant complications, so must intravenous nutrition and enteral nutrition, which are nowadays essential facets of gastrointestinal practice. The complications of these other forms of nutritional support are not dealt with in the book. The section on pregnancy – acute abdomen, liver disease, and radiation problems – is unusual and of interest, as is also the chapter on intestinal and liver complications of bone marrow transplantation.

It is somewhat curious to have all the colour plates near the start of the book and identical to those in black and white within the text; cross referencing, however, is adequate. Overall, although slightly uneven in its subject matter, chapters are generally well written, well referenced, and provide good pathogenetic and therapeutic information for those working at the sharp end of gastroenterology. It is a daunting task to have brought together authors writing on such a wide range of clinical problems within this difficult area and Mark Taylor is to be congratulated on tackling these complex and difficult problems. Departments of Gastroenterology and Surgery will surely benefit by having this volume.

R I RUSSELL

Oxford textbook of clinical hepatology. Edited by Neil McIntyre, Jean-Pierre Benhamou, Johannes Bircher, Mario Rizzetto, and Juan Rodes. (Pp 1550; illustrated; £195.) Oxford: Oxford University Press, 1991.

This is a large, new two volume work covering 1460 pages of text, exclusive of appendices and a comprehensive index, edited by five distinguished hepatologists supported by 187 contributors. Three quarters of the authors come from European Community countries, a substantial minority from the USA, and others from Canada, Australia, Mexico, Brazil, and Japan giving the book an international but European based outlook. The reviewer has found no major omission in using the book for regular reference on patients seen over two months of hepatological practice.

It is a comprehensive text on the liver in health and disease containing information extending well beyond the boundaries of