the importance of the glucose:insulin ratio and continues with the energetics of exercise and diabetes mellitus; detailed descriptions of the relevant metabolic pathways come later. The introduction is sufficient, however, to support what is in effect a problem based approach, and this approach should enhance the reader's understanding and enjoyment of the essential intermediary metabolism rather than just presenting it as a topic to be assimilated without any leavening of relevance.

The chapter on vitamins begins with folate, on the basis that deficiency is common and the relation between the functions of folate and the manifestations of deficiency are well understood. Thereafter, the order is based on functional relations, rather than being alphabetical or related to water or lipid solubility, so that, for example, folate, B12, and biotin are considered together on the basis of being involved in single carbon transfers. The reader who has been brought up with conventional textbooks may, in common with this reviewer, find this approach novel. In this context, his subject matter difficult to appreciate at first, but increasing familiarity led to my finding it refreshing and stimulating.

Key points in the text are illustrated by aptly chosen experimental studies. Numerous 'exercises' (essentially questions and problems that the reader is invited to consider) should test understanding and could form the basis for tutorial discussion.

The book suffers, however, from some important topics being given inadequate coverage. Although the author claims that techniques for assessing nutritional requirements and deficiencies are given special prominence in the book (nitrogen balance being singled out in this context), the assessment of nitrogen balance occupies less than one page. Given the considerable clinical importance of this topic, this is disappointing, as is the complete omission of any reference to the biochemistry of artificial nutritional support.

Nevertheless, this is an original, well researched, and comprehensively referenced book, which should be of considerable value to students of nutrition and provide a useful source of material for anyone who teaches the subject.

W J MARSHALL


Not so long ago a wise, kindly, and highly experienced editor invited me to contribute a chapter on molecular genetics to a 'Recent Advances' series in gastroenterology. The deadline approached (and, I guess, in common with 99% of the readership of Gut, modern life for me is just a series of deadlines) I began to worry about the feasibility of a problem that must have faced generations of authors before me: my recent advances might not seem quite so recent by the time the finished product hit the bookshelves. My paranoia was such a feeling evolving field as molecular genetics, where I had no problem in fulfilling the editor's request to be up to the minute, might have missed out on significant advances during the interval between a topic being accepted for page. Over the telephone, my editor was unfazed by my anxieties and said that he would permit a postscript if the cure for cancer was found while the book was in press.

Because of the pace at which one discovery follows another, a lot of recent work in molecular biology can seem dated, but does this threaten to undermine the place of such books as the present one under consideration? In this case, the answer is an emphatic 'no'. As Sir Walter Bodmer recognises in the foreword, while some aspects of the book may indeed be out of date during its gestation, this would also be true of any research field that was stagnating, and no one could say that of cancer biology. Not only should all gastroenterologists who see and treat patients with cancer have a working knowledge of basic cancer research, but it should also be aware of specific chapters on oncogenes and immuno-suppressor genes as well as outlining the scientific basis for the revelations of the molecular genetics of inherited cancer. The last three chapters relate to the molecular basis behind treatment and radiotherapy, and the book closes with an excellent chapter on cytokines in cancer from Monson and Guillou.

Perhaps, not surprisingly, given the background of two of the editors, this book has a distinctly surgical emphasis, but many of the chapters are coauthored with colleagues from basic science, which really gives rather a nice balance, and I think, in fact, the book is largely, but not exclusively, concerned with gastrointestinal cancer and, given the fact that there are 33 authors who doubtless had to be gently (or otherwise) cajoled into producing their manuscripts fast, the book seems impressively up to date – certainly, late 1992 and, occasionally, early 1993. If you feel you can live with a book published in 1994 that is not quite at the cutting edge of, for example, colorectal cancer genetics but is still able to outline the fundamentals of the molecular basis of malignancy, I would urge this book upon you.

IAN FORGACS


Clinical nutrition is par excellence, an integrative discipline – an area where, in these days of super-specialisation, a student of medicine, young or old, can be encouraged to take a whole body approach to disease: a field in which the generalist can happily roam.

Gastroenterology has maintained, more than most medical specialties, its links with general medicine – few gastroenterologists are pure specialists. For the gastroenterologist nutrition encompasses especially the digestion and absorption of food including the closely related secretory and motility responses of the intestine to nutrients, to advancing age, and to disease. Increasingly, however, the specialty is researching less obviously gastroenterological areas like satiety/hunger, which govern the clinically all important food intake; furthermore, it may need to understand mammalian responses to food and disease if it is to take part in the provision of nutritional support therapy. The specialty is well placed to do this: endoscopic skills are often needed for tube and gastroscopy placement, the liver and intestine are the dominant nutritional organs, the patient with the failing intestine needs artificial feeding. The gastroenterologist who ignores the effects of undernutrition can be likened to the paediatrician who ignores growth failure or the cardiologist who fails to take an interest in breathlessness. But, uncomformably for the super-specialists, the effects of cancer and undernutrition impact on every organ and system in the body and have enormous political and economic import through their effect on productivity, morbidity, mortality, and quality of life. Clinical nutrition, therefore, should be able to provide vast amounts of valuable reviews of the literature on the effects of food and nutrients on cancer and coronary heart disease epidemiology, not least the fascinating story that is emerging of the effects of mild maternal malnutrition on the metabolic pathways come later. The effects of cancer and undernutrition impact on every organ and system in the body and have enormous political and economic import through their effect on productivity, morbidity, mortality, and quality of life. Clinical nutrition, therefore, should be able to provide vast amounts of valuable reviews of the literature on the effects of food and nutrients on cancer and coronary heart disease epidemiology, not least the fascinating story that is emerging of the effects of mild maternal malnutrition on the...
Students may not necessarily be attached to the gastroenterology unit during their training, they may not see that many patients with gastrointestinal disease and, for them, I would have thought that this atlas would be fun as well as being informative.

My favourite picture is that of *Triatoma magistrius* - no problem seeing why this particular beast might cause havoc to the myenteric plexus. Having last seen, but never forgotten, the pus of an amoebic abscess (anchovy sauce on fish fingers every other Friday) at my prep school, circa 1966, I thought the hue inside the saucebowl (Fig. 11.02) was a touch too red rather than pink-grey. While on the subject of Escoffier’s contribution to our specialty, I was sorry to see that redcurrant jelly did not make it into any of the photographs of stools.

The first edition was a very good picture book, as those who have slide sets from the original will know. This revision is a timely update, which is beautifully produced with the single exception that the similarity in style between pagination of text and numbering of figures is seriously confusing throughout.

IAN FORGACS

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**NOTES**

**Cross-Sectional Imaging**

A seminar designed for the radiologist in clinical practice will be held at El Conquistador Resort, Puerto Rico on 30 January–4 February 1995. Further information from Janice Ford, Hospital of the University of Pennsylvania, 3400 Spruce Street, 1 Silverstein Building, Philadelphia, PA 19104, USA. Tel: 215 662 6904; fax: 215 349 9525.

**Magnetic Resonance Imaging**

A course designed to provide a state of the art summary of both neuroradiological and body applications of MR imaging will be held at Hapuna Prince Resort, The Big Island of Hawaii on 13–18 February 1995. Further information from Janice Ford, Hospital of the University of Pennsylvania, 3400 Spruce Street, 1 Silverstein Building, Philadelphia, PA 19104, USA. Tel: 215 662 6904; fax: 215 349 9525.

**Gall stone disease and its treatment – with live demonstrations**

This congress will be held at Academic Medical Center, University of Amsterdam, The Netherlands on 12–13 January 1995. Further information from: Mrs Helma Stockmann, European Postgraduate Gastro-Surgical School, G-4-109.3, Academic Medical Center, Meibergdreef 9, 1105 AZ Amsterdam, The Netherlands. Tel: 31 20 566 3926; fax: 31 20 691 14858.

**Therapeutic endoscopy**

The XIIIth European Workshop on Therapeutic Digestive Endoscopy will be held at the Erasme Hospital, ULB, Brussels, Belgium on 13–15 June, 1995. Further information from Mrs Françoise REY, Conference Services, Avenue de l’Observatoire 3, box 17 B-1180 Brussels, Belgium. Tel: 32 2 375 16 48; fax: 32 2 375 32 99.

**Helicobacter pylori**

The VIIIth International Workshop on Gastroduodenal pathology and *Helicobacter pylori* will be held at the Heriot Watt University Conference Centre in Edinburgh, Scotland, on 7–9 July 1995. Further information from VIIIth EHPSG, Conrex, 145 Islington Road, Brighton, BN2 2SH. Tel: 44 273 623 123; fax: 44 273 622 944.

**Gastrointestinal motility**

The XVth International Symposium on Gastrointestinal Motility will be held on 5–9 November, 1995 at Hotel Villa Pamphilii, Rome, Italy. Further information from Dr Enrico Corazziari, Chairman, Cattedra di Gastroenterologia I, Clinica Medica 2, Policlinico Umberto I, 00161 Rome, Italy. Tel/fax: +39 6 446-9965.

**Gastroenterology and digestive endoscopy**

The 27th Argentine Congress of Gastroenterology, the 14th Congress of Digestive Endoscopy, and the 4th Meeting of Pediatric Gastroenterology and Nourishment, will be held in Buenos Aires, Argentina, from 5–10 November 1995. Further information from: Gastroenterology: Dr Fernando Magnanini, J E Urburua 1252-4 PF, (1114) Buenos Aires, Argentina. Tel and fax: 541 806 7871. Endoscopy: Dr Alejandro Ramirez, Ana Juan Congressos, Sarmiento 1562-4 PF, (1042) Buenos Aires, Argentina. Tel: 381 1777/384 5376; fax: 541 382 6703.