

computer generated information. Clinical education is also less reliant on bedside teaching and intensive exposure to patients. Gitlin and Strauss have compiled an atlas of clinical, pathological, and radiological features of liver disease over many decades in their hope that this will provide a useful adjuvant to the study of hepatology. The extent to which it does so remains to be seen, but the need for such a book was never greater. The book is attractive and well produced. The layout in the main follows recognised disease categories, but it could possibly be improved by greater integration of the imaging chapter into the sections dealing with the relevant diseases. This would reduce the need for cross referencing and facilitate its use in a multimodality educational process.

The strength of this atlas lies very much in the arena of conventional hepatology, which is covered quite comprehensively. The paucity of text is an essential feature of this type of presentation, but the legends tend to be succinct and informative. The authors grappled with the changing terminology in some areas of hepatology, but in the area of chronic hepatitis they fell between two stools by describing the new terminology while continuing to use terms such as chronic active hepatitis, chronic persistent hepatitis, and piecemeal necrosis in the text. In that respect the book probably accurately reflects the position of most hepatologists. Many of the illustrations of end stage liver disease are extreme examples and hopefully will soon serve as a reminder of what was inevitable in the pre-transplant era. The illustration of the Budd-Chiari syndrome was especially good. Another highlight is the intriguing illustration of the imperfections of blind liver biopsies even when the liver is almost completely replaced by metastatic deposits.

Hepatology has been subjected to great change as a consequence of the impact of liver transplantation on the treatment of most liver diseases. This has also resulted in the new discipline of transplant hepatology, which has thrown up new diseases and different perspectives on established conditions. The section on liver transplantation is a token gesture, which recognises the procedure rather than attempts to deal with this expanding area with the same degree of authority as applies to the rest of the book.

J O'GRADY

Textbook on Interventional Radiology of the hepatobiliary system and gastrointestinal tract. Edited by A Adam, R N Gibson. (Pp 210; illustrated; \$95). London: Edward Arnold, 1994. ISBN 0-340-551666.

This practical guide has been written by 10 experts in the field of interventional radiology and describes both the basic procedures as well as the more specialised interventions. The general chapters cover percutaneous biopsy and cytology and aspiration of fluid collections while specific chapters deal with transjugular liver biopsy, gastrointestinal fistulas, and strictures. These latter disorders may become more frequent as the number of complex abdominal surgical interventions increases. The potential of radiological management for these indications should be widely known as there are guidewires and catheters now available that permit the treatment of the most complex situations. Treatment of oesophageal strictures is described in a separate chapter but concentrates mainly on balloon dilatation. The interventional

radiology in the biliary tree is the cornerstone of the book. Percutaneous drainage techniques, stent placement in malignant and benign conditions, and percutaneous approach to the gall bladder are extensively described, with reference to patient selection, complications, and their prevention and management. Percutaneous extraction of residual gall stones is detailed in one chapter. Plastic stents are still abundantly mentioned although the superiority of metal stent seems evident. The angiographic section includes discussion of such techniques as TIPS, embolisation, treatment of Budd-Chiari syndrome, embolisation of vascular lesions and liver lesions as well as peripancreatic vascular interventions. This chapter seems to summarise the potential of vascular interventional radiology but does not focus on the detail of specific techniques.

This book is a practical guideline to those who want to use interventional radiological procedures, particularly residents in radiology. The illustrations and drawings are outstanding and technique is emphasised throughout the book.

R F DONDELINGER

Clinician's Manual on Helicobacter Pylori. Edited by J J Misiewicz, A Harris. (Pp 42; illustrated; £6.95). London: Science Press, 1995. ISBN 1-85873-063-5.

Helicobacter pylori is a troublesome spirochaete, which has turned much of gastroenterology on its head in the past decade. We can no longer adhere to Schwartz's dictum 'no acid, no ulcer' when we recognise that these organisms themselves adhere to the submucous regions of the gastric antrum and cause untold problems to the underlying mucosa. With foregut gastroenterology in the grip of helicomania, it is comforting to find a little book that provides an entirely sane and acceptable account of the role of helicobacter in upper gastrointestinal disease and describes, with great clarity, the methods available to identify and treat the organism.

This is an unusual publication. It is small, cheap, clearly written, authoritative, even handed, and comprehensible. It is elegantly produced, beautifully illustrated, and sparingly referenced. It also contains a number of tables and illustrations which, copyright law permitting, would form the basis of an extremely serviceable lecture on the place and management of helicobacter in upper gastrointestinal disease. Not only does it provide concise information for generalists, including general practitioners, but is also likely to represent a useful consensus statement for gastroenterologists. Moving from pathophysiology, through diagnosis to treatment and the indications for eradication therapy, the authors hardly put a foot wrong. My only concern is that they do not address the current vogue for using near-patient testing for helicobacter, principally in general practice, as an indicator for the empirical prescription of eradication therapy. Instead, the authors suggest that dyspeptic patients who are helicobacter positive are referred for endoscopy; this is at odds with a developing, although unevaluated, trend in primary care, and they would have done well to discuss the pros and cons of this strategy.

At £6.95, this book could usefully be purchased and distributed by Family Health Service Authorities or Health Commissions as a state of the art guide to the helicobacter problem. The authors emphasise the

importance of using effective eradication therapy, almost certainly using three drugs, rather than the more commonly used dual therapy, although their recommendations for follow up breath testing to confirm eradication may not be justified on either clinical or cost effectiveness grounds.

This publication raises a number of more fundamental questions about the links between research evidence and clinical practice, and the best way of communicating new data to practitioners. On the one hand, by the time this book is in wide circulation, it may be out of date. On the other, there is a clear mismatch between current practice and publication in peer reviewed journals. The answer might be to provide the information contained in this book in electronic form, which can be updated at intervals, and recommendations for treatment modified in the light of new evidence and accepted practice. If we are to embrace the concept of evidence based medicine, we are probably looking for solutions that transcend both the paper publication of primary research data and the subsequent publication of review material of this kind.

R JONES

Gastroenterology and Liver Disease. By P C Hayes, K J Simpson. (Pp 120; illustrated; £8.50). Edinburgh: Churchill Livingstone, 1995. ISBN 044-304-9556.

'What is the use of a book', thought Alice 'without pictures or conversation.'

Alice would have liked this book. The pictures are excellent. A series of colour prints with a brief accompanying text guide the reader through the wonderful world of gastroenterology and hepatology. Designed primarily as an introductory white coat book for students, it succeeds admirably. The book is just short enough to be read and just cheap enough to be bought by the average student. However the more specialist reader will find the brevity of the text somewhat disconcerting. For example the treatment of hepatic encephalopathy is discussed in two lines, and the aetiology of inflammatory bowel disease in four, with no mention of the importance of genetic factors. The staging of colonic cancer was also neglected. Perhaps more surprisingly, considering the impact of HIV disease on the gastroenterologist's time and practice, there were only two cursory references to this disease. These omissions should not detract from the authors' and publishers' achievements. Both should be congratulated on the quality of the illustrations. In particular the prints of radiological abnormalities are clearer than in many more expensive specialist tomes. Gastroenterology certainly lends itself to this illustrated format and I would have no hesitation in recommending this book as an introductory guide. The best introductions will stimulate readers to explore further and deeper. Whether it is good enough to provoke Alice's celebrated response of 'curiouser and curiouser!', only time will tell.

S BRIDGER

Role of Gut Bacteria in Human Toxicology and Pharmacology. Edited by M J Hill. (Pp 286; illustrated; £49). London: Taylor and Francis, 1995. ISBN 0-7484-0110-5.

The roles of gut microflora on the pharmacology and toxicology of drugs and environmental chemicals are among the cinderellas of