Clinical Problems in Gastroenterology. By J M Rhodes, H H Tsai. (Pp 307; illustrated; £29.95.) London: Times Mirror International, 1995. ISBN 0 7234 19434.

There are a number of questions that a book reviewer has to address before getting very far into the task. Probably, the most obvious will be to determine to what extent the author – but far more probably these days, the authors – succeed in attracting their (usually declared) intended readership. Life becomes more tricky when the preface manages to escape without explaining at whom the book is directed.

Rhodes and Tsai have tried 'to structure this book according to clinical problems as they are likely to confront the clinician'. Although the demarcation between physician and trainee is becoming very well defined in this country, I feel sure the authors cannot hope to attract consultant readers as they have pitched the standard at too low a level – at least I hope they have! This is a book that might appeal to newcomers to the specialist registrar grade who, pretty early on in their careers, will be called upon to see and treat patients that present with 'clinical problems'.

Although I thought that many of the chapters could be helpful to trainees, the first section, which deals with abdominal pain, does seem a little curious at times. What, for example, should one make of the following advice? 'It is unsafe to label any chronic abdominal pain in a person over 40 years of age as functional without investigation. If the patient is under 40, attempt to make a positive diagnosis of functional pain (ie, irritable bowel syndrome) from the history. . .'. Obviously it is dangerous to take 'sound bite' quotes, and I think I have worked out what the authors mean to say. However, as written, it looks to me as though some confusion has crept in – and maybe that well known bit of advice about age and investigating dyspepsia has got messed up in here somewhere. Like the very greatest surgeon who must occasionally take out a normal appendix, the very wisest gastroenterologist probably tends slightly to under-diagnose the irritable bowel syndrome.

Usually, the written material is sound and the range of topics has been thoughtfully chosen. I think that the next edition should include a chapter on dyspepsia and on gastrointestinal approaches to anaemia. If you were writing this book, where would you discuss colon cancer – under abdominal pain, diarrhoea, constipation or anorectal problems? Answer: none of the above. You can find an interesting outline of the clinical manifestations of the condition in the chapter on gastrointestinal bleeding.

Yet, the major difficulty that the reader has in a book of this type is that it takes you only so far as the differential diagnosis and examination of the presenting problem of the patient. When the authors delve into the management of Zollinger-Ellison syndrome or the area of follow up of known gastrointestinal cancer, they are straying from the straight and narrow. I would have liked rather

more than four pages on nausea and vomiting although one and a half pages on flatulence is probably enough to prevent the authors from getting long winded.

I hope that trainees take the opportunity to study this book. It cannot have been very easy to write but there are plentiful illustrations. The publishers, Mosby-Wolfe, do seem a very visual outfit. Many gastroenterologists will recognise the format (and maybe some photos) from various recent atlases. I am all for breaking up dull prose with illustrations but I think Rhodes and Tsai write well. It seems to me a sign of growing up that one can manage to learn something from a book without too many pictures. Nowadays, from the reviewer's perspective, too many authors are being let down by their publishers. To Mosby-Wolfe, I commend a sentence from the great gastroenterologist (and occasional playwright) who, in between clinic consultations, managed to write *Hamlet* (Act 2, scene 2) . . . 'More matter with less art'.

IAN FORGACS

Radiation and Gut. Edited by C S Potten, J H Hendry. (Pp 328; illustrated; \$278.25.) Amsterdam: Elsevier Science 1995. ISBN 0-444-89053-X.

The intestine is one of the most rapidly renewing tissues in the body and therefore responds rapidly to injury especially that caused by radiation whether this be therapeutic, experimental or accidental as in the Chernobyl disaster. Thus, the interrelation of radiation and gut should be a subject of interest to many workers in the discipline of gastroenterology using that term in its widest sense; clinicians certainly, whether they be physicians, surgeons, oncologists or workers in the field of industrial health. But also pathologists, physicists, experimental biologists, cancer research workers, physiologists, and anatomists who all, to a varying degree, have an interest in the subject. The title of this book will therefore catch the eye of regular readers of *Gut* as well as those who may occasionally turn its pages. Will the content be of interest to them?

The early chapters cover the structure and function of mammalian gut with special reference to techniques used to study radiation effects, in particular the clonal regeneration assay that assesses stem cell functional capacity. These chapters relate to experimental studies in rodents and are written by the two editors both of who work in the Christie Hospital, Manchester. Both have contributed signal advances to the understanding of radiation effects on gut. A chapter comprising an extensive review of the early and late radiation effects on the gut of animals, from oesophagus to anus, covers 60 pages, and lists 250 references is from the United States, as is the chapter on the effects of radiation on the various supportive tissues

of the gastrointestinal tract. A succinct but balanced account of acute and chronic enteritis in humans is written by two clinical oncologists from the Christie Hospital and the volume concludes with two short chapters, one on ingested radionuclides and the other on the important topic of radiation carcinogenesis.

The illustrations are all of histological sections of intestine, mainly reproduced adequately in black and white. The six colour plates appear together at the beginning of the book out of sequence with the text to which they relate. This is less than satisfactory especially given the high purchase price of the volume.

Having long had a special interest in the difficult clinical problems of management that may occur as a result of radiotherapy injury to the gut, I opened this book with keen anticipation but closed it with a sense of disappointment for it contains little of help to the practising physician or surgeon. Some two thirds of the text is devoted to a detailed review of experimental studies in animals, from the mouse to the dog, and only a minority of the content relates to the effects of radiation on the human gut. Clinicians will seek in vain for guidance as to the latest treatment options for their patients who experience either the acute or the late adverse effects of radiotherapy. Researchers and basic scientists, however, will find contained within the text and extensive references a wealth of information that will serve as valued reference source for years to come.

BARRY JACKSON

NOTES

Liver disease

The XXII International Update on Liver Disease will be held at the Royal Free Hospital School of Medicine, London on 10–12 July 1997. Further details from: Professor Neil McIntyre, University Department of Medicine, Royal Free Hospital, Pond Street, London NW3 2QG. Tel: 0171 794 0500 ext: 3969; Fax: 0171 830 2321.

UEGW

The 6th United European Gastroenterology Week will be held on 18–23 October 1997 in Birmingham, United Kingdom. Further information from Concorde Services Ltd, 10 Wendell Road, London W12 9RT, United Kingdom. Tel: +44 181 743 3106, Fax: +44 181 743 1010.