MRCP will think it useful, although medical students and graduates would do well to refer to this informative little booklet. The book will no doubt sell well and should be popular for BDS, FDS and MGDS. If more photographs of oral manifestations of systemic diseases were included it would be well recommended.

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Vocal Fold Histopathology: a Symposium, edited by John A. Kirchner. Pp. xi + 126, illustrated. College Hill Press, San Diego. Distributed by Taylor & Francis, London, 1986. £35.00.

This book is based on an international medical conference and, like many of the literary results of such meetings, it presents a rather disparate group of chapters. The work does, however, review some clinical practice, it brings to the reader's attention some important recent advances and it also manages to suggest avenues of future research.

In vocal fold oedema Fritzell and Hertegard find that it is

better to have the patient stop smoking than to operate. Intubation granulomas are successfully managed by resection according to Lehmann and Widmann, but Kleinsasser waits for some of them to be coughed up spontaneously. Indirect microlaryngostroboscopy is stressed by several groups as a valuable diagnostic method.

Two condensations of elastic tissue, the anterior and posterior maculae flavae, are reported in the vocal fold by Hirano's team. Frenzel focuses his electron microscope on the blood vessels of vocal cord polyps and finds them to be similar to any other blood vessels. Kleinsasser feels that vocal cord 'nodules' are 'a kind of epithelial callus' as opposed to vocal cord polyps which are the result of exudation of blood.

As to future work, Kirchner suggests that there is a feedback mechanism in the larynx which gives singers, for example, the ability to produce a precise pitch at the moment that their song is started. A search for mechanoreceptors, afferent discharges from nerves and the demonstration of a reflex contribution to control of laryngeal muscles during phonation are promising lines for future work.

Histopathologists will find little of interest in the work, but laryngologists, on the contrary, may savour it as a useful addition to a subject not liberally endowed with research contributions.

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Books Received

Aids to Clinical Examination, Peter C. Hayes and Ronald S. MacWalter. Pp. iii + 114 illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. £4.95.

Alcohol: Our Favourite Drug: New Report on Alcohol and Alcohol-related Problems from a Special Committee of the Royal College of Psychiatrists. Pp. xii + 213. Tavistock Publications, London, New York, 1986. £6.95 (paperback), £18.00 (hardback).

Clinical Cases in Paediatrics, Nicholas P. Mann and Nicholas Rutter. Pp. iv + 168, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. £8.95.

Journal of Interventional Radiology. Vol. 1, No. 1, September 1986, edited by Gordon McLean and Robert A. Wilkins. Pp. iv + 53, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. Quarterly. Subscrip-

tions Vol. 1 (2 issues): individuals £21.00/\$32.50; institutions £27.50/\$40.00. Vol. 2 (4 issues): individuals £45.00/\$90.00; institutions £60.00/\$120.00.

Manual of Clinical Problems in Oncology, with Annotated Key References, Second edition, Carol S. Portlock and Don R. Goffinet. Little, Brown Spiral Manual Series. Pp. ix + 358. Little, Brown, Boston, Toronto, 1986. £9.95 (spiral binding).

Manual of Emergency Medicine: Diagnosis and Treatment, Jon L. Jenkins and Joseph Loscalzo. Little, Brown Spiral Manual Series. Pp. xii + 493. Little, Brown, Boston Toronto, 1986. £9.95 (spiral binding).

Pathways in Surgical Management, Second edition, Michael Hobsley. Pp. ii + 362, illustrated. Edward Arnold, London, 1986. £23.50.