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The Health Care Manual: A Family Guide to Self-Care and Home Medicines

Demand for medical care is infinite but the time available to meet it is not. Time spent by general practitioners dealing with minor self-limiting conditions like coughs and colds is denied to preventive activities such as finding and treating hypertension, which threatens the life expectancy of 10% of the population, and patient education about avoiding disease. Less time should be spent on minor illnesses and much more on preventing major disease.

Its first section is about keeping healthy and is in general sound particularly on sleep, sex and stress. But there are infelicities. Hospital doctors do not, except in rare cases, treat hypertension, general practitioners do. They may be family doctors but are not in this country called family physicians. Advice not to smoke more than 10 cigarettes daily is bad because half-hearted, and not to drink at all is misleading. A pint or two of beer or several glasses of wine per day, according to no less authority than Sir Richard Doll, reduces the risk of death from cardiovascular disease.

The second section, about common problems, explains how almost everything from animal bites to undescended testis can be treated by self-care. The third discusses diseases which have been diagnosed by doctors in words which can be comprehended by laymen.

This book is clearly written by family doctors and is to be recommended highly to patients who prefer autonomy to dependence.

Andrew Smith, Whickham Health Centre, Newcastle upon Tyne.

Lead versus health: sources and effects of low level lead exposure

This book is a collection of papers on the absorption, metabolism and biological and psychological effects of lead.

Much of the evidence concerning the effect of lead upon health is not clear-cut and some of it is conflicting, but in the crucial area of its effect upon intelligence, the overall conclusion seems to be that lead does affect I.Q. slightly—of the order of 3–5 I.Q. points—and while this finding is, strictly speaking not statistically significant it is important because it is consistent over several studies, and on this basis as well as other evidence is likely to implicate lead as the main factor in accounting for this difference.

However, blood levels in the U.S. have fallen by 37% (5.4 g/dl) from 1976–1980, and the most likely explanation for this is the reduction in petrol lead during this period (New England Journal of Medicine, June 9th 1983), and so it seems that this is an effective manoeuvre in reducing blood lead. The decision has been made to lower the lead content of petrol in the U.K. from 0-4 g/l to 0-15 g/l by 1985, and it is likely that it will be phased out altogether by 1990.

Although the effects of lead reduction are likely to be small, because intelligence and behaviour are so important it seems that one must take advantage of any opportunity to improve these factors.

This book gives a good overall view of this complex subject and the discussions after each paper and the overall summaries are of particular value.

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100 Short Cases for the MRCP

This book has the limited but laudable objective of trying to help the M.R.C.P. candidate prepare for the short case section of the clinical examination. This, now extended, part of the clinical is regarded as the most discriminating and taxing hurdle. It is also the hardest one for which to give written advice. There can never be a substitute for examining patients at the bedside, against the clock, in the presence of an interrogator who will not only question the candidate on his findings and their interpretation, but will also assess his clinical technique.

The author sets about his task by devising a comprehensive list of 100 clinical situations the candidate might face. This is unexceptional and will not add much to the candidate's anticipation or fears, though a knowledge of Laurence-Moon-Biedl syndrome or achondroplasia nigricans will not, one hopes, greatly impress the examiner. A page is devoted to each condition attempting to highlight the cardinal signs and associated features in other parts of the body, relating to it. The crucial and difficult part is the attempt to anticipate the questions the examiner may then proceed to ask and this is largely tackled by giving lists of differential diagnoses.

Apart from minor typographical errors and some illogicalities in the sequence of cases (83. Carpal tunnel syndrome might, more sensibly come next to 87. Median nerve palsy rather than be separated by Absent radial pulse, Claw hands and Wrist drop) the notes are accurate.

Ultimately the success and value of the book will depend on the predictability of different examiners to ask the same questions about the same cases. One hopes that their originality may be greater than implied.

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