
This American book is part of a series in which major disciplines in internal medicine are regularly reviewed. The stated aim is to keep hospital and family doctors abreast of changes. It comprises five separate and unrelated chapters by different authors.

'Medical evaluation of the geriatric patient' comprises 40 pages. The evaluation takes place in the office and is so detailed that separate sessions are suggested to avoid fatigue. Audiometry, eye assessment with grids and charts and pelvic examination take place. A low reading rectal thermometer must be available in case the patient undergoing such detailed assessment is suffering from hypothermia. The message conveyed is that old people who present with functional problems should be properly examined. Senior House Officers in casualty departments assessing such patients will envy the time available to the internist in his office.

The second chapter describes altered clinical pharmacology and drug reactions in the elderly. Those who explore this theoretical ground regularly will recognize the usual landmarks. More practical hints are given and include the advice to introduce drugs with 'high potential for toxicity' to elderly patients with discretion.

The management of behaviour problems in nursing home residents is the concern of the next chapter. The picture of such an American nursing home which emerges from between the lines is amazingly similar to some institutions in this country. Of interest are new regulations permitting anti-psychotic medication only after behavioural manoeuvres have been tried or where the safety of the patient or others is endangered. The clinical vignettes introduce the reader to concepts which include programmes of sleep hygiene, the cycle of negative staff patient interaction and the restraining vest. Suggestions on how staff can modify their behaviour and the behaviour of patients in their care presume the presence of high numbers of insightful and highly motivated staff.

Hypertension is the subject of Chapter 4. Seemingly 40% of Americans over 65 swallow tablets aimed at reducing blood pressure and it is to be hoped that those who prescribe them have read Chapter 2 of the book. After various theoretical details, the concept that postural hypotension is a feature of high blood pressure is introduced. Apparently lowering of the blood pressure by drugs improves the symptoms of postural hypotension. Treatment options outlined are similar to British practice but enthusiasm for diuretics is much greater. It is a rare experience to read of one country where drugs are enthusiastically administered to elderly people with blood pressures statistically within the normal range, when in another country the very same drugs when listed on a referral letter are immediately thought to be the cause of the patient's symptoms.

From here we move on the geriatric oral assessment for the physician which is a chapter about disorders of the mouth. It is informative, clearly written and certainly the book's best chapter. Hidden within is the information that 10% of new cases of AIDS in the USA occur in people aged over 65.

The book is expensive and its contents, apart from the last chapter, are to be found easily elsewhere in recent geriatric literature. The sector of the market at whom it is aimed must be a small target in this country.

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The aim of this considerable volume is 'to provide background information about the physiologic, medical and social problems associated with myocardial infarction, to present insight into the scientific bases for rehabilitation programming, and to furnish a detailed description of a realistic rehabilitative approach to the patient after myocardial infarction.' By any standard the stated aims are achieved.

The title is somewhat misleading since it is only the last section that contains a detailed description of rehabilitative care for the coronary patient. The other sections deal with other aspects of coronary artery disease such as the pathophysiology, the risk factors and the clinical aspects of recognition and management. The title is also perhaps a little unfortunate and would be better expressed as 'The rehabilitation of the patient with coronary disease.' Although this may appear to be a semantic point, the patient can get lost amidst the technology and the various programmes designed to help, but which may just serve to delay or prevent the 'patient' becoming a 'person' again.

Each section of the book is composed of several comprehensive and interestingly written chapters. An excellent list of references accompanies each chapter – which may therefore be read on their own as authoritative and up-to-date accounts of the subject.

The contributors are all Americans. Reading the book draws attention to the difference in attitude the British have to rehabilitation – and thus questions the current situation and beliefs in this country. At times the approach being presented is over the top. Phrases such as 'PTCA is a medical miracle' are difficult to overlook calmly and causes the reader to question the veracity of other claims in the book. However, evidence as to the benefit of 'helping patients with coronary heart disease resume active and productive lives for as long as possible, within the limitations imposed by their disease process', is presented at every turn.

This book should be of interest to the specialist, who may want to turn immediately to the final section in the volume which deals solely with rehabilitative care. It will also interest the non-specialist wishing to read about coronary rehabilitation and also about the basic underlying disease process and its investigation and treatment. Perhaps the book thus falls between two audiences – being too long for the non-specialist, but too all-inclusive for the specialist. Certainly the format could be made more interesting to read by variation in text size and inclusion of more illustrations. These faults are compensated to some degree by the very high standard of the index.
The editors must be congratulated on maintaining the standard and internal consistency throughout this volume. The temptation to spend just over £50 on this book should not be resisted.

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*Plants in Cardiology* is a lovely book. A much greater contribution to general understanding and awareness is made by specialist publications of this type than the plethora of general cardiology textbooks which are available.

The author is not only consulting cardiologist at University College Hospital, London but a member of the committee of the Chelsea Physic Garden and anyone who has taken the opportunities afforded by the Royal College of Physicians to visit the Chelsea Physic Garden will (provided the weather was reasonable) have favourable memories, and those who have not visited should be encouraged to do so.

At first sight, 40 pages for £5.95 is fiercely expensive. However, it is a fascinating read, and will be very valuable to have on the shelf as a source of reference. The British Cardiac Society has had its critics in the past for decisions the committee has made, but the decision to support this publication (which has been produced in the *British Heart Journal* as a series of articles over the past year) is excellent use of the Cardiac Society’s funds and they are to be commended for it. My only slight concern is that, as in my experience with many BMJ publications, I fear for the binding over a period of time. I would not, however, put anyone off purchasing or indeed giving as a small gift, this most unusual and informative little book.

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There are very few books that leave one with such joy and excitement as these two volumes of *Gynaecologic Oncology.* They certainly must rank as classics and it is hard to imagine that there are any serious competitors. The two volumes have been edited by Malcolm Copplason, Professor of gynaecological oncology from Sydney, Australia, and he has assembled virtually the cream of gynaecological oncologists throughout the world. Not only are there oncologists, but there are basic scientists, radiologists, cytologists, statisticians, epidemiologists, as well as the traditional oncological chemotherapist and surgeon. The reviewer mentions this because all the above are experts in their particular fields and they bring to these texts expertise in individual subjects that normally one would not expect in books of this type.

Five of these parts are in the first volume of some 750 pages while the remaining 12 are in the second volume of 1,600 pages. A monumental task, but a large subject. Professor Copplason has skilfully covered the fundamental principles and diagnostic aids in the first volume with such titles as *The Statistical Basis to Oncological Enquiry, Quantitative Pathology and Cardinogenesis* amongst the early exciting chapters. Diagnostic aids are very much up-to-date, including *Magnetic Resonance Imaging* and *Immunoscintigraphy.* Then follow traditional chapters on vulva, vagina and cervix, uterus and ovaries. Rare tumours are also covered and then the concluding section of the book is related to surgical techniques. All operations, minor and major and complex are covered under this heading. *Complications of Radical Therapy* is also an excellent section, as is the one on *Surgical Reconstruction of the Gynaecologic Oncology Patient.* Last, but certainly not least, is the chapter on *Aftercare* which includes such remarkable subjects as the psychological process of recovery from gynaecological cancer, and the last chapter, written by two obviously very devoted doctors, on attitudes to dying.

These two volumes must be regarded as the gold standard in relation to textbooks dealing with gynaecological oncology. They are essential reading for anyone involved, either directly or indirectly, with managing women with cancer. Copplason’s *Gynaecologic Oncology* must certainly be the best.

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This book is published as one of a series of monographs in internal medicine which have included titles such as critical care, geriatric medicine and rheumatoid arthritis. The editorial board, headed by the professor of medicine are all based at the University of Texas at San Antonio. The contributing authors to this monograph are also largely based at San Antonio, though there are contributors from Alabama, Missouri and Georgia.

One might imagine from this cast that this would be a rather parochial view of the management of myocardial infarction but this is far from the case. The editorial board and, presumably, Professor McCall have provided a well-balanced and up to date view of the subject which is as applicable on this side of the Atlantic as it is on theirs. Chapters include epidemiology, clinical presentation, thrombolysis, management of arrhythmias and haemodynamic complications and finally, risk stratification. The only major area which is not discussed to any extent is cardiac rehabilitation which is perhaps a pity bearing in mind the target audience which is presumably specialists in internal medicine.

Naturally, in such a monograph, therapeutic strategies are rather more geared to American practice than British. The standard thrombolytic in use is clearly TPA though the other agents, anistreplase and streptokinase are discussed in detail and helpful summaries of the major
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