comments as 'Frequently, automated procedures can be shown to be more cost-effective' without producing any documentary evidence. Other than a mention of Shaw's 'Doctors' dilemma' there is scarcely a single reference to the evaluation literature.

The third and fourth sections on 'Epidemiological technique and planned investigations' (91 pp.) and 'Social science techniques' (73 pp.) are outstanding. In fact, I cannot think of a short text in either of these fields which puts across the material so clearly and concisely.

The fifth section on 'Field investigation of physical, chemical and biological hazards' is frankly disappointing. It suffers considerably, and visibly, from the lack of any central control. This is the field of environmental and occupational health and requires a dedicated editor with an interest in these topics.

The final section, 'Research and development of health promotion services' contains a rag bag of essays on health policy, on priorities and on strategies. Some would have sat better in earlier sections on methodology, others would have been better left out. It was surprising to read the final chapter by Alder on sexually transmitted diseases without a single mention of AIDS, a subject on which he is an international expert. Although the publication date is 1985, it does show the difficulties that multisubject and multiauthor editions have in keeping up to date.

To return to Volume 3 as a whole. O.U.P. in their advertising refer to the Oxford Textbook of Public Health as a major new international textbook of public health for postgraduate students and all those concerned with the formation and execution of public health policy. That, it clearly is not. The book is designed for the cognoscenti, for the privileged few with access to university libraries, for the rich, for the North. Even in the developed world, to which it relates, at £120.00 a set or £35.00 for volume 3, it is beyond the reach of most individuals and will have to rely on the largesse of institutional budgets.

In conclusion, and quoting directly from the revising editors 'It is not an easy task to follow in the footsteps of such a renowned editor as Bill Hobson'. How right they were.

References

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Manual of Obstetric Anesthesia. Edited by Gerard W. Ostheimer. Pp. xii + 424, illustrated. Churchill Livingstone, New York, Edinburgh, London, Melbourne, 1984. £26.00.

This new book is edited by the Director of Obstetric Anaesthesia at the Brigham & Womens Hospital, Boston (9000 deliveries/year). It includes chapters by several Harvard anaesthetists, a New York obstetrician and several by the Editor, the latter being the most readable. The Editor

describes it as not a text-book and indeed bench book might be more appropriate in that individual topics can be read up in entirety without references to the rest of the book. This, however, leads to much repetition of lists eg. of precautions, causative agents etc. which the straight through reader would assimilate at first pass.

The book gives an American view on obstetric anaesthetic practice, which concurs with that in the UK in many aspects. Some insight into the differences may be gained from the fact that the anaesthetist is expected to attend the deliveries of all patients who have received regional blocks and in view of the high incidence of instrumental birth with regional analgesia, must lead to a heavy workload.

The layout of the book is good, having clear chapter contents headings. A wide variety of topics are covered including maternal and fetal physiology, perinatal pharmacology, obstetric anaesthesia of all types, anaesthesia for the pregnant (non-obstetric) patient, neonatal problems and management and finally an interesting chapter on medico-legal and mortality matters, comparing the US and the UK.

There is some jargon (eg caregiver, ponderal index). There are inevitable differences in pharmacy, especially narcotics. Ketamine replaces etomidate as second choice of induction agent after thiopentone. The use of cimetidine but not ranitidine is mentioned.

Dr. Ostheimer's epidural technique will suit the left-handed anaesthetist, and he gives very safe guidelines on topping up. The obstetric and neonatal chapters are comprehensive and in conjunction with the well-referenced anaesthetic text, the book, a paperback, would be a suitable bench book, in conjunction with English updates on the subject.

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Postoperative Pain: Understanding its Nature and How to Treat it. Jane Hosking and Edward Welchew. Pp. 175, illustrated. Faber and Faber, London, Boston. 1985. £4.95

Pain is all too common and it is as unpleasant as it is common. Any relevant knowledge is therefore important in the continuing quest for pain relief. Nurses often fail today because they seem to be more interested in the organisation of their profession, tomorrow's possible improvements in science, and less in the patient's simple needs. Maybe it is their basic training which is wrong, but in particular with respect to pain, nurses often fail to identify the detail of a patient's pain or the changes in the pain.

They may record the presence of discomfort, but this omits so much of relevance from the records. Furthermore, they often fail to give reassurance to the patient, thereby omitting a most useful pain killer. I have therefore read this little book, from the patient's point of view, asking the simple question will it improve the standards of nursing care with respect to the management of pain? I think it should be of value to patients because the various roles to be played by the nurse in the reduction or prevention and relief of pain are detailed clearly. Some science, as is necessary in 1985, finds a place. This includes safety and the risks of underventilation after

opiates, but kindness also finds a place, and therefore the possibility that some patients may receive inadequate analgesia is mentioned clearly. It reminds nurses that pain after surgery should be regarded as genuine. I wonder why nurses often tend to withhold necessary analgesia following surgery. This little book contains a readable description of the common analgesics and the regimes for use and routes of administration. No book designed for nurses would be complete without a comment about the nurses' responsibilities under the controlled drugs law.

Towards the end of the book the concept of the placebo response is introduced and finally the design of clinical trials for research into pain control brings this readable little book to a close.

This book is clearly designed to help the nurse understand more about pain and its correct management. It is essential to do so because the nurse shares the responsibility for the patient's comfort and if inadequate analgesia is provided, she has the responsibility to approach the medical staff for more.

I think this little book can point the nurse in the right direction, but I guess that it could benefit medical students to read it also. Medical science and common kindness fail if pain prevails.

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Tropical Urology and Renal Disease. Edited by I. Husain. Pp. xiv + 435, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1984. £30.00.

For those of us who have a large community of patients from third world countries or who occasionally see foreign patients, familiarity with the up-to-date management of tropical urological diseases is essential. The editors' declared aim is 'to provide a tropical extension to the standard general textbook'. Unfortunately, the pitfall of including unnecessary basic urology has not been avoided. Much of the chapter on evaluation of the patient is superfluous. For example, the whole page on urological pain, even if bilharziasis is mentioned once, is more suitable for an introduction to urology than a specialist work.

The appendix on instruments and equipment is inappropriate.

The relevant topics are well-covered, particularly when it is apparent that the author has extensive personal experience of conditions which here are rarities and the different presentation in tropical countries of familiar conditions increases one's understanding of their variation. I wondered if Lem Putt (*The Specialist*) had written the fascinating chapter on low cost sanitation. This book is easy to read with excellent lay out and typography and is reasonably priced, but would be even better value with more rigorous selection.

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Urology. H.N. Whitfield. *Pocket Consultant Series*. Pp. 220, illustrated. Blackwell Scientific Publications, Oxford, London, Edinburgh, Boston, Palo Alto, Melbourne, 1985. £7.50.

The modern trend in medical publishing seems to be the series. *Pocket Consultant Urology* is such a series and the subject has indeed been summarised in a book which easily fits into the pocket. This format dictates a brief style. The question is who is the book for. For the most part the style is clear and simple, for example, the calculation of creatinine clearance is explained as well as normal values given and the book would therefore be useful to the house officer or medical student working in a urological unit. In other parts however the reader with limited knowledge is left floundering. For example prostatodynia is not explained although one is told that treatment is an alpha-blocking drug. On the whole however Mr. Whitfield has succeeded in compressing the subject of urology into a slim volume with admirable clarity and although some explanations are incomplete because of limited space the information given is mostly correct and in accordance with modern views.

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