Methodology in Medical Genetics: an Introduction to Statistical Methods, Second edition, Alan E.H. Emery. Pp. vi + 197, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. £24.00.

The introductory chapter states that this book is specially written for those whose mathematical sophistication is no greater than simple algebra. The equations used suggest that a revision course would be required first! However, they are worked through, taking examples from the literature, so that they are not always as daunting as they at first appear. The book provides a thorough grounding for the use of statistics in medical genetics.

Secondly, it is described as a simple straightforward practical guide to the analysis of human genetic data. However, the degree of sophistication is such that some familiarity with genetics or statistics is required to make the best use of all the information it contains and, in particular, to avoid their uncritical application, the latter point being emphasized in the introduction.

Chapters include the estimation of gene frequencies using the Hardy-Weinberg principle together with methods to correct for incomplete ascertainment. The familial tendency recognized in many common disorders, e.g. hypertension, duodenal ulcer, can be assessed numerically – Falconer's 'heritability'. The consequences in terms of risk to other members of the family are clearly set out and a table is given of estimates that have been made for various disorders. For some reason, diabetes mellitus is not included there, with only an indirect reference in the text, but this may be because of heterogeneity where it is discussed. Genetic heterogeneity, i.e. clinically similar, but genetically distinct, forms of disease, is a major anxiety in clinical genetics. Methods are given to help to resolve this problem, though other evidence (e.g. biochemical) needs to be taken into account. There is a clear section on linkage studies which have become much more important since the advent of DNA markers (restriction fragment length polymorphisms) which provide an additional method of estimating recurrence risks. Disease frequencies are also covered with particularly clear definitions of incidence (new cases per unit of population) and prevalence (all cases in a population).

This book will continue to be required reading for those working in the field of medical genetics, but I suspect that clinicians would refer only occasionally to it and may turn elsewhere.

In summary, this is not bed-time reading, but it is an essential source book when a mathematical assessment is required in medical genetics.

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Primary Health Care 2000, John Fry and John C. Hasler. Pp. xvi + 383, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. £25.00.

In the forward to this well produced book Dr Kaprio says 'Hospitals have become too technical, too de-humanised and too expensive. As a result, all countries are now ready to

discuss the right medical and economic balance between the hospital in-patient service and the medical care in the community.'

Certainly since the 1978 WHO/Unicef Conference at Alma-Ata, doctors of all nations have become increasingly interested in the contribution primary medical care has to make to the health of the peoples of the world. For these doctors, this book which is divided into two parts makes ideal reading. *Part 1* concerns itself with general issues and, as a result, has much to say about primary care in the UK. In this section chapters entitled 'Primary Care seen from General Practice', 'Economics, Politics and Society', 'Prevention', 'Needs', 'Collaboration' and 'Workers' are each written by a respected UK general practitioner, for example, John Horder, David Metcalfe, Michael Drury, Godfrey Fowler, Peter Pritchard, etc.

The second part of the book (Chapters 11–28) devotes one chapter to primary care in a single country, written by a resident doctor. Thus the reader can contrast the problems of Australia, USA and the UK with those, for example, of Russia, Latin America, Zimbabwe, China, Finland and many other countries. The problems primary medical care has to face are immense. Each year in the 1980s 15 million children of the world under the age of five will die.

'In Zimbabwe the malnutrition in pre-school children remains at 30% despite 20 years of health education.' 'Tension between Primary and Secondary care persists. While both are essential, there is often an inappropriate bias towards funding secondary care. It is easier to point to a new body scanner or new hospital than to more community nurses, houses for the elderly or health promotion and disease prevention as evidence of improvement.'

Some solutions are beginning to be identified. 'Time and again we see that our problems – Primary v Secondary Care, Urban v Rural Care, inadequate prevention, poor teamwork, lack of data and failure to encourage patient participation – can be traced directly to inappropriate medical education and political and professional leadership.'

The two distinguished GP Editors, John Fry and John Hasler, draw their conclusions in the final chapter under the title 'Towards 2000: the advancing years'.

This is a pleasant book to handle, well written, full of information and the editing is excellent. I would especially recommend it to the new generation of doctors and their teachers, as well as medical administrators, for the challenge is to them to bring 'health to all'. As such, this book should be in all Postgraduate Centres and Trainers' Libraries. Although expensive, it provides good value for money as well as a good read.

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Recent Advances in Gastroenterology. No. 6, edited by R.E. Pounder. Pp. v + 367, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. £35.00.

The previous five editions of recent advances in gastroenterology have presented review articles encompassing the

whole of the gastrointestinal tract. In this latest volume Dr Roy Pounder has abandoned this comprehensive approach to produce an entertaining but erudite review of some of the growing points in gastroenterology.

The recent appearance of the bi-monthly journal *Current Opinion in Gastroenterology* which is thoughtfully provided free for most gastroenterologists by a drug firm may have forced his hand somewhat in that over a two-year period that journal reviews the whole of new papers concerning the gut and liver and to retain the previous format of 'recent advances' would have been consequent duplication. The result is a highly readable textbook.

Several areas of research are covered including the role of therapeutic agents in peptic ulceration and dyspepsia and the possibility for the future.

Professor Langman gives an impeccable if somewhat cynical review of upper gastrointestinal bleeding which again demonstrates the difficulty of organizing trials in this difficult field.

The 'gay bowel' is highly topical and can be guaranteed to fill any postgraduate lecture hall at any time of the year! There is also a mini-review of veterinary gastroenterology which shows that vets are often way ahead of the doctors in their diagnostic approach to disease but I would have liked to have seen more discussion in this part of the book on the relevance of animal to human disease.

Advances in paediatric gastroenterology are covered and the chapter on the pancreas by Joan Braganza is as comprehensive and up to date as anything I have read. For those not in the field however this could make heavy reading.

A lengthy chapter on CT scanning of the abdomen is welcome but could be improved by a judicious use of arrows on the radiographs. We are all familiar with CT scanning but those of us in district general hospitals may not see these images every day.

Virginia Allen-Jones and John Hunter present the controversial subject of food intolerance which unusually is not headed 'Food allergy'. This is a very restrained and useful account of evidence for and against food intolerance in disorders of the gut and particularly inflammatory bowel disease and the irritable bowel.

The book concludes with a full index and second index of more than 600 recent leaders and reviews covering all aspects of gastroenterology. It will be a very useful source of material for doctors who are presenting papers and cases at clinical meetings which is innovative and comprehensive. This is a most welcome *Recent Advances in Gastroenterology* and the new format does credit to the editor.

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Routine Cytological Staining Techniques: Theoretical Background and Practice, Mathilde E. Boon and Johanna S. Drijver. Pp. xi + 238, illustrated. Macmillan, Basingstoke, 1986. £25.00 (hardback), £10.95 (paperback).

Good cytodiagnosis is dependent on consistent, high quality preparation and staining of specimens, and although every

laboratory grows accustomed to its own artifacts this should not be an excuse for sub-optimal slides.

This book aims to provide insight into the mechanisms of routine staining processes so that they can be used effectively, and it certainly succeeds. Some chapters address the general principles of staining and fixation and then the specific issues of nuclear and cytoplasmic stains. The section on preparing cytological slides is particularly helpful and is illustrated with very clear diagrams. The instructions are clear and easy to follow, so that anyone attempting a new technique from them should be successful.

Details of all the methods mentioned in the text are included in an appendix at the end of the book which has the advantages of an uncluttered text and a separate recipe section, making the book easy to use. A short colour atlas section clearly illustrates many of the staining methods discussed.

The only possible criticism of this book is that it does not include immunotechniques and enzyme staining because the authors do not consider them to be routine. Since these methods are now widely available and used, a short section on their indications would be helpful.

Overall I very much enjoyed this book and would strongly recommend it to anyone involved in the study of cellular material either on a routine basis or for research. I am sure that most of them will learn something new, which they will want to put into practise.

Finally, the book is obtainable at a very reasonable price which is always an important consideration, but even more so nowadays.

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Slide Interpretation in Oral Diseases and the Oral Manifestations of Systemic Diseases, Crispian Scully and Jonathan Shepherd. Oxford Medical Publications. Pp. iii + 156, illustrated. Oxford University Press, Oxford, New York, Tokyo, 1986. £11.95.

This is another book in the increasingly popular slide presentation series aimed at those taking examinations. The authors are trying to aim the book at candidates for the BDS, FDS, MBBS, MGDS and MRCP examinations.

The photographs are generally of a high standard and the answers to the questions precise. However, there are a few exceptions to this. For example in Q2.13, the photographic series of Behçet's syndrome are not representative. A penile erosion rather than the typical ulcer is shown. Q1.13 shows a patient with a low velocity gunshot wound. The answer to the principles of management is given as airway control and control of local haemorrhage. No mention is made of circulatory shock – the patient looks profoundly shocked, if not dead!

Again the slides of herpes labialis and lichen planus were adequate, but more classic photographs of these lesions would have been helpful.

There is very little on oral manifestations of systemic disease and I expect few students sitting for MBBS and