

that a very small pericardial effusion can be diagnosed radiologically and even by percussion will meet with some scepticism. The radiological appearance which he refers to as the pericardial hydropic triangle due to a small but pathological pericardial effusion most cardiologists would accept as a pericardial pad of fat of no clinical significance.

The best part of the book is his description of the veins of the heart based on results of injecting them with a tin-cadmium alloy, the preparation being freed from tissue by the activity of ants. His claim that a solid stethoscope is a better conductor of heart sounds than the usual type consisting of hollow tubes needs confirmation.

S.O.

### PRACTICAL TEXTBOOK OF LEPROSY

By R. G. COCHRANE, M.D., F.R.C.P., D.T.M. & H. Geoffrey Cumberlege, Oxford University Press, 1947. Pp. 283. Price 42.

This book lives up to its title, for it is essentially practical throughout, and bears the stamp of wide experience. The author is convinced that the great majority of lepers are infected before the age of 15; that such infections occur mainly from household contact with a case of 'open' leprosy; and that the disease cannot be maintained in a community in the absence of child infection. The technique of examining suspected cases is admirably described. The old method of preparing smears by puncturing the skin with a needle has been entirely superseded, and the improved procedure for demonstrating the bacillus is carefully detailed step by step, and illustrated by explanatory photographs. Clinical features of the disease and its treatment are dealt with in the same practical and thorough fashion, with many helpful 'tips' and much wise counsel. There is a full account of the methods of leprosy control as illustrated by the leprosy campaign in the Madras Presidency.

The author's brief account of leprosy in England cannot pass unchallenged. He attributes the disappearance of the disease mainly to 'the strict laws of segregation.' Actually there was little real segregation, and the reading of the burial service over a living leper, as described, was never a general practice in this country. For example, the rules of the Sherburn leper hospital, the largest in England, expressly permitted inmates to receive their friends, and such visitors from a distance could remain for the night. Further, persistently troublesome lepers were expelled. Lepers, true or supposed, had a legal right to beg, and in some towns they could also take toll of food on sale in the market-place. They could refuse to enter a leper-house, and in 1344 it is recorded of St. Julian's that in general there were no more than three inmates, and sometimes only one, because of the difficulty of finding lepers willing to lead a restricted life.

An impressive figure, 283, is quoted as the number of leper-houses in England. The status of many of these alleged leper-houses is doubtful, and if it is assumed that at any period this number were

in active operation, each maintaining its specified complement of lepers, we are far from the truth. Some, like St. John's, Aylesbury, were nothing more than almshouses. In others, lepers and paupers had an equal right to the accommodation. Thus, for example, Ripon leper-house was endowed for 18 persons, leprosy or indigent; and St. Bartholomew's, Oxford, for two healthy inmates, and six leprosy or infirm. There were no lepers in either of these 'leper-houses' when visited by the King's Commissioners in 1341. Foundations established exclusively for lepers were transferred to other purposes. St. James's, Canterbury, endowed for 25 women lepers, was empty of lepers in 1341. Sherburn, founded for 65 lepers, in 1434, could produce only 13 poor men, and no lepers. Romney leper-house in 1363 is 'derelict and totally desolate,' because 'for long times past' no lepers could be discovered; it was repaired and put to other uses.

In this connection the Black Death is mentioned and its date in England given as 1340, instead of 1348-49.

These criticisms of what is only a short digression are not meant to detract from the merit of this authoritative textbook. It is Dr. Cochrane's hope that it will prove helpful to practitioners, to those in charge of institutions, as well as to the specialist. One does not require the special gifts of a prophet, or a prophet's son, to foretell the speedy fulfilment of his hope.

W.P. MacA.

### PSYCHOPATHOLOGY—A SURVEY OF MODERN APPROACHES

By J. ERNEST NICOLE, O.B.E., L.M.S.S.A., D.P.M., R.C.P. & S. Baillière, Tindall and Cox. 4th Edition. 1946. Pp. viii and 268. Price 15s.

'The author hopes he has been successful in marshalling some sort of orderly disposition out of the chaos of modern theory.' This phrase from the editorial of the first edition summarizes the aims of this very readable book which to the student and general practitioner has done more to clarify a very clouded picture than any other. As an introduction to the subject for those specializing in Psychiatry it cannot be bettered especially in view of the up-to-date bibliography with its well selected priorities for further reading.

The Fourth Edition appears with few alterations, the theories of the various schools are reviewed with clarity, woolly and unnecessary verbiage has been ruthlessly discarded. The author makes a plea for a unified terminology and it is to be hoped that this helpful suggestion will be realized speedily and not be relegated, as it seems has the New Classification of Psychiatric Disorders, to the limbo of forgotten things.

The chapter on Eclectics and Characterologists is of great value, the author stresses that there is in this country a growing class of psychotherapists whose outlook is largely Freudian without being 'all Freud and nothing but Freud.' Crichton-

Miller's brilliant quoted summary of Prinshorn's views directs those who are more concerned with the individual than with statistics to the latter's works especially to his Psychotherapy. Horney's views have been somewhat modified in her most recent book but they show a refreshing departure from orthodoxy.

This book is stimulating and helpful especially to those whose interest in the individual is paramount, in addition it is comprehensive in spite of being short and is always readable.

S.M.W.

#### VITAL STATISTICS AND PUBLIC HEALTH WORK IN THE TROPICS

By P. GRANVILLE EDGE, O.B.E., D.Sc., Baillière, Tindall and Cox. 1947. Pp. 265. Price 15s.

This is a most readable, instructive and entertaining account of vital statistics in relation to tropical populations. It deals with the importance of keeping health records, with the difficulties that native beliefs and superstitions may put in the way of obtaining such records, and with the methods that knowledge and experience have shown to be of value in approaching primitive peoples. Methods both orthodox and unconventional for estimating populations are discussed. A chapter on health records then follows with many interesting observations on how the superstitions associated with conception, pregnancy and childbirth may adversely influence such work. Similar chapters on sickness records and death registration are given. The importance of the nomenclature of diseases, especially in medical reports and statistical surveys, is discussed; and the necessity for unambiguous and accurate reporting is stressed. In the last chapters the value of vital statistics not only to provide knowledge necessary for the efficiency and smooth running of a health administration but also to provide the necessary administrative and sanitary sign-posts to further development are discussed. There is also a good bibliography and subject index given. Finally there is an interesting appendix on the development and genealogy of vital statistics in general. The book is well written, moderately priced and of convenient size. It is singularly free from typographical errors and it is well printed and bound. It will obviously be read by all vital statisticians, but over and above this it should have

a wide appeal; and no one interested in tropical health or working with tropical peoples should omit to read it. It is no 'dry-as-dust' account of vital statistics and, while it gives a clear and direct account of the essential recording necessary to understand the health of primitive populations, it is, at the same time, packed with fascinating observations and general comments on native customs that give it an entertainment value as admirable as is its technical excellence.

#### MEDICAL DISEASES IN TROPICAL AND SUB-TROPICAL AREAS

The War Office. 8th Edition. His Majesty's Stationery Office, London. 1947. Price 7s. 6d.

The eighth edition of this work follows the form of the previous editions in that adequate accounts of the commoner conditions encountered in the Tropics are given under an alphabetical arrangement of diseases. Such an arrangement may have certain disadvantages in the systematic presentation of diseases but it has the advantage of giving the practising physician in the field a ready means of reference to any condition about which he may wish to read. In this new edition chapters have been added on infective hepatitis, nutritional diseases, tropical eosinophilia, the sulphonamide drugs and D.D.T. On the other hand, certain related conditions, which were previously separated, have now been brought together under single headings. In addition, new advances in knowledge have been incorporated into some of the older chapters and the result is that a first-class handbook has been produced which will maintain the valued position that previous editions have deservedly earned. At the same time the pace of modern advances in medical knowledge has so far outstripped the facilities for printing, in these days of delays, that certain of the more recent discoveries appear under-emphasized. For example, about 12 pages are devoted to the treatment of malaria but less than one of these is given to paludrine.

The book contains very few typographical errors and the printing and binding are excellent. In fact it is printed throughout on art paper which must be the admiration and envy of many less fortunately placed authors and publishers struggling to conform with the economy standards of today.

F.M.