

Postgraduate Medical Journal

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All editorial correspondence should be addressed to Dr A. A. G. Lewis, The Postgraduate Medical Journal, 9 Great James Street, London, W.C.1 (tel: 01-242 6900).

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The Fellowship of Postgraduate Medicine was founded by a group of London consultants after the First World War to assist postgraduates, particularly those coming to London from the Commonwealth, to pursue their studies. The Fellowship first published the *Postgraduate Medical Journal* to give informa-

tion about lectures, conferences and courses and to provide a monthly review of all branches of medicine.

Postgraduate Medical Journal publishes original papers on subjects of current clinical importance and welcomes review articles with extensive, up-to-date bibliographies as guides to further reading. Several symposia are published every year, each devoted to a single subject and written, by invitation, by specialists in different disciplines. Most issues include authoritative Current Surveys of clinical problems, as well as well-documented Reports of cases of particular interest, Correspondence and Book Reviews.

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Books received

Neurohypophysial Hormones. Edited by G. E. W. WOLSTENHOLME and JOAN BIRCH. Ciba Foundation Study Group No. 39. Pp. 146, illustrated. Edinburgh: Churchill Livingstone, 1971. £1.75.

Congenital Deformities of the Testis and Epididymis. By C. GORDON SCORER and GRAHAM H. FARRINGTON. Pp. 203, illustrated. London: Butterworths, 1971. £4.20.

A Colour Atlas of Oro-Facial Diseases. A Wolfe Medical Atlas. By L. W. KAY and R. HASKAL. Pp. 288, illustrated. London: Wolfe Publishing Ltd, 1971. £3.25.

The Metabolic Basis of Surgical Care. By WILLIAM F. WALKER and IVAN D. A. JOHNSTON. Pp. 251, illustrated. London: William Heinemann Medical Books Ltd, 1971. £3.00.

Biological Tissue in Heart Valve Replacement. Edited by M. I. IONESCU, D. N. ROSS and G. H. WOOLER. Pp. 925, illustrated. London: Butterworths, 1971. £22.00.

You and Your Guts. By CLIFFORD HAWKINS. Pp. 30, illustrated. A Family Doctor Booklet. London: British Medical Association, 1971. 10p.

Tracheostomy and Artificial Ventilation in the Treatment of Respiratory Failure. Edited by STANLEY A. FELDMAN and BRIAN E. CRAWLEY. Pp. 151, illustrated. London: Edward Arnold (Publishers) Ltd, 1971. £3.00.

Principles of Pathobiology. By MARIANO F. LAVIA and ROLLA B. HILL JR. Pp. 281, illustrated. London: Oxford University Press, 1971. £3.25.

Epidemiology as Medical Ecology. By W. H. LE RICHE. Pp. 460, illustrated. Edinburgh: Churchill Livingstone, 1971. £6.00.

Book reviews

The Exocrine Pancreas

Edited by I. T. BECK and D. G. SINCLAIR. Proceedings of a symposium held at Queen's University, Ontario, in June 1969. Pp. 278, illustrated. London: J. & A. Churchill, 1971. £4.00.

For those in any way involved in diseases of the pancreas this is a book which is well worth reading.

A wide selection of workers in the field, consisting of scientists, clinical investigators and clinicians have contributed papers so that the work covers a wide range of topics on both the normal and abnormal pancreas.

The book is conveniently divided into sections; dealing with morphology, physiology, specific pancreatic diseases, diagnosis and clinical aspects.

Each contributor has successfully done his best to make his paper interesting, precise, and not too lengthy. Numerous references are given at the end of each paper and a short summary is also given.

Discussions included in reports on symposiums often tend to be lengthy, however, the discussions which conclude each chapter in this book are, in the main, summarized, and complete each paper by answering any queries which may arise in the preceding work.

The first third of the book deals with topics such as functional anatomy, water and electrolyte secretions and the enzymology of the pancreas.

Acute pancreatitis is to many clinicians a diagnostic headache. Similarly logical treatment of this disease is difficult, mainly because the basic pathological changes are incompletely understood. A complete section is devoted to this complaint, dealing with the proteolytic enzymes, histopathology and plasma lipid changes. Much of the experimental work is on animals, but references to the pancreatitis in man are repeatedly made and certainly give one a better understanding of the underlying histopathology.

Diagnostic aspects have a complete section to themselves. Carcinoma of various parts of the pancreas, chronic pancreatitis as well as cysts and pseudocysts are discussed. A large part of the section is devoted to the roentgenological manifestations of pancreatic disease, with an interesting paper on the role of isotopes in diagnosis completing the section. Numerous detailed X-ray plates are reproduced making this part of the book of particular interest to the radiologist.

With the genetic aspect of diseases coming more into the foreground, this book would be incomplete without mention

of this. The book concludes with discussions on cystic fibrosis and the genetic childhood pancreatic diseases. Interesting reference is made to hereditary pancreatitis, examples of which have been reported mainly from the United States, but also from France and New Zealand.

Clinical Chemistry and Automation

By RONALD ROBINSON. Pp. 187, illustrated. London: Charles Griffin, 1971. £3.20.

This is an excellent book on a very difficult subject—difficult not only because it is changing so fast but also because it still arouses instinctive distaste in many doctors. The idea of automated medicine, whether in clinical practice or in the laboratory, seems absurd; and if automated clinical practice still seems remote, the same was true of automated laboratories 20 years ago. (One can easily picture the self-service out-patients department of the future where patients will feed their symptoms into a computer, collect their own diagnosis and treatment slips, and present themselves for the automated dispensing of drugs, appliances and even psychiatric advice on tape.) Dr Robinson overcomes such sales resistance partly by writing in a style which is both simple and elegant and partly by his complete and balanced mastery of the subject. In less than 200 pages he covers work simplification, analytical errors, various ways of recording, processing and transmitting data, quality control and most types of current equipment available: in short, he provides both a theoretical introduction and a practical guide. That his book will be of interest to all clinical chemists goes without saying; but it should be of almost equal value to clinicians who increasingly depend on automated laboratories. Perhaps the least satisfactory chapter is the one entitled 'Whither Clinical Chemistry', not because the author's clarity of thought and gift of words desert him but because of the question asked. Whither indeed? In this country our potential for collecting chemical data is already vastly in excess of what we can intelligently apply to clinical problems; and, like the craze for new cars, new fridges, and new drugs, the potential is still increasing.

The book is well produced and a pleasure to handle. Some of the quotations at the heads of chapters are apt: others merely show that the greater the man, the more monumental the platitude.

Postgraduate Medical Journal: Notice to Contributors

Typescripts (two complete copies) should be sent to the Editor, Dr A. A. G. Lewis, Postgraduate Medical Journal, 9 Great James Street, London, W.C.1. Papers should be typewritten on one side of the paper only, with a 1½ inch margin, and the lines should be double-spaced. In addition to the title of the paper there should be a 'running title' (for page headings) of not more than 45 letters (including spaces). The paper should bear the name of the author(s) with their degrees and descriptions and of the laboratory or research institute where the work has been carried out. The full postal address of the principal author should be given as a footnote. (The proofs will be sent to this author and address unless otherwise indicated.)

Arrangement. Papers should normally be divided into: (a) Summary, brief, self-contained and embodying the main conclusions; (b) Introduction; (c) Materials and methods; (d) Results, as concise as possible (both tables and figures illustrating the same data will rarely be permitted); (e) Discussion and conclusion; (f) Acknowledgments; (g) References.

References. Only papers closely related to the author's work should be included, exhaustive lists should be avoided. References should be made by giving the author's surname, with the year of publication in parentheses. When reference is made to a work by three authors all names should be given when cited for the first time, and thereafter only the first name, adding *et al.*, e.g. Smith *et al.* (1958). The '*et al.*' form should always be used for works by four or more authors. If several papers by the same author and from the same year are cited, a, b, c, etc., should be put after the year of publication, e.g. Smith *et al.* (1958a). All references should be brought together at the end of the paper in alphabetical order. References to articles and papers should mention (a) name(s) of the author(s); (b) year of publication in parentheses; (c) title of paper; (d) title of journal in full, underlined; (e) volume number; number of first page of article. References to books and monographs should include (a) name(s) and initials of author(s) or editor(s); year of publication in parentheses; (b) title, underlined; (c) edition; (d) page referred to; (e) publisher; (f) place.

Standard usage. The *Concise Oxford English Dictionary* is used as a reference for all spelling and hyphenation. Verbs which contain the suffix *ize* (*ise*) and their derivatives should be spelt with the *z*. Statistics and measurements should always be given in figures, i.e. 10 min, 20 hr, 5 ml, except where the number begins the sentence. When the number does *not*

refer to a unit of measurement, it is spelt out except where the number is greater than one hundred.

Abbreviations. Abbreviations for some of the commoner units are given below. The abbreviation for the plural of a unit is the same as that for the singular unless confusion is likely to arise.

gram(s)	g	second(s)	sec
kilogram(s)	kg	cubic millimetre(s)	mm ³
milligram(s)		millimetre(s)	mm
(10 ⁻³ g)	mg	centimetre(s)	cm
microgram(s)		millicurie(s)	mCi
(10 ⁻⁶ g)	µg	millilitre(s)	ml
nanogram(s)		pound(s)	lb
(10 ⁻⁹ g)	ng	milliequivalent	mEq
picogram(s)			
(10 ⁻¹² g)	pg	R _F values	R _F
hour(s)	hr		
minute(s)	min	gravitational acceleration	g
micron(s)	µ	percent	%

Example: mg/100 ml, for biochemical values; mEq/l

Figures. In the text these should be given Arabic numbers, e.g. Fig. 3. They should be marked on the backs with the name(s) of the author(s) and the title of the paper. Where there is any possible doubt as to the orientation of a figure the top should be marked with an arrow. Each figure must bear a reference corresponding to a similar number in the text. Photographs and photomicrographs should be unmounted glossy prints and should not be retouched. Line diagrams should be on separate sheets; they should be drawn with black Indian ink on white paper and should be about four times the area of the final reproduction. Lines and lettering should be of sufficient thickness and size to stand reduction to one-half or one-third. Letters and numbers must be written lightly in pencil. Whenever possible, the originals of line diagrams, prepared as described above, should be submitted and not photographs. The legends of all the figures should be typed together on a single sheet of paper headed 'Legends to Figures'.

Tables. There should be as few tables as possible and these should include only essential data; the data should not be crowded together. The main heading should be in capitals with an Arabic number, e.g. TABLE 2. Each table must have a caption in small letters. Vertical lines should not be used.

Page proofs will be submitted to the contributors for minor corrections and should be returned to the Editor within 3 days. Major alterations to the text cannot be accepted.

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