# **Book reviews**

#### Alder Hey Book of Children's Doses

(Fourth edition). Pp. 39, paper cover. Liverpool Area Health Authority (Teaching). Obtainable from Pharmacy Office, Alder Hey, Children's Hospital, Eaton Road, Liverpool L12 2AP, 1979. 40p (postage included) (Europe 50p, overseas 60p).

This booklet gives details of drug administration as prescribed at the Alder Hey Children's Hospital. It also gives information on the presentation of the various formulations. Total daily doses are quoted, the divided dose necessary must then be calculated. A comprehensive list of preparations is then provided, following brief general comments on mean body weights, metric conversions, and the theoretical percentages of adult doses at different ages. A surface area nomogram is also available. Separate sections are included on the use of digoxin and anti-convulsants. It is not a comprehensive vade mecum intended to give advice on the management and treatment of emergencies in childhood. Nevertheless, its accurate and lucid presentation should assure it a useful place in the pocket of many a hard-pressed resident in paediatrics.

## Atlas of the Newborn

By Neil O'Doherty. Pp. 412, illustrated. MTP Press, Lancaster. 1979. £14.95.

It is very difficult to review an atlas as one must use words to describe and criticize or complement, and one knows each picture is worth a thousand words. The Atlas of the Newborn by Dr Neil O'Doherty provides the student and the practitioner with a ready reference to a myriad of common everyday and not so everyday neonatal problems. It is organized under several subheadings which are both logical and add to the ease of identifying the clinical problem. The pictures are of good quality and adequate contrast.

The text does not lay claim to be authoritative but does provide a useful guide although I found it awkward to flip from text to picture and back again and would have preferred it to be better placed with the photographs in question.

The book is useful for the medical student, house officer, nursing staff and consultants as a pictorial reference to complement both clinical situations and other more wordy textbooks. An atlas such as this does have a place in the nursery office as well as the library.

#### **British Medical Bulletin**

Volume 35, Number 1, January 1979. Influenza. Pp. viii+96, illustrated. Medical Department, The British Council, London, 1979. £5.00 (U.K.); £6.00 (other countries); \$12.50 (U.S.A. and Canada).

Influenza is of considerable importance in terms of worldwide morbidity and mortality. Antigenic variation of influenza A virus, which leads directly to new epidemics of disease, has for many years been of interest to the epidemiologist and virologist and a source of some anxiety to us all.

For the past 30 years, new antigenic forms of influenza A virus have replaced existing viruses. In December 1977, the H3N2 strains of 'Hong Kong' virus which had been prevalent for 10 years, were joined by the H1N1 virus which had previously caused disease in the decade 1947–1957. This unusual situation has continued for more than one year and there is no sign at present of disappearance of the H3N2 strains.

A fundamental question from the standpoint of controlling human influenza is the nature of the survival of viruses such as the H1N1 strains during their apparent absence from man. Of even more importance is the need to understand the origin of new, previously unrecorded antigenic variants such as the Asian H2N2 virus of 1957.

No answers to these questions are provided by this bulletin, but there are certainly some clues. The papers dealing with physicochemical analysis of the virus are of particular interest because they now relate so directly to epidemiology and immunology. The papers describing vaccination and chemotherapy which are both well presented, describe the present situation and difficulties, and indicate possible future developments.

Following the pattern of previous volumes in the series, this set of reviews is of a high standard and will be welcomed by many in medicine, microbiology and allied fields.

#### By Guess or by What? Information with Design in the NHS

Papers by P. D. Fox, and others. Edited by Gordon McLachlan. Problems and Progress in Medical Care. Essays in Current Research 11th series. Pp. 125, soft cover. Nuffield Provincial Hospitals Trust: Oxford University Press, 1978. £4.00.

These four papers are something of a mixed bag in terms of their grasp of the general subject matter of the volume. More than half the space is taken up by an essay (intended also for an audience in the U.S.A.) by Mr P. D. Fox of the U.S. Department of Health, Education and Welfare, who spent 1976–77 at the Department of Community Medicine, St Thomas's Hospital Medical School. Two other papers follow-up some of the leads established by Mr Fox, with particular reference to the position of 'managers' in the NHS service since the 1974 re-organization, while the final paper concentrates on some specific issues arising from current mortality rates in Scotland.

Mr Fox recognizes the achievements of the NHS, and its potential for even greater effectiveness: he points out that some criticisms are made on unsure foundations, e.g. the dubious reliability of waiting-list statistics, and the lack of accountability in regard to the operation of much primary care. He does, however, also assess very objectively the planning problems that exist in the 1974 NHS structure, many of them arising from the inadequate collection of medical and financial information - although there is now a greater awareness of the need to establish and use appropriate data systems. As he reminds his readers, the DHSS 'Priorities' document and the RAWP report (both of 1976) reflect the degree to which geographical imbalances in the provision of medical care remain to a great extent what they were in 1946. He concludes that many of the problems encountered by the NHS are of a kind to be met with in most medical care systems in the Western world.

Mr E. G. Nelson (Durham University Business School) discusses the elusive concept of 'standard of care' and its relationship to given levels of financing in the NHS. This prompts questions about accountability for the management of the service and the part to be played therein by the members of the health care professions themselves.

Mr R. F. A. Shegog (Deputy Secretary of the Nuffield Provincial Hospitals Trust) refers to the recent work which has been undertaken on the training of managers in the NHS. He notes the importance for the on-going planning process of skills in numeracy and information-handling, and suggests that their absence has contributed to a lack of

progress in establishing adequate management information systems and in co-ordinating the work of the health teams.

Dr M. A. Heasman (Scottish Health Service Information Division) contributes a statistician's approach, which suggests that, whereas morbidity rates are not unduly high, levels of mortality do remain so despite generous levels of NHS financing in Scotland. The next question must surely be 'why?'.

#### Clinics in Haematology

Volume 8, Number 1, Feb. 1979. Congenital Coagulation Disorders. Edited by C. R. Rizza. Pp. 217, illustrated. W. B. Saunders, London, Philadelphia and Toronto, 1979, £8.25.

The Clinics in Haematology series have become the best of their kind in the field. They provide cover in depth by experts in the field and they are up to date. The number on Congenital Coagulation Disorders edited by Dr Rizza of Oxford, maintains the high level of the series. The contributors are drawn from the U.K., U.S.A. and Europe and provide authoritative accounts of the basic chemistry, physiology and clinical pathology of the congenital coagulation disorders.

Factor VIII and the von Willebrand's complex has been in the forefront of developments and these are covered by Drs Austen and Bloom at the basic level, Drs Lowe and Forbes at the laboratory bench and by Drs Biggs, Graham, Nilssen and Holmberg at the clinical level.

There are further chapters on abnormalities of fibrinogen and on therapeutic materials. There is a final chapter on antibodies and inhibitors to coagulation factors.

This book is recommended unreservedly to those engaged in the field and is a worthy addition to the series.

### Coming to Terms with Chronic Bronchitis and Emphysema

By CLIVE McGAVIN. Pp. 23. Chest, Heart and Stroke Association, London, 1979. 30p.

This slim 23-page pamphlet is aimed at our overweight, gregarions, extrovert, heavy-smoking, sexually-active bronchitics and, in simple language, endeavours to persuade them to lose weight, give up smoking, have influenza vaccination, take diuretics if ankles are swollen, puff drugs if they wheeze, and learn breathing exercises. This is all solid, sound advice which the doctor can now dispense by means of this booklet in order to save his own breath. Some bits are a little vague even for a doctor so the patient may also be perplexed. For instance, '... if breathlessness interferes with sexual intercourse, try not to let it (breathlessness) put you off... Discuss the matter frankly with your partner . . . You may find it more satisfactory to take the less strenuous, more passive part...'. Active or passive, the patient is advised to keep smiling - 'Above all, be cheerful in spite of your difficulty . . . do not neglect to wash and shave'.

The Chest, Heart and Stroke Association is doing an outstanding and excellent job of work, but I cannot help feeling that their founder-secretary, Harley Williams, would have produced a more penetrating, intelligent and amusing handout for disabled patients; with exhilarating cartoons to dispel the gloom behind the topic. This booklet contains much helpful information and common sense but it is too sobersides for the doctor and also possibly for many of his patients. Would that the Chest, Heart and Stroke Association would commission their bronchitic and emphysematous patients to produce the next edition. It would be a best-selling riot.

# Five Years After. A Review of Health Care Research Management after Rothschild

Edited by GORDON McLACHLAN. Pp. 85. Occasional Hundreds 9. Soft cover. Oxford University Press, Oxford, 1978. £2.25.

The volume comprises a short report by a Nuffield Working—Party on the existing framework provided for government—of financed research into health care; it is preceded by an essay—from Professor T. P. Whitehead which summarizes the—history of research arrangements available before the—Rothschild Report of 1971 and gives a critical account of developments since that time.

Professor Whitehead describes briefly the development of the view that inadequate research was being undertaken into the epidemiological and social aspects of the NHS, and that the MRC had contributed little in this field. At the same time, the other independent Research Councils were coming underscrutiny in terms of 'practical' objectives, so that by the late \$\frac{1}{2}\$ Scrutiny in terms of 'practical' objectives, so that by the late \$\frac{1}{2}\$ functions, especially in view of the exponential growth in all \$\frac{1}{2}\$ functions, especially in view of the exponential growth in all \$\frac{1}{2}\$.

The Rothschild Report not only preached the philosophyon of customer-contractor in Government sponsored research, but in the medical field as elsewhere it proposed a specific form of organization under a Chief Scientist in the Departice ment concerned, with wide ramifications to stimulate and influence research programmes. Arrangements were alsoop proposed for co-ordinating the requirements of government research and development in the areas of the Research political reasons, the Chief Scientist's organization without the DHSS remained small and it was impossible to encompasse within it all the relevant research effort of the Department of

The proper development of a customer-contractor approach therefore has failed in the DHSS, and the members of the Nuffield Working Party express concern about the resulting situation with its lack of any co-ordinated approach to research projects – despite the growing recognition that recent technological advances in medicine have not resulted in comparable improvements in community health generally. The Working Party recommends the creation of some core organization to take a review of research into health care, on an auggests the desirability of bringing into account the one day and interests of the 'operating' authorities at Regional, Area and District level.

The papers concentrate on an MRC viewpoint by and large and some basic questions of principle remain to be explored. Is it entirely desirable, for example, for 'research work' in specialized units to be a life-long career? Again, to what extent could it be accepted that some of the investigations into the operation of the NHS and the development of health care may properly fall within the sphere of the SSRC?

# Gaddum's Pharmacology

(Eighth edition). Revised by A. S. V. Burgen and J. F. MITCHELL. Pp. 369, illustrated. London, New York, Toronto: Oxford University Press, 1978. £4.50.

Remarkable developments in pharmacology have taken oplace since 1940, when the first edition of Gaddum's Pharmacology was published. Over the intervening years, countless doctors, all over the world, must surely owe their of understanding of pharmacology to thorough undergraduate cading and re-reading of 'Gaddum' as it has become known with esteem and affection.

In preparing the eighth edition of this classic text, No Professors Burgen and Mitchell have retained the compact style of the original form of the book. Yet they have succeeded in introducing selective accounts of some of the most rapidly advancing growth areas of the subject since their last