essentially a clinical text. It is assumed that the reader already has a sound knowledge of the anatomy, physiology and biochemistry of the gut and liver. I doubt if this assumption is justified and I suspect that many will read it without understanding the pathophysiology of the disorders which are discussed.

The book is well written. Most of the advice is sound. But in the quest for brevity, inevitable errors have crept in. Few would agree that the success of duodenal ulcer therapy must be judged by symptomatic response *and* endoscopy! In the differential diagnosis of appendicitis, no mention is made of non-specific abdominal pain, unless this subsumed under the term mesenteric adenitis. With modern techniques for the diagnosis of obstructive jaundice, the diagnosis of carcinoma of the bile duct should be made before surgery reveals a swollen liver and collapsed bile ducts. Serum ferritin is almost always elevated in untreated haemochromatosis. Endoscopic cholangiography is more useful to demonstrate bile ducts which do not appear dilated on ultrasound; it is not a straightforward alternative to percutaneous cholangiography. Such errors, of course, occur in all short texts.

In a recent bookseller's list, this was one of nine low-priced books on gastroenterology aimed at the same market. I have grave reservations about the value of any of them. They are rarely of value when dealing with individual patient problems. It may appear idealistic, but I believe we should discourage the use of books written, and certainly read, with examinations in mind. Surely our students should be learning to use the reference sources to which they can turn for practical help after qualification.

However, if students are going to go for a short textbook, at least Professor Langman's has the advantages of clarity and low cost.

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Inequalities in Health, The Black Report

By DOUGLAS BLACK, J. N. MORRIS, CYRIL SMITH and PETER TOWNSEND. Edited by PETER TOWNSEND and NICK DAVIDSON. Pp. 240, illustrated. Penguin Books, London, 1982. £2.50.

Though our press assumes, for the most part, that mass literacy is useful only for entertainment, government white papers can, in the right circumstances, be best sellers. The Beveridge Report, published in 1942, sold over a million copies to the general public, and a Gallup poll, taken only 2 weeks after its publication, showed that 19 out of every 20 adults were familiar with its main provisions. No one suggests that the Black Report will attain these sales, but mass printing in paperback 2 years after its original publication as 260 duplicated copies on a bank holiday weekend, complete with a dismissive preface by Secretary of State Patrick Jenkins, is a considerable achievement.

Sir Douglas Black has a wry wit, Peter Townsend, Jerry Morris and Cyril Smith write with passion, but none would attribute success to any best-selling qualities of their own; like Beveridge, they chose the right theme at the right time.

Of course, the times are entirely different. The Beveridge Report was seized by the people as a promise of a new world after the war. The unexpected scale of their response made it a *de facto* declaration of war aims, a huge boost to morale at a critical point in the war. The Black Report, on the other hand, is armament for resisting the dismantling of the health and other social services by our own government. It offers not only conclusive documentation of and argument against our increasing social polarisation in health status, but also a defined and (contentiously) costed package for first steps in dealing with the problem, ready to be taken up by opposition parties. Its wide circulation through this paperback edition could make health care a subject of well-informed debate in the run-up to the next election, and doctors who have not yet read it should take this opportunity to do so. The shortening of the original report is entirely to its advantage: all its important data remain, in a more digestible form.

This will almost certainly be the main field of battle on which the

future of our health service will be determined. Whatever their present views, none working in the NHS can afford not to read it.

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Long-term Prescribing. Drug Management of Chronic Disease and Other Problems

Edited by ERIC WILKES. Pp. 269, illustrated. Faber & Faber, London, 1982. £15.00 (cased), £10.00 (paper-cover).

This book, edited by a professor of Community Care and General Practice, is written mainly by consultants in various disciplines from Sheffield with some chapters by other specialists and 2 general practitioners. The intended audience is not clearly defined, but it can be inferred from the introduction that it is intended for general practitioners of all grades of seniority. Arrangement of the book is by topic, thus the first chapters cover ischaemic heart disease, hypertension and chronic bronchitis. In each chapter the place of non-drug measures is properly placed before that of specific pharmacotherapy. Each chapter is succinct, clear, digestible and accurate.

Some chapters are a little thin—particularly those on thyroid disease and psychotropic prescribing, and I would like to see a contribution on the principles of drug selection, placebo responses and patterns of prescribing in the next edition. I enjoyed reading this book immensely, and can recommend it wholeheartedly to hospital doctors as well as general practitioners as a useful refresher for prescribing in chronic disease.

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Obstetric Analgesia and Anaesthesia: Current Reviews in Obstetrics and Gynaecology, 1

By J. SELWYN CRAWFORD. Pp. 154. Churchill Livingstone, Edinburgh and London, 1982. £6.00.

The intended audience of this book is obstetricians studying for their membership examination and those who wish to update themselves in obstetric analgesia and anaesthesia. This it does very comprehensively and must be a valuable guide. In particular it draws upon Dr Crawford's extensive personal experience and consequently is able to offer its reader many practical tips particularly in relation to the provision of epidural analgesia. Although some of the views expressed are controversial, the book is very well referenced and does not only present the author's personal views.

There are one or two obvious typographical errors: in particular on p. 29 in the fourth paragraph 'preparatory anticholinesterase' should read 'anticholinergic' and on p. 32 'the more soluble the drug' should be 'insoluble'.

This book reflects the high standards of obstetric anaesthetic practice in Dr Crawford's unit and is well worth £6.

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Poisoning, Diagnosis and Treatment

Edited by J. A. VALE and T. J. MEREDITH. Pp. xi+220, illustrated. Update Books (Publishers) MTP Press, Lancaster, 1981. £13.50 (hardback), £11.00 (paperback).

This book deserves its place in the Update series, for it combines an educative role on the mechanisms underlying chemical toxicity, drug and non-drug, in man, with detailed helpful discussions on patient management.

It is written by a group of authors with considerable experience in the treatment of poisoning. Recent advances in analytical techniques and in methods to assist drug elimination and maintain vital

functions, should ensure the place of this book in all medical libraries, casualty departments and general practitioner bookshelves.

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Psychiatry Revision. Aids for Postgraduate Trainees

By DORCAS BIRD, JONATHAN BIRD and GLYNN HARRISON. Pp. 352. Churchill Livingstone, Edinburgh, 1982. £6.00.

This is an interesting new book written by 3 young psychiatrists of Senior Registrar status who have recently obtained their M.R.C.Psych. It is divided into two sections of equal length on multiple choice questions and on essay questions and a shorter, middle section giving details of specimen case histories with specimen answers to questions about them. The book is clearly going to be very useful and it is likely to help many preparing for the M.R.C.Psych. examination at which it is specifically aimed.

The first section on multiple choice questions is very wide in its scope and very searching. It covers child psychiatry and psychotherapy and subnormality as well as the usual range of adult work. It seems to the reviewer, who is unfortunately some 20 years on from doing the examinations himself, that the level of detailed knowledge needed is considerably greater than is perhaps clinically necessary, and much of the information requested is of the sort that one might look up in a book if it were wanted.

The case histories are really very straightforward after the multiple choice questions and are about patients that one might quite readily meet and the diagnosis is usually not difficult. The differential diagnoses are however well discussed. It is a pity that there are no cases of neurotic illness and little attempt to pick up pointers in psychotherapy that might have come up in the more complicated case histories that might then have been obtained.

The last section of chosen essay questions could do very well in its own right for a mini textbook. Most of the difficult and contentious areas of present day psychiatry are fully discussed. Many of the essays are model answers and the few references for extra reading will obviously be extremely helpful.

In sum, this is a very useful book which is likely to fill a gap and to go on to further editions.

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Sexual Abuse. Incest Victims and Their Families

By JEAN GOODWIN with contributors. Pp. 209. John Wright, PSG Inc., Boston, Bristol, London, 1982. £13.50.

It is 20 years since Kempe made physicians aware of the fact that Caffey's syndrome was caused by parents battering their children and not by some rare genetic defect. Physicians have always been aware of the intrafamilial sexual abuse of children, but have comforted themselves with the thought that it was a rare phenomenon. They can comfort themselves no longer. This book, well organised and well written as it is, makes sickening reading, but those of us who have the professional care of children will have to read it. Jean Goodwin, psychiatric consultant to a child care protection agency in New Mexico, relentlessly builds up an irrefutable case for doctors becoming more alert to the problem of sexual abuse of children. She reports her study of 500 mothers in the general population and 100 mothers with abused children (physical and sexual) and has shown that even in normal populations intrafamilial sexual abuse in childhood occurred in 3% of the mothers. In mothers of abused children, it rises to 24%. So it is clear that, unless New Mexico is remarkably different from the United Kingdom, we are still not recognising the majority of the cases. Does it matter? Goodwin deals with this question impressively. False incest accusations represent less than 5% of their cases. In most, the father-daughter incest has started early and continued over many

years. Often more than one child in the family is involved. The child is seriously developmentally impaired and in adolescence, suicide attempts, absconding and hysterical epilepsy are common. The genetic consequences to incestuous offspring are spelled out. And of course, the cycle repeats itself in the next generation. What can we do about it? In Santa Clara County, California, incest perpetrators are 'sentenced to treatment' and this book outlines the various treatment programmes including family therapy, individual and group psychotherapy, for parents and child, counselling by physicians who have access to psychiatrists' support, etc. She uses family stories, reproduced here, as a way of providing a language for young children to use. Always, the aim is protection for the child, but imaginative ways of avoiding family destruction are being developed.

Reading this book has convinced me that our neglect of this problem has condemned many children to unnecessary suffering.

It should be essential reading for paediatricians, gynaecologists and psychiatrists.

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Treatment of Burns

By J. S. CASON. Pp. 339, illustrated. Chapman & Hall, London, 1981. £15.00.

The standard British text on burns and their treatment was for many years Muir and Barclay's book, but as the last edition of this was published 10 years ago, there has recently been a need for a new book and Cason has fulfilled this need. The techniques described are mainly those used at the Burns Unit of the Birmingham Accident Hospital where Mr Cason is Surgeon-in-Charge, but he has been careful to describe other methods as well, including the very different management of shock found in some of the North American centres.

The book is full of useful information, yet the style is a little rigid and the organization somewhat odd. For instance, 'First aid and management of a small burn' comes in the last chapter of the book whereas I would have preferred it to be placed nearer the beginning. A casualty officer or registrar faced with the management of a burn would have difficulty in picking out the important points quickly, yet they are all there.

An introductory chapter is followed in the second chapter by the main substance of the book on 'Burns shock and its management'. At the end of this chapter on p. 54 is a useful list of actions to be taken in treating burns shock. As 50% of deaths are due to septicaemia, it is entirely appropriate that there is a full chapter on infection, and this leads to a description of the general management and the treatment of the burn surface, with techniques of skin grafting. It is a pity that skin grafting is followed and not preceded by an account of burn depth.

The problems of burn scarring are well covered, but I found some of the techniques with the tube pedicles a little dated. There are several chapters on burns at specific sites. The account of the psychological and psychiatric problems is very helpful and applies to other accident situations. Although much of what is said is common sense, it helps to have it stated in print, so that all the staff (including the nurses) have an understanding of why a patient or relative should be unco-operative or belligerent. There is a good chapter on non-accidental injury, with instructions of what to do if you are suspicious of a case.

At the end of the book are 17 tables or lists some of which, but not all, are useful as references. Most of the pictures, charts and diagrams are clear and useful and each chapter has a list of the main references.

In summary, this is a useful book to have available for reference in any department dealing with burns and to be read by staff likely to manage these cases.

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