to the ophthalmologist with pupillary defects, the cardiologist with orthostatic hypotension, the geriatrician because of failure of temperature regulation, the genitourinary surgeon with a neurogenic bladder. In some patients autonomic failure is part of a more generalized neurological atrophy which includes parkinsonian features, but in others it is associated with systemic diseases such as diabetes, alcoholism, amyloidosis, or carcinomatosis. Certain features of autonomic failure may also be produced by drugs.

It is, perhaps, strange that such an important syndrome should only have become widely recognized within the last decade, and that only now should the first definitive textbook on it appear. It is appropriate that it should have been prepared under the general editorship and with significant contributions from Sir Roger Bannister, for he and his colleagues have played a major role in the definition and investigation of this syndrome and its underlying pathophysiological and pharmacological abnormalities. In general this is a scholarly and up-to-date presentation of the information currently available on this diverse syndrome, with critical discussions of those aspects which are particular subjects of controversy. Autonomic pharmacology and synaptic transmission are subjects which are undergoing rapid and radical changes, and some parts of this book may well soon be out of date. Nevertheless it represents the best review of the subject now available and will undoubtedly become obligatory reading by all training in neurology, and an important source of reference for clinicians and basic scientists who are involved in diagnosis, treatment or research in this fascinating syndrome.

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Beta Blockade in the 1980s: Focus on Atenolol. Proceedings of an International Symposium, Monte Carlo 7-10th June, 1982 Drugs, Supplement 2, Vol. 25, March 1983

Edited by J. I. S. ROBERTSON, N. M. KAPLAN, A. D. S. CALDWELL and T. M. SPEIGHT. Pp. ix + 346, illustrated. Adis Press, New York, Tokyo, Mexico, Sydney, Auckland, Hong Kong, 1983, Price not given.

This volume is the proceedings from a large successful symposium on β -blocking drugs held in June 1982. There are five sections divided between, hypertension, pharmacodynamics and pharmacokinetics of β -blockers, angina and arrhythmias, hypertension of pregnancy, cardioselectivity, the central nervous system and myocardial infarction. The papers are succinct accounts of the state of the art in a rapidly changing field.

Two topics which are particularly well covered are those on comparison of β -blockers with calcium entry antagonists and a summary on the risks and benefits of β -blockers. The volume is well produced and the type is clear, if a little small in some figures. On a personal note, I missed the discussions which followed the papers and which helped the symposium to achieve a lively success.

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Diagnosis and Management of Endocrine Diseases. Diagnosis and Management Series.

By ANTHONY D. TOFT, IAN W. CAMPBELL and JOHN SETH. Pp. vii + 414, illustrated. Blackwell Scientific Publications, Oxford, London, Edinburgh, Boston, Melbourne, 1981. £12.50.

This small volume provides an excellent guide to the clinical diagnosis and management of common endocrine problems, and should prove invaluable to the junior hospital doctor and MRCP candidate. The advice given reflects the wide experience of the authors and is a sound exposition of current British practice. Although the lack of any mention of paediatric endocrinology is understandable in a book of this size, there is a notable gap in the discussion of growth disorders as they present in an adult endocrine clinic. Diabetes and its complications account for over one-third of

the text, and while this may reflect the prevalence of diabetes mellitus in the general population, it must be asked whether it is right for a textbook of general endocrinology to have 14 pages on diabetic autonomic neuropathy, but not a single word on congenital adrenal hyperplasia.

Despite these criticisms, the book fulfils its purpose very well. The text is clearly written in short paragraphs with frequent subheadings, and is printed to a high standard. I would recommend it.

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Diagnosis and Management of Respiratory Diseases, Diagnosis and Management Series

By GRAHAM K. CROMPTON. Pp. ix + 269, illustrated. Blackwell Scientific Publications, Oxford, 1980. £9.80.

Some 5 years ago the publishers initiated a series of short texts on specialist subjects by younger physicians. The first of these was written by Dr Graham Crompton, Consultant Physician on the Respiratory Diseases Unit of the Northern General Hospital, Edinburgh and Honorary Senior Lecturer in the Department of Respiratory Diseases, Edinburgh University. The text is aimed at a wide readership including medical students, MRCP candidates, general practitioners and 'the clinician faced with a problem'.

The introductory chapter is devoted to clinical findings and investigative procedures. These include chest radiology, simple lung function tests and bronchoscopy. The remaining 19 chapters deal with individual diseases (e.g. chronic bronchitis, emphysema, bronchiectasis) or groups of diseases (e.g. occupational lung diseases, abnormalities of chest wall and diaphragm). The layout of these chapters consists of general considerations, complications, clinical findings, investigations, differential diagnosis and treatment. Useful tables and lists and 20 simple diagrams are included. No references or reference lists are provided, but a short list of recommended further reading is appended at the end of the book.

It was a pleasure to read this book as the style is clear with brief sentences and chapters. There would be a case for discussing complications after clinical findings as these often result from further progression of the disease process which has caused the symptoms and physical signs. A novel feature is the 'summary—special points of emphasis' at the end of each chapter. This highlights the important points covered. Curiously, in the chapter on tuberculosis, the importance of using two or more drugs in treatment was not included in this list. The description of radiological changes is sometimes vague (e.g. cystic fibrosis) and might be helped by line diagrams of chest radiographs.

Because of the request for a clear and concise text from one author, the style had to be dogmatic without discussion of controversial issues. Thus the author sometimes describes techniques and personal views that are not universally accepted. For example, not all respiratory physicians perform bronchography under general anaesthesia or at the same time as bronchoscopy and only a minority employ radiotherapy to peripheral lung nodules to assess whether or not they are malignant.

The first edition was published in 1980; thus some aspects are naturally out of date. There is no mention of the diagnostic value of bronchopulmonary lavage or the measurement of circulating lymphocyte subpopulations and serum angiotensin converting enzyme. Published and personal experience of tuberculosis cases relapsing after treatment nowadays has shown that the organisms are nearly always still sensitive to modern first line drugs. Mustine has been largely superseded by modern anticancer combinations in the systemic treatment of bronchial carcinoma and by bleomycin, tetracycline and C parvum in the management of malignant pleural effusions. Adjuvant immunotherapy has proved disappointing in patients undergoing resection of bronchial carcinoma and disodium cromoglycate can now be administered by pressurized aerosol inhaler.

Virtually all respiratory disorders are covered, although it was a surprise to find no mention of acute bronchitis. Pleural mesothe-