Essential Clinical Medicine, edited by R.H. Salter. Pp. x + 532, illustrated. Wright, Bristol, 1984. £9.95.

The best medical teaching is received on the wards. A good teaching ward-round can impart more knowledge than many hours spent in the lecture theatre. Unfortunately once a clinician has obtained his necessary qualifications, he is no longer exposed to this form of teaching, except possibly from his juniors or at hospital clinical meetings. Many become set in their ways, practising the medicine they were taught years before and often perpetuating the errors. Conventional textbooks cannot correct this problem but a clinician's vademecum might, and this is what 'Essential Clinical Medicine' edited by R.H. Slater attempts to be.

Each of the nine chapters in this 'bench-book' is written by an individual specialist about the common problems he encounters. The style is similar to that of a ward-round and the somewhat sketchy illustrations reminded me of those drawn by consultants on the backs of temperature charts. They are certainly easier to understand than many of the illustrations in conventional texts.

It will be interesting to see whether this book reaches a second edition. Its rather uncritical repetition of the given truth is however suitable for medical students or MRCP Part II candidates in the weeks prior to their orals and clinicals. The occasional error (fig. 6.3) can be forgiven, but I do feel that the treatment recommended for malignant hypertension (page 15) would cause more cerebral damage than it prevents.

As a mainstream account of contemporary British medicine as practised in the wards of a busy hospital, this volume can be recommended; whether any consultants or principals in General Practice ever read it is, sadly, uncertain.

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Medical Management of Endometriosis, edited by Jean-Pierre Raynaud, Tiit Ojasoo & Luciano Martini. Pp. xv + 307, illustrated. Raven Press, New York, 1984. \$47.00

This book is based on the proceedings of a symposium on the subject held in Cannes, in 1983. Over 70 contributors from Europe and America presented details of their experience of the pathology, phar-

macology and management of endometriosis. The editors and publishers are to be congratulated on the prompt publication of this volume which incorporates a large amount of previously unpublished data relating to the use of new drugs in the management of endometriosis. Not surprisingly there are a few chapters devoted strictly not to endometriosis but to related subjects such as the use of Gestrinone as a contraceptive agent or the study of peritoneal fluid in infertile women.

The book is in four sections. The first section deals with the pathophysiology and principles of treatment of endometriosis. Interesting information concerning genetic factors in endometriosis is presented, for example, endometriosis in Turner's syndrome (xo) or in the male (xy). Conclusions drawn from data presented concerning the relative merits of medical vs. surgical treatment, can be questioned on their scientific basis.

The second section deals with hormonal and biochemical control of endometriosis and the modifying influence of therapeutic administration of steroids and related agents. The role of various forms of steroid receptors is also discussed. The third section deals with pharmacological and clinical aspects of management with Gestrinone, danazol and related steroids. The fourth and final section deals with the initial experience of an LHRH analogue (Buserelin), followed by a general discussion of the principles of treatment of endometriosis. I found the discussion to be of more interest than some of the papers presented in the book.

There is a distinct bias towards pharmacology, biochemistry and cell biology rather than to clinical problems. Modes of action of various hormones on 'receptors' in endometrium and in endometriosis have been reported in some detail. Gestrinone is described as a progestogen (p. 131) and an anti-progestin (p. 134). This apparent contradiction, whilst factually correct, deserves further explanation. Detailed pharmacokinetics of Gestrinone are presented. However, clinical studies on the same compound relate to only a small number of patients from three centres. In all fairness, these clinical studies are more of the nature of pilot studies rather than details of in-depth experience. The comparative trial of danazol vs. surgery can be criticised for being retrospective, non-randomised and uncontrolled. As Gestrinone and Buserelin are not yet commercially available in the U.K., the appeal to the readers will of necessity, be limited.

This book will, I hope, prove to be a source of information and reference to biologists, pharmacologists and research workers. The clinician will have his appetite stimulated by the diversity and variety of drugs used for the treatment of endometriosis. The clinician may, however, be disappointed at the lack of details concerning the clinical use of pharmacological agents in the management of endometriosis. The book