on every General Practitioner's and Family Planning Doctor's consulting room shelf.

I found the cross-referencing rather irritating at times and used too often, for example, paragraph 6.23 5 reads '5 Parity – relates directly to 1, inversely to 3 and 7 (see Qs 6.37 and 6.70)'. Frequency of the cross-referencing makes the text somewhat indigestible in places. However, this is only a small criticism and £4.95 is well spent on this book.

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Education and Training in Psychiatry: a Case Study in the Continuity of Medical Education. Edited by Henry Walton. Pp. 231. King Edward's Hospital Fund for London, London (distributed by Oxford University Press), 1986. £12.00.

This case study is an analysis of the outcome of two meetings. The Royal College of Psychiatrists, the Association of University Teachers of Psychiatry and the Association of Psychiatrists in Training, held a Conference on 'Education and Training in Psychiatry' in 1982. This meeting concentrated on the contribution which psychiatric teaching makes in the education and training of medical students and psychiatrists, and its impact on recruitment to the specialty. Subsequently, in 1983, the Steering Committee organized a post-conference meeting designed for a selected audience of medical educators, health service planners and administrators, and representatives of regulatory and funding bodies. They discussed four issues: recruitment to academic departments of psychiatry and research, the maintenance of post-graduate training in the face of financial austerity, overseas trainees; and continuing education for consultant psychiatrists.

It is evident that the vast bulk of psychiatric morbidity coming to medical attention is detected and managed by general practitioners and general hospital specialists rather than by psychiatrists. Unfortunately, the educational impetus towards making psychiatry a subject which is relevant to all doctors has been relatively slow, though it has been gathering momentum during the past 30 years. Current political, economic and social forces indicate that more radical educational change is now likely to occur, and in two contrasting directions: as exemplified by (a) the move to community care, which may include elements of de-institutionalization and de-professionalization; and (b) the re-emergence of private practice. There is, consequently, uncertainty about what the effects of this will be on research into the aetiology, treatment and outcome of mental disorders – which is still so obviously lacking.

Such stimulating and challenging thoughts have wide relevance within medicine, and prompt both a degree of optimism and Lord Rutherford's remark: 'We have no money, so we will have to think.'

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Essentials of Medical Mycology. E. Glyn, V. Evans and James C. Gentles. Pp. x + 195, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1985. £14.95.

Fungal infections are an important cause of disease in debilitated and immunocompromised patients as well as normally healthy individuals. The purpose of this book is to provide a readable account of fungal disease and to bridge a gap between lengthy and detailed books on medical mycology and short accounts found in general textbooks.

Essentials of Medical Mycology is a paperback which is relatively short (188 pages) and easy to read. There are introductory chapters on nomenclature, immunology, diagnosis and antifungal drugs. This is followed by descriptive chapters on the most important mycoses which includes sections on diseases of the eye and ear. There are a number of useful appendices such as one containing recipes for mycological culture media as well as a short glossary. There are few (black and white) illustrations and some examples of histopathology and culture mounts.

Although the book is brief it provides a good account of the mycoses and amply fulfils its aim 'to present an account of the fungal infections and the necessary approaches for diagnosis.' It could perhaps be helpful to have drug doses included as these are often difficult to find in other sources. The authors have faced a difficult problem in presenting the cultural identification of some pathogenic fungi such as the agents of chromomycosis. However, they have taken the right decision in opting for simplicity rather than plunging the reader into mycological controversy.

At £14.95 this book is a good buy, well written and readable. Although it is primarily aimed at students and laboratory workers in medicine and microbiology one would hope it would reach a wider readership.

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Essentials of Urology. Edited by Joseph N. Corriere, Jr. Pp. xi + 353, illustrated. Churchill Livingstone, New York, Edinburgh, London, Melbourne, 1986. £29.00.

Dr Corriere and a group of colleagues from Houston have written this book primarily for medical students and for residents (although the latter group would only use it as an introductory text). The book starts with a problem-orientated section before dealing with specific diagnostic areas such as infections and neoplasms. This generally is successful but in one or two places attempts at comprehension conceal the important among the less relevant. For example it is surely unwise to place 'rhabdomyosarcoma of the cord' as the second diagnosis of a list of 12 causes of testicular swelling, and the message that haematuria must be considered due to a tumour until proved otherwise does not stand out as clearly as it should. A surprising omission is the concept of bladder instability. The failure to point out that there are a group of elderly men with this condition but without outflow obstruction and for whom prostatectomy is inappropriate, is serious especially for readers who may