The second part looks at growth disorders and unfortunately in the short space available has tried to encompass every aspect. This portion of the text is well illustrated with growth charts illustrating various disease states which on face value are extremely valuable. Many of the diagrams could have been redrawn as there is considerable variance in the quality of the diagrams reproduced. This merely detracts from the text.

In compiling a book such as this, there is inevitably a lag period between new discoveries and the amendment of a chapter. There is some inconsistency however, the inclusion of patients dying with Creutzfeldt-Jakob disease as a result of receiving growth hormone therapy which was well detailed on the section on hypopituitarism, contrasts with the chapters on puberty and adolescence which are archaic. There are some incredible statements such as that rectal abdominal examination should be performed in girls to determine uterine and ovarian size when the presenting complaint is of precocious puberty. There is even a suggestion that vaginal smears should be obtained! CT scans, according to the author, are the means of investigating ovarian function. In 1985, let alone 1986, none of these particular steps have any place in the management of a child with precocious puberty. Investigations by pelvic ultrasound renders most of the list of investigations suggested as unnecessary. Sadly, despite many articles confirming the efficacy of gonadotrophin hormone releasing analogues only a small paragraph at the end of this chapter is devoted to this subject.

Apart from these points, the book in a rather dry and unexciting way does succeed in its aims of organising knowledge of growth problems to satisfy the needs of medical students, paediatric house staff and primary care physicians. Anyone interested in advances in this field should look elsewhere.

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Health, Race and Ethnicity. Edited by Thomas Rathwell and David Phillips. Pp. vii + 278, illustrated. Croom Helm, London, Sydney, Dover, New Hampshire, 1986. £17.95.

The health care professions have barely come to grips with the issue of ethnic factors in health and health care. This journal has published two conferences which were largely concerned with ethnic factors in common diseases but there remains all too little on the question of health care provision and inequalities of health. In 1983 the British Geographers Medical Geography Study Group held a conference of 'Health, Race and Ethnicity' and this volume is an expanded version of what was said. At first sight, therefore, we might have a book of some value to health care planners, community physicians and doctors. Sadly, detailed reading reveals little of use and a lot of words.

The eleven chapters can be roughly divided into those which contain no data but many generalizations and those which provide some information. If, as one contributor suggests, the primary health-care team (General Practice) is the most appropriate place to do something about ethnic inequalities in health, then it would be best if facts and figures

could be provided. Unfortunately, even those chapters that do contain data tend to concentrate on single issues or single local minority groups. Two authors have addressed the topic more globally and their contributions are useful. Mark Johnson's well researched chapter on primary health care seems out of place beside Maggie Pearson's diatribe against an apparent conspiracy by devious, racist and uncaring doctors. There are some sensible sections of this conference report and data are provided on mental illness, common chronic diseases, and there are sections about health in the ethnic minorities in Denmark and in black South Africans. Unfortunately, however, most chapters, and even some of the good ones, are peppered with the kind of language which one might hope would decline as a result of exposure in the 'Pseud's corner' in *Private Eye*. One contributor states that 'racial inequalities in health . . . reflects the underlying class structure of capitalism'. Another considers only Utopian the idea that improvement of health care might be achieved by a 'partnership of activists and progressive intellectuals'.

Dr Richard Cooper from Chicago does provide a well argued discussion of race and disease, and concludes that there are no truly racially determined diseases, that practically all conditions are quantitative rather than qualitative (Sir George Pickering would have approved) and that even genetically determined diseases are not racially specific. Even sickle cell disease is seen in non-blacks. Then, strangely, even Dr Cooper cannot resist launching into impassioned accusations of Marxism with references to the massacre of Babi Yar and even the Battle of Wounded Knee. A strange virus seems to have infected the participants at this conference, leading to a plague of over-statement and a plethora of breast-beating, so that all the useful things said are diluted into oblivion.

For clinicians and health care planners in city centres, who have the responsibility to provide efficient and sensitive care to all patients, this extraordinary volume will be of some limited use, but it will offend many, and irritate most. Perhaps it is just as well that the book is so verbose that few will actually read it.

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Hypertension Control in the Community. International Symposium held in Tel Aviv, Israel, during 7-14 November 1982. Edited by J.B. Rosenfeld, D.S. Silverberg and R. Viskoper. Pp. x + 366, illustrated. John Libbey, London, Paris, 1985. £32, US\$56, FF415.

The 81 papers in these Conference Proceedings represent the principal contributions to this international gathering which was convened to address the problems of hypertension control in the community. How should such programmes be organised? What are the problems? What lessons can be learned?

The aim of the organisers of the symposium was laudable and some of the contributions will be helpful to investigators who have a particular interest in community programmes, as many of the major projects are discussed (e.g. Hypertension Detection and Follow-up Program, North Karelia project). In addition there are several useful papers on experiences gained in programmes carried out in different countries.

Most of the papers are on the short side, and some researchers will clearly prefer to consult the original articles published in scientific journals subject to the peer review process.

Three of the nine sections of the book are less directly concerned with epidemiological aspects and concern aetiology and pathogenesis, choice of drug treatment and problems in compliance, and experience with various drug regimens. There is a sense of *déjà vu* about some of these papers, compounded by the unfortunate fact that the contributions were made three years before publication of the key 1985 studies in hypertension by the MRC, EWPHE and IPPPSH.

The cost-benefit ratio of this book is also not in its favour, especially with the availability of so much up to date information about hypertension in major scientific journals and in the sponsored published proceedings of learned societies.

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An Introduction to the Psychotherapies, Second edition. Edited by Sidney Bloch. Pp. ix + 285. Oxford University Press, Oxford, New York, Tokyo, 1986. £8.95 (paperback), £15.00 (hardback).

It is a pleasure to review the second edition of this already well established book. Since its appearance in 1978, it has succeeded in making the concept of psychotherapy understandable to many undergraduate and postgraduate students. It has been of invaluable assistance to their teachers and inevitably become recommended reading, with few if any competitors, in many medical schools.

Every chapter takes into account more recent developments and there are additional chapters on brief focal psychotherapy and child psychotherapy by Bernard Rosen and Shula Wolff respectively. The authors of each chapter therefore remain pre-eminent in the subject covered. An aspect of that pre-eminence is seen in the widely informed readiness of each author to distinguish common ground in different approaches and equally to delineate divergencies of view both with clarity and appreciative understanding. The book is never a battle-ground of schools but a series of discussions conspicuous for their clarity of exposition and wisdom in assessment. Such qualities can only come from experienced authors, secure in themselves yet imbued with that youthful brightness, which welcomes what is new and cheerfully confesses to past errors.

The new edition can be recommended with enthusiasm to students in all the mental health professions. It deserves a place in every psychiatric library and on every psychiatric trainee's reading list. It has sufficient new material to be bought as a replacement and will be read with profit by many an experienced practitioner.

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The Management of AIDS Patients. Edited by David Miller, Jonathan Weber and John Green. Pp. xii + 202, illustrated. Macmillan, Basingstoke, 1986. £30.00 (hardback), £10.95 (paperback).

The Chief Medical Officer reputedly said recently that AIDS represents the greatest public health challenge this century. This book written by various members of the St Mary's Hospital AIDS team would certainly reinforce this view. The enormous range of new or previously extremely rare diseases caused by human lymphotropic virus 3 (HTLV-3) is discussed in detail as well as the new medical, nursing and counselling skills required to deal with such patients. The book is designed to be read by doctors, nurses, laboratory and counselling staff to plan for future needs when faced with their own epidemic of the disease. However, the range of new skills required is large and the degree of knowledge and dedication to deal with such patients is high. There must be a strong case for treating the majority of AIDS patients in specially equipped and staffed regional centres. I would have welcomed an informed view of the possible size of the epidemic and the impact on health care provision in various parts of the country.

The initial chapters of the book deal with the medical management, virology and immunology of HTLV-3 infection. The virological chapter in particular is a beautifully clear exposition of current knowledge in an extremely complex field. There are bound to be differences of opinion about current management in such a rapidly expanding subject and the lack of references may be a source of irritation to those physicians already grappling with the problems of care. Rightly, considerable emphasis is given to counselling of various groups including those presenting in the venereology and haemophilia clinics as well as those in high risk groups with founded or unfounded worries. Blanket testing for antibodies to the HTLV-3 virus in high risk patients is clearly extremely controversial. A positive test will have a profound psychological impact on the patient as well as carrying implications for employment and life insurance. Also even when a variety of methods is used testing will occasionally yield a false positive result. On the other hand testing and the certainty of knowledge on the part of the patient with regard to potential infectivity may have an important public health role in reducing the spread of the virus. The psychological relief of those who are negative may be profound and this may also modify their behaviour. Certainly knowledge of a positive test will change the perspective of the Primary Health Care team in dealing with what otherwise might be conceived as a trivial illness in such patients. Both sides of this debate are fully addressed in the book. One is left with a rather unsatisfactory feeling as to what the right answer is – obviously each case has to be individually assessed.

In this book (which can be read from cover to cover in an evening) extensive use is made of tables which provide a source of further reference. I can strongly recommend it as an introduction to this fascinating disease.

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