Mason and Currey's Clinical Rheumatology, Fourth edition, edited by H.L.F. Currey. Pp. xi + 457, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. £28.00.

Any book which runs into a fourth edition should be as smooth, full-bodied and mature as good wine. The new edition of Mason and Curry's *Clinical Rheumatology* is certainly good, although a few doubts about the 1986 vintage and the security of future products crept up on me as I tasted its contents.

I still have a well thumbed copy of the first edition, printed in 1970. It is a concise, clear text, describing the major rheumatic diseases according to the classical format. Since then there have been a plethora of 'introductions', 'primers', 'outlines' and 'concise textbooks' on rheumatology. In 1970 Mason and Currey had the field to themselves, and their uncomplicated, no-nonsense book filled a need. In 1986 *Clinical Rheumatology* is a changing subject as well as a different book. So how will the new edition fare against its now numerous competition?

The main core of the book remains much the same and is excellent. The short, didactic descriptions of major rheumatic diseases like polymyalgia rheumatica and gout are first class. They give a clear picture of the disorders and their diagnosis and management. They contain essentials, and a few references are appended to get those who want to know more into the literature. The text is weaker on back pain and the management of chronic disability – but so are most books. There are a few anomalies: rheumatic fever still has a 12 page chapter of its own – more than polymyalgia and only a little less space than is given to osteoarthritis and the spine. The treatment of rheumatoid arthritis, perhaps one of the biggest challenges to any physician, is covered in only 4 pages.

The new edition contains additional chapters on immunology and immunogenetics, and an expanded contribution on the structure and function of joints. They increase the size and scope of the book but I wonder if they improve the product; the value of *Clinical Rheumatology* lies in its authoritative, lasting descriptions of the diseases, not in speculative discussions of vast nebulous, fast moving areas such as clinical immunology. There are also new instructions on drug and local injection therapy which introduce the reader to these areas but are a little short to do them justice.

Over all this remains a good product. I would recommend it to my students if I thought they might (a) buy it and (b) read it. But will they? Twenty eight pounds for a 457 page, hard back book on rheumatology might seem little money for a lot of reading, but will students choose it when there are shorter cheaper alternatives, and might not graduates be tempted to spend a little extra for a more fulsome product? I have no hesitation in recommending it, but a few doubts about its sales.

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Modern Manual Therapy of the Vertebral Column, edited by Gregory P. Grieve. Pp. xv + 898, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1986. £70.00.

Anyone expecting this to be a handy manual for do-it-yourself manipulation could not be more mistaken. It is a mighty volume weighing 3.4 kg in which 60 experts from 9 countries consider all aspects of the subject. This is mainly a book by manual therapists for their colleagues, although 13 of the contributors are doctors. It could be useful on the shelf of a medical library for doctors wishing to try to understand what treatment their patients are receiving in physiotherapy. Anatomy, physiology and clinical examination of the spine and its attachments are gone into in great detail but in some chapters, an excessive use of specialized terminology prevents understanding of the text by the uninitiated. Several authors review personal series of cases in a form more usual in journals than in a textbook. I found the index rather difficult to use and misleading in several instances.

All aspects of vertebral disorders and their manual treatment are described and discussed in great detail but there is a tendency to exaggerate the relative importance of what may be secondary abnormalities or unimportant normal variations and to theorize when there is an absence of scientific verification, rather than to accept that most of manual therapy is based on empirical experience. There is a useful chapter by the editor on psychological aspects of back pain but this very important consideration receives little mention in other contributions.

Manual therapy helps a good proportion of vertebral disorders, but this book tends to emulate osteopathy in trying to elevate a valuable skill into a form of medical science.

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Multiple Sclerosis, edited by W.I. McDonald and Donald H. Silberberg. Butterworths International Medical Reviews: Neurology. No. 6. Pp. vii + 193, illustrated, Butterworths, London, Boston, Durban, Singapore, Sydney, Toronto, Wellington, 1986. £25.00.

This slim volume on multiple sclerosis is a successor to the now defunct *Modern Trends in Neurology* series and comprises a collaborative British-American monograph. The contributors devote eight chapters to clinical features, diagnosis, aetiology and pathogenesis followed by two chapters on therapy and management.

The question of diagnosis is discussed in detail by the editors, and the latest criteria proposed by the Poser committee are summarized. Special problems in possible multiple sclerosis such as optic neuritis are discussed and useful guides are given to the approach to a patient with possible multiple sclerosis with practical advice about the extent and timing of investigation. Advances in imaging techniques are well illustrated and explained comprehensively, and the place of differential diagnosis of lesions on MRI scanning is discussed. Epidemiology and genetic factors are addressed in further chapters. The daunting frequency of acronyms in