Case Presentations in Clinical Geriatric Medicine, edited by G.S. Rai, P.J. Murphy & G. Wright. Pp. vii+136. Butterworth (Services), London, 1987. £7.95.

Physiological changes, multiple pathology, physical incapacity, concomitant mental disorders and social disadvantage mean that special skills are required in the diagnosis and management of illness in old age. This has been recognized by the inclusion of questions on geriatric medicine in the examinations of the Royal College of Physicians, and the establishment of a Diploma examination in Geriatric Medicine for general practice.

The most effective way of preparing for such ordeals is to read widely and build up plenty of relevant clinical experience. It is sometimes difficult, however, to identify areas of ignorance, and as an aid to this there now is a wide range of books with test questions on relevant topics.

I was particularly impressed by this series of 60 case presentations by London geriatricians. A wide range of acute and chronic, and common and rare disorders is covered. However, in addition to making spot diagnoses the questions encourage the reader to tease out multiple disorders, identify red herrings, and tailor management to the physical and social needs of patients. The cases thus effectively capture the activity and atmosphere of a busy geriatric assessment unit.

The answers to questions in the second half of the book are detailed, accurate and relevant, and are followed by discussions which deal with the main issues from cases in full. There also is a limited number of references to each problem as a guide to further reading. It is inevitable that opinions will differ as to whether the most useful have always been chosen, but most are up to date, and the authors have obviously put a great deal of work into finding them.

This book can be thoroughly recommended for doctors preparing for an MRCP examination. I am less sure about its value for general practitioners preparing for the Diploma in Geriatric Medicine. The questions are moderately testing and relate to diagnosis, investigations and treatment in a hospital environment. As such they may be rather daunting for a doctor equipping himself to care for the elderly in the community.

Another group who could read the book with profit are physicians already established in general and geriatric medicine. I am certain that, like me, they will find many lacunae in their knowledge, and will be encouraged to persevere in remaining up to date with the rapidly advancing field of geriatric medicine.

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Catherine – a Tragic Life, Maureen Dunbar. Pp. 134, illustrated. Penguin Books, London, 1987. £2.25.

This is a short paperback by the mother of a young girl who died of anorexia nervosa. It is a well written,

compelling, and emotionally charged account of Catherine's tragic life and provides an intriguing window on the lives of the subject's family. But to what purpose? The stated aim of the author is to 'help create a climate of compassion, love and support from the families and friends of those unfortunate enough to be anorectic'. More than this, it is clearly written to the memory of and as a testimonial to the subject Catherine. Royalties will go to the Catherine Dunbar (Anorexia) Trust, which I understand to be a registered and worthy charitable fund.

The proposed readership is uncertain. Inevitably it will be read by the families and friends of sufferers, who will find it a harrowing account which takes a fatalistic view.

The medical practitioner will find an excellent account of the intense fear, misery and social isolation of anorexia nervosa, arousing feelings of anger and frustration. Family therapists will relish the clues in the narrative and regret lost opportunities for taking a systemic view and suggesting alternative interventions focusing on family rather than individual. More than this, the book confronts us with the challenge that psychiatry can suggest little to alter the natural history of those few severe anorectics whose psychopathology drives them inexorably to the depths of emaciation.

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Cope's Early Diagnosis of the Acute Abdomen. Revised by William Silen. Pp. xii+290, illustrated. Oxford University Press, New York, Oxford, 1987. £12.50.

In 1921, a young surgeon at St Mary's Hospital, Zachary Cope, published a slim book that preached early and accurate diagnosis of acute abdominal pain, stressed the importance of meticulous clinical assessment and decried procrastination. The preface stated 'it would appear that there is room for a small book dealing solely with the early diagnosis of such cases, for there is little need to labour the truism that earlier diagnosis means better prognosis'. This book, which now appears in its 17th edition, has been revised since 1980 by Professor William Silen of Boston who has maintained the high standards of Sir Zachary. Literally tens of thousands of house officers and surgical registrars must now have been reared on these clear lessons and one can but guess how much suffering has been averted and, indeed, how many lives have been saved because of the teachings preached in this small volume.

The new edition contains an additional chapter on laboratory and radiological tests but, as Professor Silen points out in his preface, 'I have added a new chapter that attempts to guide the reader in selecting appropriate tests rather than employing every conceivable investigation that comes to mind. At the same time, I am more convinced than ever that over-reliance on these new and costly tests at the expense of the careful clinical evaluation will diminish rather than improve the quality of care of