
Hypertension has probably more references in the literature than any other single disease except cancer. New advances are continually being acclaimed and fresh anti-hypertensive agents produced at an alarming rate each claiming unique virtues. Large scale trials seem to yield contradictory or inconclusive messages. Add to these problems the ubiquitous yet asymptomatic nature of the beast and there is obviously a need for a plain man’s guide for the practicing physician. This text, excellently and clearly produced will go a long way to meet the need, especially for the general practitioner with an interest in preventive cardiology.

There are lucid chapters on epidemiology and the causes and complications of hypertension as might be expected from the authors, both distinguished authorities on their subject. There is a clear account of the method of measuring the blood pressure with the surprising number of pitfalls that have to be avoided. This should be compulsory reading for all newly qualified doctors who seem to know as little about these things as their erstwhile teachers, with startling resultant errors. The section devoted to drugs is succinct and well up to date although I would dissent from accepting ACE inhibitors yet as first-line therapy until we know more about their long-term safety. ‘Step therapy’ or the addition of one drug to another is advocated which I have always thought to be a methodological mistake as there are some patients who will respond to a diuretic and not a β-blocker and vice versa.

There is an excellent summary of non-pharmacological methods of blood pressure reduction and the chapters on hypertension in the elderly and in pregnancy are the best accounts I know of these important areas.

The implementation of this knowledge in the context of primary care is of course the crux of the whole exercise and a chapter is devoted to this. The authors point out that recent surveys still show a disappointing measure of both ascertainment and of attendance of known cases.

Readers looking for the reasons for these difficulties should consult the text by Dr Julian Tudor Hart (Hypertension, Library of General Practice, Churchill Livingstone) which has been written from the point of view of primary care. The fact is that without considerable changes in practice organisation and approach the present haphazard habits will continue to leave half the seriously ill hypertensives undetected and one third of the known cases untreated. The recent introduction of facilitators to introduce practices to the techniques of audit screening, indexing known cases and nurse run clinics holds out hopes of change.

This is an excellent textbook for the postgraduate and practice library and can be warmly recommended.

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Faced with publications in the field of general surgery that seem to be increasing in geometrical progression, and with the ever-widening range of modern surgical science, busy surgeons are thankful to be able to turn to well produced and up to date reviews which cover topics of particular interest to them. Professor Taylor, in his second volume of Progress in Surgery, has provided us with an interesting cross section of surgical advances. The chapters include common and controversial practical topics – pancreatitis, lower gastrointestinal haemorrhage, gastrointestinal reflux and strictures, and adjuvant therapy in breast cancer. The introduction of endoscopic sphincterotomy is revolutionising the management of stones in the common bile duct. Stomach cancer remains a depressing and important problem while radiation damage to the bowel, although less often seen than heretofore, presents us with difficult problems in management. Anal incontinence and constipation are now yielding to investigations by radiology, manometry and electromyography. Specialist topics which are considered include head and neck cancer, neonatal surgical emergencies, brain tumours and carotid endarterectomy. Parenteral nutrition is now an important therapeutic weapon which the general surgeon employs in seriously ill patients and in the treatment of upper gastrointestinal fistulae. Finally, the editor himself is responsible for chapters on liver metastases and an interesting chapter on tumour biology.

The editor has chosen the authors, as well as the topics, with care and certainly the chapters are not only informative but readable. The text is nicely produced and the bibliography up to date.

I certainly benefitted from reading this volume and I have little doubt that my general surgical colleagues will be equally refreshed and informed. It can be recommended both to the surgeon in training and to his chief as a helpful update on current general surgical progress.

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