**The Management of Angina Pectoris,** edited by D.L.H. Patterson. Pp x+147, illustrated. Castle House Publications, Tunbridge Wells, 1987. £35.

This book is a gem. It has been edited and partly written by a man who looks after patients and not diseased coronary arteries. The book should be of very great interest to all general physicians and will provide a more than usually balanced account for the invasive cardiologist who may find himself approaching the subject from the standpoint of the treadmill, the cardiac catheter or the sternotomy. The board approach to the problem of angina pectoris is its very strength: doctors wishing to gain the latest views concerning cellular function in angina would do well to look elsewhere. The real depth of Dr Patterson's understanding of patients and their problems with angina pectoris is illustrated vividly by his comments on sexual relationships.

In reviewing any publication concerning a subject with which one has some familiarity one will always find certain omissions. One or two brief additional comments as to why effective control of hypertension has not altered the prognosis in coronary artery disease and a more robust recommendation to reduce plasma cholesterol would not have gone amiss. There were two small, but important omissions in the section dealing with drug therapy, notably, the problem of troublesome constipation with verapamil and of peripheral oedema with nifedipine, especially as the latter is not responsive to diuretic therapy.

With the exception of such small matters this book is a masterly account and one of the most enjoyable medical texts I have read for a long time.

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Medical Microbiology, edited by C.G.A. Thomas. Pp i+435, illustrated. Baillière Tindall, London, Philadelphia, Toronto, Sydney, Tokyo. £8.50.

This is the sixth edition of a book first published in 1964. It is aimed at medical students (in part), medical graduates working in non-microbiological specialties, nurses, technicians and 'other workers in the Health Services'.

It is an unpretentious little book at a modest price and achieves a quite comprehensive survey of medical microbiology within its 29 chapters. It deals initially with the general properties of bacteria and viruses, includes good chapters on the body defences and antigen-antibody reactions and addresses sterilization and disinfection, examination of clinical specimens and control of hospital and community infections in subsequent chapters. Chemotherapy is given a chapter on its own and the major pathogenic bacteria, rickettsiae, DNA viruses and RNA viruses are all well described. The chapters are generally accurate, surprisingly detailed for a book of this size, and easily readable. There are useful chapters on protozoa, helminths and fungi. Retroviruses and miscellaneous virus

infections are dealt with adequately and the diseases they cause are well described.

The bacterial chapters are often accompanied by black and white figures which are more successful in demonstrating the type of spores in *Clostridia* than in *Legionella* stained with 'fluorescent antibody'; but they are useful and do add to the text without confusion.

There can be no doubt that this book will reach a large appreciative readership particularly those who are looking for broad brush descriptions of human pathogens or simply looking to revise previous knowledge in the light of recent advances. In condensing the material into this book there are occasional of ambiguous generalizations, for example in describing the control of hospital infection and talking about Staphylococcus aureus it is said that 'individuals who carry the offending strain who are a likely source of infection should be taken off work'. Again there seemed to be a need for a little more cross-referencing than was apparent but if the reader starts at the beginning and also uses the index this need not be a handicap.

This is an excellent little book that holds the interest, provides good general and up-to-date descriptions of medically important organisms and infections and provides some very good suggestions for further reading.

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Practical General Practice – Guidelines for Logical Management, Alex Khot & Andrew Polmear. Pp x+323. Butterworths, London, Boston, Singapore, Sydney, Toronto, Wellington, 1988. £13.95.

We carry our textbooks out of medical school and into our consulting rooms. There is a comfort in old books with their annotated pages and dog-eared corners that comes from their familiarity. We know not only which book to refer to but often where to look first. We do not need to read in detail; the salient facts babble back as the pages are turned.

But, like our patients, old textbooks start to get forgetful and then become demented. Their contents become unreliable and then frankly inaccurate. Practice libraries are often remote, peopled by relative strangers, more for appearance than use.

What does the general practitioner turn to then for advice alongside the BNF and MIMS? The answer lies in a vade-mecum of general practice, well set out, succinct and well indexed. This is a highly commendable attempt at such a book.

The authors take us through most of the common clinical situations of primary care, each section written in a punchy authorative style with a minimum of referencing or discussion. Naturally there are opinions expressed which can be disputed. For example there is no mention of simple measures in pre-menstrual tension (low salt, low fluid diet with small meals often) and vitamin B6, a mainstay of my clinical practice, is relegated to being an 'also ran'. Such differing of opinions is inevitable.

The book offers advice on the routine 'work up' for new patients with some major diagnosis, for example hypertension, but is weak on protocols for continuing care. In particular it offers no protocols for 'Well Man' clinics and geriatric screening which might be valuable additions to the next edition.

I used this book after every patient during one morning surgery and found it quick to refer to and informative. The pages are excellently laid out, and the assertive text leaves you in no doubt as to what the authors recommend. It will be invaluable to trainees and will probably find its way onto the desk of many an established principal.

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Prevention of Coronary Heart Disease and Stroke (a workbook for primary care teams), J.T. Hart & B. Stillwell. Pp xii+244. Faber & Faber, London, Boston, 1988. £5.95.

By now, most of us are well aware of the unenviable position of the UK as it sits unhappily near the top of the World Coronary Heart Disease League. Unfortunately the impressive reductions in CHD mortality experienced over the last ten years by the USA and Australia have not been mirrored in Britain. The rallying call for intervention is not a new one, but as the authors of this very welcome book note, there has been much talk but little action, so far.

While controversy continues as to who should do what, it is clear that primary care occupies a pivotal position. As such, the general practitioner and other team members have a definite need for clear guidelines.

The authors of this book are well known activists in the field – general practitioner, nurse practitioner and community physician – with a diverse readership to address. As they point out, local circumstances and therefore strategies differ and they are right to avoid a 'cookery book' approach.

The book is systematically divided into four sections: The first defines the problem and its associated risk factors (hence the mnemonic 'sex, fags, cops'). The second discusses what can be done about it – as might be expected, hypertension is dealt with thoroughly but cholesterol fares less well (the account of cholesterol-lowering drugs, in particular, is inadequate). The third deals with the mechanics of prevention – the need for good quality records is emphasized although the potential of computers is not discussed. The final section, 'divisions of labour', is invaluable, underlining the need for adequate communication and cooperation and containing useful material for patient advice sheets, with a final list of useful addresses.

Overall, this is an excellent little 'workbook' which readily fulfills the authors' designs. At minimal cost, it will provide the primary care worker with the essential background for tackling the pressing problem of preventing coronary heart disease and stroke in our community.

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Slide Interpretation for the MRCP, H.J. Kennedy, T.W. Evans & A. Suggett. Pp 214, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, £9.95.

This is a valuable book for candidates working for the MRCP examination of the Royal College of Physicians. The preface is mandatory reading for it outlines the aims of the authors in writing this book. Slide interpretation is perhaps the most difficult section of the written paper of the MRCP Part II examination. In a book of this size it is impossible to present slides to cover the whole field of clinical medicine. However, the topics covered are diverse and include common and unusual conditions which students should find invaluable.

The 100 questions in this book are divided into papers with 20 photographs in each with appropriate questions, answers and short explanatory notes. The colour photography and reproducibility of the slides are good, in particular in haematology and dermatology, and students will have no cause to complain. The index is comprehensive.

Slide interpretation tests are akin to learning to play amusical instrument. Both require solid grounding in knowledge of the subject and frequent practice. However, if the photographs are not of the highest quality then the practice becomes meaningless. I would like to take issue with photographs 1.11 p 23 and 4.2 p 131. I am convinced there are better examples of Paget's disease and hereditary haemorrhagic telangiectasia in the archives of the Medical Illustration Departments of the John Radcliffe Hospital, Oxford and Hallamshire Hospital, Sheffield from where most of these photographs are obtained. I also had great difficulty in diagnosing the photograph 1.19 on p 39 which is supposed to depict β-thalassaemia major.

Apart from these minor criticisms this book must be essential reading for anyone intending to sit the MRCP examination. At £9.95 it is a bargain!

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