Book Reviews

Radiotherapy, Susan Holmes. Pp. 223. Austen Cornish Publishers Ltd. London, 1988. £6.50.

This is a well-written, easy to read guide to radiotherapy with clear references throughout the text as well as at the end of each chapter which inspires you to read more on this subject. It provides the reader with an up-to-date understanding of the principles, techniques and treatment of malignant disease and emphasizes the importance of nursing attitude, clearly demonstrating the special care required both psychologically and physically by the patient undergoing radiotherapy. The author discusses the side effects likely to be experienced, showing how best to recognize, assess and treat each patient as an individual. The chapter on nutritional care was particularly interesting and helpful.

This book will be a valuable asset for all health care professionals working with cancer patients in hospital and in the community.

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Talking with Patients: A Basic Clinical Skill, Philip R. Myerscough with contributions from A.L. Speirs, R.M. Wrate, C.T. Currie and D. Doyle. Pp. 148, illustrated. Oxford University Press, Oxford, New York, Tokyo, 1989. £9.95.

In clinical work, most of us spend more time talking with patients than in any other activity. Since good history taking is also rewarding in diagnostic terms, why is so little written about it? Myerscough hits the nail on the head in his resumé, when he states his unswerving faith in the view that effective, sensitive communication skills *can* be learnt. There has always been a tendency to regard these skills as innate – the naturally 'good' doctor is born with them. Certainly this needed to be challenged, and Myerscough has summarized what most medical schools are beginning to include, or at least feel that they should include, in the curriculum. Communication is at the heart of clinical practice. When it fails, complaints and litigation follows; when it succeeds, it is ironical that patients and relatives will forgive major clinical mishaps, even death itself.

In this short book, Myerscough writes clearly and elegantly on many affective aspects of the doctor/patient relationship, touching on subjects such as methods to facilitate communication (non-verbal clues, verbal reflection, clarification, summarising, silences, mirroring, confrontation, etc). He tackles taboo areas such as the avoidance of sexual arousal in doctors exposed to potentially erotic stimuli during clinical work. There is a concentration on the especially difficult areas of communication, namely death and sex. Colleagues contribute illuminating brief chapters on the special skills required for clinical work with the children, adolescents, the elderly and the dying. A selection of semi-humorous line drawings make their points well, particularly the portrayal of a ward round, surely a prime example of poor and terrifying communication from a patient's point of

view. One of the most valuable chapters is Myerscough's own on aspects of transcultural communication, in which great wisdom and experience are displayed. I must confess to irritation at the obviousness of some of what is said, and found the imagined inept doctor/patient conversations sometimes too contrived. Some passages seemed too brief to be of value (e.g. on written communication).

The book is aimed at medical students: I therefore showed it to some at the beginning of their first clinical year. They found it enjoyable, but said that they would be unlikely to buy it at £9.95. They felt that they could acquire and improve communication skills quickly by example and practice, and to read about them seemed to formalise things in a way which might actually lead to counter-productive self-consciousness. Both the students and I wondered whether the book might appeal to the general public, as it gives an invaluable and highly readable glimpse of the medical mind.

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Clinical Skills in Medicine. Sixth edition, Alan E. Read. Pp x + 252, illustrated Wright, London, Boston, Singapore, Sydney, Toronto, Wellington, 1989. £6.95.

This inexpensive and handy volume is aimed at the newcomer to clinical medicine and is a successor to *'The Clinical Apprentice'*, of which it is a sixth edition. However, it is radically changed and very clearly reflects the experience and views of its author, who has had some assistance with a few sections, but not to an extent which waters down the individual philosophy.

The introduction deals efficiently, if too briefly, with some of the basics such as clothing, conduct, and attitude to study. The main substance of the book is a very readable and thoughtful survey of the examination of the various systems, with the emphasis on commonsense and elementary logic—which so many tutors and clinical students fail to learn and exploit. There then follows a breezy survey of the various aspects of clinical investigations.

Most medical schools lead their students systematically through the mysteries of the clinical examination, aiming at the same knowledge and the same expertise as this book. Even so, this volume is likely to be an ideal companion to that phase of undergraduate training, and many a candidate failing final M.B., or Part II M.R.C.P., would not have done so if they had had the simple insights this volume emphasizes. It truly encapsulates the solid, sensible, logical and good humoured approach for which its author is so well respected, and on which students would do well to model themselves. It is a little thin on aspects relating to drug history, compliance, and therapeutic misadventure: no doubt the next edition can expand this area and the enjoyable, if too brief, introduction. The reviewer started out somewhat sceptically but now concludes confidently that this book

was worth writing, and that it has come commendably close to achieving its important objective.

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Diagnostic Cytopathology, Chandra Grubb. Pp. 214, illustrated. Churchill Livingstone, Edinburgh, London, Melbourne, New York, 1988. £29.50.

Following Chandra Grubb's two previous excellent 'Atlas's of Cytopathology', this new book has been awaited with great interest. Dr Grubb writes extremely well and with her wealth of experience and meticulous care for detail, this book is of interest to the experienced cytopathologist as well as an essential book for every cytology laboratory both for MLSOs and junior doctors in training for their MRCPPath examinations.

Perhaps it is disappointing that there is no general chapter on FN aspiration technique, preparation of smears, together with various staining methods, their advantages and disadvantages and the essential part these play in correct interpretation. However, the special staining techniques are illustrated in the chapters in which they might prove useful. It would also have been an advantage to include the use of immunocytochemistry in cytological diagnosis as this is now becoming an important adjunct to conventional methods of staining now used in most cytology departments.

The chapter on the female genital tract shows little new but the microphotographs are of high quality and there is a good picture of chlamydia which will help cytoscreeners to identify this infection. Another excellent feature is the pictures and text on the various types of ovarian cyst fluids; these are now aspirated at laparoscopy and it is important that they should be identified. The description should prevent a false positive diagnosis.

In chapter two the photographs and text of carcinoma of the breast are good, but it is a pity that with the modern terminology of benign breast change (fibrocystic change) and the degrees of hyperplasia rather than epithelioses and adenosis that a new book should still use the old terminology.

The chapter on the respiratory tract is excellent. The microphotographs of the pathogens are particularly useful. It is rare to see *Nocardia* and therefore to have pictures of this, the fungi, *Cryptococcus* and *Pneumocystis* will be of considerable help to the inexperienced cytopathologist in the identification of these organisms. The microphotography of herpes simplex, again draws attention to the ease with which this may be confused with squamous cell carcinoma of the bronchus. Microphotographs of the various types of metastatic carcinoma are useful. Effusions are well covered with good pictures of the various mesothelial proliferations and types of atypia seen. These will help to avoid confusion with carcinoma. Microphotographs of many types of metastatic carcinoma are included as well as types of lymphoma and myeloma.

The short chapter on CSF perhaps covers most essentials but comparison between a reactive picture and lymphoma is neglected. The chapters on oesophageal intestinal tract and liver are adequate. However,

microphotographs of the pancreas, now an important area of FNA, under CT scan or ultrasound are not up to the excellent standard of those in other chapters of this book. The chapter on the urinary tract includes urine examination as well as FNA of kidney. The examination of the urine demonstrates cell changes on viral infections and ovum from tapeworm and schistosomiasis. The chapter on lymph node aspirations is scanty. This would have been an ideal place to include an extensive section on the lymphomas.

However, it is not possible to cover completely the whole of cytopathology in one small text book. In spite of a few chapters that perhaps should have been enlarged, it is a useful book and should be included in the library of cytology departments.

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European Community Atlas of Avoidable Death, edited by W.W. Holland. Pp xxiii + 356. Oxford University Press, Oxford, New York, Tokyo, 1988. £44.

This book is one of a series concerned with health services research, commissioned by the Comité d'Action Concertée (COMA-HSR) of the European Community. It is an attempt to assess the impact of health systems in each country in terms of the prevention of certain diseases and the management and treatment of others.

The concept of avoidable death is based on the original work of Rutstein,¹ who identified a large number of sentinel conditions from the 8th Revision of the OPCS classification of diseases. These conditions were labelled as unnecessary diseases, unnecessary disability and unnecessary untimely deaths. This work was developed and refined by Charlton *et al.* in 1983² and their list of conditions formed the basis for this new Atlas. The term avoidable death is intended to provide warning signals of potential shortcomings in health care delivery which can be further investigated by local studies.

As is proper in the work of a group of epidemiologists, there are numerous caveats about the reliability and comparability of data. As they say, 'observed variations in data collection (diagnosis, certification and coding of death) may be an artefact'—a point previously made by Kelson and Heller,³ who demonstrated wide differences in the recording and classification of acute respiratory diseases across eight EC countries. On the other hand, the mortality differences between countries may be due to differences in disease prevalence in service provision and/or effectiveness.

The authors suggest several steps which might be taken in studying geographical variation. One is to see how these differences change over time; another is to map individual deaths and to investigate clustering. A different approach is the 'confidential enquiry' into individual deaths to 'identify' actual avoidable factors. This approach has been used successfully for many conditions—the most recent example being the confidential enquiry into peri-operative deaths.⁴ It is at this stage that the concept of avoidability which appears in the Atlas title can be transformed into the reality of avoidable factors. It is also at this stage that matched