

# Postgraduate Medical Journal

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The Journal, as the organ of the Fellowship of Postgraduate Medicine, is dedicated to advancing the understanding and practice of postgraduate medical education and training. The Fellowship of Postgraduate Medicine was founded after the First World War and was a pioneer in the UK in the development of programmes of postgraduate study in all branches of medicine (see *Postgrad Med J* 61, 1). It always has been, and remains, independent of University, Health Service and Government. Currently the Fellowship works closely with the National Association of Clinical Tutors in furthering mutual aims. Amongst other activities, the Fellowship provides research grants and support for young investigators, especially those working temporarily in the UK.

Further details of the Fellowship of Postgraduate Medicine can be obtained from The Executive Secretary, Fellowship of Postgraduate Medicine, 12 Chandos Street, London W1M 9DE, UK.

The Journal is covered by *Current Contents*, *Biological Abstracts*, *ASCA*, *ISI/BIOMED*, *Index Medicus*, *Excerpta Medica* and *Science Citation Index*.

### Editorial

Manuscripts, initial supplement enquiries, and all editorial correspondence should be sent to: The Editor, *Postgraduate Medical Journal*, 12 Chandos Street, London W1M 9DE, UK. (tel: +44 71 636 6334; fax: +44 71 436 2535).

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ISSN 0032-5473

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US second class postage paid at Rahway NJ. Postmaster to send address changes to: *Postgraduate Medical Journal*, c/o Mercury Airfreight International Ltd Inc, 2323 Randolph Avenue, Avenel, NJ 07001, USA.

Published by the  
BMJ Publishing Group

Typeset by  
Elite Typesetting Techniques,  
Eastleigh, Hants

Printed in  
Great Britain by  
Cambridge University Press

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from both sides of the Atlantic bring out some interesting treatment differences. The American authors advocate high-dose methyl prednisolone for patients with acute spinal trauma and intravenous heparin for small or moderate-sized ischaemic strokes, neither are routine practice in the UK.

Each chapter ends with a summary of recommendations to serve as an *aide-memoire* and a full set of up-to-date references. This book should be read by those who decide initial management of neurological emergencies; it is not a book to be carried 'on take' but the summary boxes could usefully be photocopied, annotated and stuck into a notebook in a white coat pocket.

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## Ophthalmology

**Ophthalmology**, 2nd edn, HB Chawla. pp viii + 354, illustrated. Churchill Livingstone, London, 1994. £14.95, paperback. ISBN 4430 47669

As a basic introductory text to ophthalmology, the second edition of this popular book is difficult to equal. This is not because of its comprehensiveness and erudition, which to be pedantic is less than perfect (although usually adequate) in a few areas, but because of its unique style, wit and eminent readability.

The author's style is fluent and prosaic and the text abounds with helpful, as well as

entertaining, metaphors and similes. He employs the principle of 'complexity is but simplicity multiplied' to great effect resulting in clear and concise explanations and effortlessly avoids laborious or verbose descriptions.

The book is up-to-date and covers the important areas of recent development, a significant feature in such a rapidly changing speciality. The order of the chapters and subject matter is somewhat idiosyncratic, consisting of a mixture based sometimes on differential diagnoses, sometimes anatomical classification and sometimes specific diseases. The section on pupillary reflexes and their interpretation is not clear and poorly illustrated, and many ophthalmologists would take issue with the reliability of digital assessment of intraocular pressure, which he supports.

However, the only criticisms of this book are minor ones, and it would be inappropriate to detract from the overall appeal and usefulness of this exceptionally delightful and painless introduction to ophthalmology.

B LITTLE  
Royal Free Hospital,  
Rowland Hill Street,  
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## Pain and childbirth

**Pain and its relief in childbirth**, G Chamberlain, A Wraight, P Steer, eds. pp 154, illustrated. Churchill Livingstone, London, 1993. £55.00, hardback. ISBN 0443 04658 1

This book describes the results of a survey, conducted by the National Birthday Trust, of pain during childbirth and its relief. The survey is comprehensive, covering not only all women delivering during a week in June 1990 (10 000 women) but also their midwives, all medical attendants, partners, neonatal consequences and a follow-up survey at six weeks. As such it gives much information about the availability of different analgesic techniques, their efficacy and consequences.

This information is reasonably easily extracted from the text although many data are presented as both tables and figures which are not always easy to interpret. The inclusion of numerous anecdotal comments both improves readability and personalises the test. These are all from mothers and their partners; some comment reflecting staff attitudes would be of interest.

The findings emphasise the importance to women of feeling in control during labour and of the value of education and communication in achieving this. Whilst most women are happy with their analgesia, problems were identified with TENS, pethidine, the limited availability of epidurals, and analgesia for perineal repair. Conclusions and recommendations are succinctly present in a separate chapter.

This book is of value to those who plan or organise obstetric analgesic services. It should be made available to all those who provide such services. Publication of the summary as a separate booklet would aid the further dissemination of the findings of the survey.

T HEALY  
University Hospital of South Manchester,  
Withington, Manchester M20 8LR, UK

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## Books received

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**ABC of clinical genetics**, 2nd edn, HM Kingston, pp 71, illustrated. British Medical Journal, London, 1994. £13.95, paperback

**Assisted ventilation**, J Moxham, J Goldstone (eds), pp 103, illustrated. British Medical Journal, London, 1994. £12.95, paperback.

**Capnography**, D O'Flaherty, pp 108, illustrated. British Medical Journal, London, 1994. £16.95, paperback.

**Contributions to obstetrics and gynaecology**, vol 3, SS Ratnam, DK Sen, N Soon-Chye, S Arulkumaran, pp 230, illustrated. Churchill Livingstone, London, 1994. £60.00, paperback.

**Dermatology**, JD Wilkinson, S Shaw, DA Fenton, pp 158, illustrated. Churchill Livingstone, London, 1994. £8.95, paperback.

**Diabetes in Europe**, R Williams, L Papoz, J Fuller, eds, pp 215, illustrated. John Libbey, London, 1994. £36.00, hardback.

**Hunter's diseases of occupations**, 8th edn, PAB Raffle, PH Adams, PJ Baxter, WR Lee, eds, pp 744, illustrated. Edward Arnold, London, 1994. £145.00, hardback.

**Key topics in accident and emergency medicine**, PG Howarth, RJ Evans, pp 320. Bios Scientific, Oxford, 1994. £20.00, paperback.

**Key topics in paediatrics**, AEM Davies, AL Billson, HR Jenkins, pp 329. Bios, Oxford, 1994. £22.00, paperback.

**Managing the knowledge base of health-care. Report of a seminar**, pp 65, illustrated. British Library Report, 1993.

**MCQs in basic science - ophthalmology**, J Ferris, pp 347, illustrated. British Medical Journal, London, 1994. £22.95, paperback.

**Medicine in the making of modern Britain 1700-1920**, C Lawrence, pp 91. Routledge, London, 1994. £6.99, paperback.

**No easy choices - the difficult priorities of healthcare. A report by the Health Care and Medical Priorities Commission**, pp 133. Swedish Government Official Reports, 1993. No price given, paperback.

**Ophthalmology**, 2nd edn, H Bryson Chawla, pp 354, illustrated. Churchill Livingstone, London, 1994. £14.95, paperback.

**100 Paediatric picture tests**, AP Winrow, M Gatzoulis, G Supramaniam, pp 200, illustrated. Churchill Livingstone, London, 1994. £16.95, paperback.

**Pulse oximetry**, JTB Moyle, pp 134, illustrated. British Medical Journal, London, 1994. £16.95, paperback.

**Resuscitation: key data**, MJA Parr, TM Craft, pp 78, illustrated. Bios Scientific, Oxford, 1994. £10.00, paperback.

**Problems with patients: managing complicated transactions**, K Norton, S Smith, pp 174, illustrated. Cambridge University Press, Cambridge, 1994. £14.95, paperback.

**Stress survival guide**, C Grainger, pp 50, illustrated. British Medical Journal, London, 1994. £6.95, paperback.

**Textbook of hypertension**, JB Swales, ed, pp 1327, illustrated. Blackwell Scientific, London, 1994. £129.50, hardback.

## International Postgraduate Diary

### Royal Free Hospital School of Medicine, London

MRCP Part II course for clinical examination  
13–17 February 1995, 5–9 June 1995  
Details: Dr D Geraint James, Royal Free Hospital, Pond Street, Hampstead, London NW3 2QG, UK. Tel (44) 71 794 0500 ext 3931

### Royal Society of Medicine, London

Health in later life: advances, access, and equity 7–8 September 1995  
Details: Miss Claire Cheeseman, Sections Officer, Royal Society of Medicine, 1 Wimpole Street, London W1M 8AE, UK. Tel (44) 71 290 2982

### Royal College of Physicians of Edinburgh

Teach-in on acute poisoning – Edinburgh – 10 January 1995  
Teach-in on renal medicine – Newcastle – 7 February 1995  
Details: Royal College of Physicians of Edinburgh, 9 Queen Street, Edinburgh EH2 1JQ, UK

### Loughborough University of Technology Centre for Hazard & Risk Management

Laboratory health and safety – April 1995  
Details: J Motyka, Loughborough University of Technology, Loughborough, Leics LE11 3TU, UK. Tel (44) 509 222158

### Wolfson Conference Centre, Royal Postgraduate Medical School, London

Histochemistry – 16–20 January 1995  
Histopathology – 6–10 February 1995  
Details of these and other courses: Wolfson Conference Centre, RPMS, Hammersmith

Hospital, Du Cane Road, London W12 0NN, UK, Tel (44) 81 740 3245

### European Helicobacter pylori study group

VIIIth International Workshop on Gastrointestinal Pathology, Edinburgh, 7–9 July 1995  
Details: Scientific Secretary c/o Scientific Office, 3 St Andrews Place, London NW1 4LB. Conference organisation: VIIIth EHPHG, Confrex, 145 Islingwood Road, Brighton BN2 2SH, UK, Tel (44) 273 623 123

### Institute of Psychiatry, London

Tumours of the brain: pathology, biology and therapeutic management, 30 January–2 February 1995  
The cellular and molecular pathology of neurodegenerative disease, 6–9 February 1995  
Details: Mrs L Wilding, Short Courses Office, Institute of Psychiatry, De Crespigny Park, London SE5 8AF, UK. Tel (44) 71 919 3170; fax: (44) 71 703 5796

### Roehampton Institute, London

MSc/Graduate Diploma in Clinical Neuroscience. Commencing February 1995  
Details: Dr A Bonner, Roehampton Institute, Whitelands College, West Hill, London SW15 3SN, UK

### First International conference on lifestyle and health

All India Institute of Medical Sciences, New Delhi, India. 20–21 January 1995  
Details: Dr BM Chhajer, Department of Physiology, All India Institute of Medical Sciences, New Delhi 110029, India

### XIIth International conference on calcium regulating hormones

Melbourne, Australia. 14–19 February 1995  
Details: Secretary, XIIth ICCRH, c/o St Vincent's Institute of Medical Research, 41 Victoria Parade, Fitzroy, Victoria 3065, Australia. Tel: (61) 3-288 2485

### 4th International conference of systemic lupus erythematosus

Jerusalem, Israel, 26–31 March 1995.  
Details: VIP International Conference Services, 42 North Audley Street, London W1A 4PY. Tel: (44) 71 499 4221

### European Association for Cancer Education

8th Annual Scientific Meeting. Groningen, Netherlands, 26–29 April 1995.  
Details: Meeting Secretariat, Intermed Congresservice, PO Box 4145, 9701 EC Groningen, Netherlands. Tel (31) 50 421924

### National Association of Clinical Tutors

The Association assists clinical tutors in their role as leaders in district medical education. Membership is open to University-appointed clinical and GP tutors.  
The Association arranges courses for the training and continuing professional development of clinical tutors and holds Winter and Summer Meetings for all members.  
How to be an effective clinical tutor. 2/3 February 1995, Burnley, Lancs.  
Spring Meeting, 11–12 May 1995, Stirling.  
Information about the NACT and its activities can be obtained from The Secretariat, National Association of Clinical Tutors, 12 Chandos Street, London W1M 9DE, UK. Tel (44) 71 636 6334.

### Continuing Medical Education in Europe: the way forward through European collaboration

30/31st March 1995

at the

Royal College of Physicians, 11 St Andrews Place, London NW1 4LE, UK

(by kind permission of the Treasurer)

A major international conference bringing together the leaders of medical education in Europe

The programme is designed to be comprehensive and cover all specialties. It will explore areas of concern including finance, implementation, assessment and recertification.

Speakers will be from all European Union countries and from the USA, Canada and Australia. The programme will include free discussion and seminars. The conference language will be English.

If you wish to receive further information or register for the meeting, please write/fax to:

Dr MWN Nicholls, Chairman – Organising Committee  
Fellowship of Postgraduate Medicine  
12 Chandos Street, London W1M 9DE  
Tel (44) 71 636 6334 Fax (44) 71 436 2535

# Postgraduate Medical Journal

## INSTRUCTIONS TO AUTHORS

The aims of the *Postgraduate Medical Journal* are three-fold. Firstly, to help doctors in training to acquire the necessary skills to enable them to deliver the highest possible standards of patient care. Secondly, to help the trainers to develop suitable training programmes for their trainees. Finally, once that training is completed, to allow these doctors to maintain those high standards by a process of continuing medical education.

To achieve these aims we publish original papers, short reports and commissioned editorials and review articles. We are also delighted to receive unsolicited editorials and reviews, from doctors and others. The *Postgraduate Medical Journal* peer reviews all the material it receives. Each issue also includes a Self-Assessment corner, Letters to the Editor, book reviews and an international postgraduate diary. Many issues contain papers or abstracts of symposia devoted to a single subject, and the full proceedings of meetings may be published as supplements to the Journal. The *Postgraduate Medical Journal* is published monthly in the English language, and has an international readership.

### Typescripts

Three complete copies should be sent to the Editor, *Postgraduate Medical Journal*, 12 Chandos Street, London W1M 9DE, UK. Papers must be type-written, double-spaced, on one side of paper not larger than A4 (297 mm × 210 mm). The first page of the typescript should bear the names of the author(s) and the name and address of the laboratory or institution where the work has been carried out, in addition to the title of the paper. The full address, telephone and fax number of the principal author to whom proofs will be sent should be given, together with up to four key words or phrases suitable for use in an index. All pages should be numbered, including the title page. All material submitted is assumed to be submitted exclusively to the *Postgraduate Medical Journal* unless the contrary is stated. Papers may be returned if presented in an inappropriate form. If the paper is rejected, these copies will not be returned.

### The principal author

The principal author must ensure that any co-authors listed agree to submission of the typescript. Any written or illustrative material which has been or will be published elsewhere must be duly acknowledged and accompanied by the written consent of the authors and publishers concerned.

### Style

Abbreviations and symbols must be standard and SI units used throughout except for blood pressure values which are reported in mmHg. Acronyms should be used sparingly and fully explained when first used. Whenever possible, drugs should be given their approved generic name. Where a proprietary (brand) name is used, it should begin with a capital letter. Statistical analyses must explain the methods used. Words to be italicized should be underlined. The *Concise Oxford English Dictionary* is used as a reference for spelling and hyphenation. Illustrations and tables should be referred to in the text.

### Articles

Original articles are usually up to 3000 words long with up to six tables/illustrations and 30 references. They should be divided into: (a) Title page, (b) Summary, (c) Introduction, (d) Materials and Methods, (e) Results, (f) Discussion, (g) Acknowledgements, (h) References, (i) Tables, (j) Figures and captions. The summary should not exceed 250 words and should state concisely what was done, the main findings and how the work was interpreted. Numbered paragraphs should be avoided. The use of boxes with learning/summary 'bullet' points is encouraged.

### References

References should follow the Vancouver style. In the text, they should appear as superscript numbers starting at 1. At the end of the paper they should be listed (double-spaced) in numerical order corresponding to the order of citation. All authors should be quoted for papers with up to six authors; for papers with more than six authors, the first three only should be quoted followed by *et al.* Titles of medical periodicals should be given in full or abbreviated in line with the latest edition of *Index Medicus*. The first and last page numbers for each reference should be provided. Abstracts and letters must be identified as such. For example,

- 1 Clements R, Gravelle IH. Radiological appearances of hydatid disease in Wales. *Postgrad Med J* 1986; 62: 167-73.
- 2 Greenberger JS. Long-term hematopoietic cultures. In: Golde W, ed. *Hematopoiesis*. New York: Churchill-Livingstone, 1984, pp 203-42.

Responsibility for the accuracy and completeness of references rests entirely with the authors.

### Figures and tables

Photographs, photomicrographs, line diagrams and graphs should be prepared to professional standards and submitted as originals or as unmounted glossy photographic prints. When preparing illustrations which include lettering or symbols, remember they will be reduced to 65 mm in width, or less. Three copies of each illustration should be submitted, each bearing a label on the back marked in pencil with the author's names and the number of the figure. Figure legends and tables should be typed on separate sheets. If any tables or illustrations

submitted have been published elsewhere, written consent to republication should be obtained by the author from the copyright holder the authors. Figures and tables should be numbered in arabic numerals.

### Short reports

Short papers or case reports should not exceed 1000 words, inclusive of abstract, introduction, report and discussion. Up to 10 references and two illustrations or tables will be accepted. Each report must include (on a separate sheet) a list of learning or summary points.

### Self-assessment questions

Self-assessment questions may take several formats, including multiple-choice questions, (each consisting of a question stem and five items, with discussion of the correct answers and up to five references per question) and photographic material (eg, clinical photograph, X-ray, blood film, histological section) or data interpretation (eg, ECG, arterial blood gases), with clinical information and up to three questions with discussion of the correct answers, and up to five references per case. Authors whose case reports are rejected may be asked to consider resubmitting their report as a self-assessment question.

### Review articles

The Editor welcomes review articles of up to 3000 words, provided they contain a clear educational message. The use of boxed case histories, learning/bullet points and structured tables/summaries are encouraged. Guidelines for authors of review articles are available from the Editorial Office, who are also happy to discuss proposed articles.

### Editorials

The Editor is delighted to consider for publication unsolicited editorials of 800 words. These will be peer reviewed.

### Covering letter

The covering letter must be signed by all authors and include a declaration that the paper is not under consideration by any other journal at the same time and that it has not been accepted for publication elsewhere.

### Peer review

All papers are peer reviewed. Some are rejected after review by one or more members of the editorial team. The remainder are also reviewed by one or more external advisers. Reasons for rejection will be indicated to the principal author. The Editor retains the customary right to determine style and, if necessary, to shorten material accepted for publication.

### Letters

Letters to the Editor related to articles published in the *Postgraduate Medical Journal* are welcome. Only one copy need be sent, which should not exceed 500 words and five references. Authors whose short reports are rejected may be asked to consider resubmitting their report as a letter.

### Supplements

Guidelines for supplements are available from the Editorial Office, who are happy to discuss proposed supplements.

### Proofs

A marked copy of the proofs will be sent to the principal author which should be read carefully for errors. The corrected copy must be returned to the Technical Editor within three days. Major alterations to text cannot be accepted.

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Offprints may be ordered on a form accompanying the proofs. The charges are necessarily high if orders are received after the issue has gone to press.