Book reviews

Joint and soft tissue injection

Joint and soft tissue injection: injecting with confidence, Trevor Silver. pp vi + 90, illustrated. Radcliffe Medical Press Ltd, Oxford, 1996. £19.95, hardback.

The objective of this book is to provide the reader with confidence in joint and soft tissue injections. The book is written by a general practitioner for general practitioners but is also useful for trainees in rheumatology and general internal medicine.

There are two chapters covering general principles and medicolegal issues, and then seven chapters covering a major region each – shoulder, wrist and hand, elbow, hip and thigh, knee, ankle and foot and spine. For each region there is a description of the functional anatomy, presentation and diagnosis of common problems. The technique for injection is then described. The volume is nicely illustrated with paired line drawings and clinical photographs showing local anatomy and injection site.

The volume is comprehensive and some conditions would not frequently be encountered in general practice. This book should certainly provide the reader with confidence in injection technique but should be used in conjunction with practical tuition from an experienced injector.

Trainees in rheumatology and internal medicine (together with experienced consultants) will find this a useful volume which compares well in quality and price with other books on the same topic. I would recommend it to those wishing to improve their injecting skills. The book should be readily available in clinics and surgeries where injections are regularly performed.

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Human molecular genetics

HLA and MHC. Genes, molecules and function, M Browning, A McMichael, eds. pp xvii + 438, illustrated. BIOS Scientific Publishers Ltd, Oxford, 1996. £75.00, hardback.

This book is the latest in a series of titles on human molecular genetics and is a welcome addition for students of medicine with an interest in the pathophysiology of disease. Following key discoveries in the early 1970s of immune response genes and the link between HLA B27 and ankylosing spondylitis, this volume reflects progress over 25 years which has led to current understanding of the major histocompatibility complex (MHC) which spans 4 megabases of DNA – 1% of the genome – and includes at least 200 genes. The editors' approach rightly emphasises an essential physiological function of the MHC as a molecular apparatus which presents peptide ligands, ie, antigens, to T cells. Chapters follow seamlessly with comprehensive coverage of evolutionary aspects, gene

organisation and regulation, cell biology, protein structure, polymorphism, peptide presentation and immune responses, mechanisms of disease associations, and allorecognition. It is remarkable that 'DNA typing' based on known nucleotide sequences is now almost routine methodology for laboratory detection of HLA alleles.

I found this a very approachable book. The editors are to be congratulated on achieving a coherent style, drawing as they do on expert contributors worldwide, and their thoughtful introduction succinctly highlights advances in the field. It will become the text for specialist practitioners and research students but the general reader should not be deterred – even if you read only the introduction and view the colour plates, you will be fascinated by the MHC.

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Paediatric emergencies

What to do in a paediatric emergency, Ian Higginson, David Montgomery, Phil Munro. pp 48, illustrated. BMJ Publishing Group, London, 1996. £12.95, paperback.

There are a number of texts dealing with acute presentations in paediatrics and the major part of the text in such books deals with situations where a history and examination are possible. This book deals with the emergency situations where there is no time for such subtleties and care must be delivered immediately and appropriately. The guide contains straightforward protocols and procedures for use in such situations as trauma, choking, shock, asthma and coma. The guidelines on trauma management are particularly clear and easy to understand for non-surgeons and are based on the recommendations of the UK Advanced Life Support Group. Its aim, as the authors state, is to make important information readily accessible and it does achieve this well. Thoughtfully the booklet is ring-bound so that it stays open when put down.

The book could be used for training purposes and it would be reasonable to keep a copy in receiving and emergency rooms, intensive care units and on resuscitation trolleys. At several points in the text one is asked to seek 'expert advice'. It would be important, if this book were to be used as a principle source of emergency information, to annotate it with the contact details of such experts. Perhaps in future editions, space could be set aside for this. Ask your resuscitation committee and training officer to have a look at a copy.

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Medical meanings

Medical meanings: a glossary of word origins, Haubrich WS, 253 pp. American College of Physicians, Philadelphia, 1997. Price not given.

Did you know that the word nicotine was derived from a French ambassador to Portugal? Or that the Latin word for sausage became botulism? The word sarcoma is from the Greek root sarco or flesh plus -oma, a fleshy tumour. From the same Greek root comes sarcasm, an utterance intended to cut the flesh; and sarcophagus, a box or container intended 'to swallow the flesh', that is, a coffin. On the other hand, the word liver is derived from the verb to live from the Anglo-Saxon lifer or the German leben. Semen is from the Latin word seed or germ so disseminate literally means to 'scatter seed'.

This and much more can be found in Professor Haubrich's excellent new glossary of words. He is a Californian gastroenterologist, who is also a co-author of Bockus' *Gastroenterology*. He has analysed over 3000 medical and related terms in a lively witty style. You may choose to use it as a dictionary but it is more than that for many of the entries tell fascinating stories. This makes it a treasure-trove of information surrounding the medical terms that we use every day. For example, *ambulance* comes from the French and began as *hôpital ambulans*, literally a walking hospital. During Napoleon's campaigns, to bring medical aid to soldiers in the field, portable units were devised that contained dressings and medicines and also provided for evacuation of the wounded. *Cold turkey* is vernacular for the total, abrupt cessation of a drug, especially a narcotic. The expression alludes to the gooseflesh appearance of the skin of addicts withdrawing from opiate addiction. The nodular appearance is that of the skin of unplucked poultry. *Rhinorrhoea* is a highfalutin way of describing a running nose (rhino from the Greek rhinos for nose and rhoia, a flowing). *Spine* comes from the Latin spina, a thorn or prickly bush, or the protuberances of vertebrae which resemble one.

Our 18th century Samuel Johnson is clearly a hero of the author who often quotes him. When a knowledgeable reader discovered an error in Johnson's 'Dictionary of the English language' he asked "Tell me, Dr Johnson, how could you have made such a mistake?" to which Johnson replied "Ignorance, madam, pure ignorance". Dr Haubrich warns that this would be his reply if anyone finds an error in this splendid thesaurus (treasure trove) of his.

The book is highly recommended for junior doctors to get one over their chiefs and *vice-versa*; for nurses and paramedics so that they know better; and for all students who are curious to learn more.

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Medical training

Learning medicine 1997. An informal guide to a career in medicine, P Richards. pp 119, illustrated. BMJ Publishing Group, London, 1996. £8.95, paperback

This small paperback is the 13th in line from the author since the volume's debut in 1983.