

Local chickens are available both to the Army and NAAFI, and again are of good quality. This has been achieved by the Army specifying the size of eggs required, and contractors improving stock to produce these eggs.

Unsafe table waters have not been seen on sale by myself, or the Staff of the Hygiene Wing.

In general the standard of foodstuffs available to the Services, whether local or imported is good. The condition of production, processing and sale satisfactory.

This standard in Cyprus has to a large extent been achieved by detailed specification of contracts, and by contractors accepting the advice of Service specialists. NAAFI have liaised closely with the Services in the negotiations, and sell only produce from Service approved sources.

I wish to reassure any person who may have read Lt.Col. Harrison's article, and who is in the process of being posted to Cyprus, that the danger to health, to himself or his family from foodstuffs is far less than most other overseas postings. The variety, range and quality of foodstuffs on sale is not likely to lead to disease, malnutrition or monotony.

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I am, etc.,
W. J. LAWRENCE.

22nd April, 1965.

BOOK REVIEWS

Recent Advances in Surgery. 6th Edition. Edited by S. TAYLOR. London: J. & A. Churchill Ltd., 1964. Pp. iv+438. Illustrated. 65s.

This book continues the magnificent standard set by its predecessors and covers the advances in most fields of surgery. The Editor has called on a distinguished panel of contributors who are masters of their subject and also writers of clarity and skill.

The first chapter on Design of the Operating Theatre is a little disappointing as it shows the extremely empirical and impractical attitude still adopted in this country to Hospital design. One especially gloomy remark on page 8 is in the description of a new hospital which has a special clinical charge of 26 beds for anaesthetists included within the Theatre suite, 18 being for reception and the remaining 8 a recovery ward, which implies a somewhat terrifying operative mortality!

There is a most valuable chapter on the surgery of infection and on the present position in burns with an unfortunate curious printer's error on page 55 connecting azotaemia with arrangements being made for a mother to live in. I feel sure that there is an omission at this point.

Mr. Alan Davies contributes a valuable chapter on cytotoxic agents and wisely stresses that their use is still largely experimental and Dempster's chapter on kidney transplantation could hardly be faulted and Mr. Tibbs on Hydrocele in Infancy and Childhood, although very short, clears up a number of widely held misconceptions.

Mr. McKay Watts' chapter on Tracheotomy is excellent but on page 158 under the heading "Removal of Tracheo-Bronchial Secretions" an important point is over-looked in that the sucking tube should never be moved while sucking and should be provided with a finger control suction tube to avoid this damaging manoeuvre.

As is only to be expected, Vascular and Cardiac Surgery is covered extremely well and provides a useful up-to-date reference. Unfortunately though Mr. Eastcott's article (on page 239) repeats the fallacy that the reduction of amputation rate in the latter half of the Korean War by routine primary reconstruction was dramatic.

An extremely valuable chapter on the radiological aids to surgeons is most valuable particularly for those who are not familiar with these procedures and Mr. Calnan's chapter on Cleft Lip and Palate forms a delightful monograph on the subject with a delicate touch of humour in the caption to the illustration on page 357.

Messrs. Hastin Bennett and Radley-Smith discuss succinctly the surgical care of Parkinson's disease and the Editor discusses the treatment of hyper-thyroidism and the adrenal glands with his usual clarity and mellifluous phraseology.

No surgeon could afford to let this book go unread.

J. C. WATTS.

A Laboratory Guide to Clinical Diagnosis. R. D. EASTHAM and B. R. POLLARD. Bristol: John Wright & Sons Ltd., 1964. Pp. viii+250. 18s. 6d.

This book is a companion volume to *Biochemical Values in Clinical Medicine*, and to *Clinical Haematology*, both of which were written by the senior of the authors of the pocket-book under review. This new addition completes a trinity of guides to the intelligent use of the laboratory, and as such becomes part of the modern clinician's armamentarium. It lists, by disease, the laboratory investigations which contribute to a clinical diagnosis. These are subdivided according to whether they are diagnostic or whether they merely support a diagnosis. Non-specific investigations are also listed. Additional notes are appended where appropriate, including tests for progress, and tests giving useful negative information. Errors of commission and omission are inseparable from any pocket-sized aid or guide to a large and complex subject. It would be ungenerous, however, to fault this useful book on such account. The only reservation to be made is to hope that clinicians will not use it uncritically as a reference book from which to copy lists of investigations onto laboratory request forms.

P. D. MEERS.

Basic Cardiology. Second Edition. T. E. GUMPERT. London: John Wright & Sons Ltd., 1964. Pp. vii+234. Illustrated. 42s.

On the fly-leaf of the cover it states that this book "will prove of value to both students and post-graduates". This is a fairly true statement as a good attempt has been made to put over the basis of cardiology. Each chapter deals with a separate facet of this difficult subject and on the whole it is an extremely easily read book. Unfortunately, however, some of the subjects dealt with are not sufficiently detailed to be of use to a postgraduate student. On the other hand I find the chapters on angiocardiology and cardiac catheterisation very well written and of value, providing a good introduction to these important methods of investigation.

A. K. DAVIES.

Basic Principles of Accident Surgery. M. C. T. MORRISON. London: K. H. Lewis & Co. Ltd., 1964. Pp. vii+116. Illustrated, £1 1s.

This is a very excellent little book for the new Casualty Officer and for anyone entrusted with the reception of injured persons to hospital. It is written in a clear, if somewhat colloquial, style but nevertheless covers the subject very adequately in a small compass.

In Chapter 1 the author stresses the second principle of accident surgery, i.e. restoration of function but it is not until later in the book that we find more attention paid to the first principle which is to save life. He adopts an unusual format in first of all covering the pathology of injuries in the various tissues of the body and the physiology of chest injuries before going on to management of cases but this works well as it enables him to state the treatment without digression. On page 6 the exposure treatment is not mentioned and he states—"treatment is designed to prevent infection, this entails a protective covering" a statement with which not all surgeons will agree since coverings are often far from inimical to infection.

The popular misconception of what is meant by debridement is repeated on page 7 and the dangerous practice of primary flap grafts is described on page 8 with an illustration of a graft which, because of its incorrect base length ratio, is sure to slough.

On page 18 it is difficult to understand the statement—"however if you wait for recovery which is not going to occur, valuable time will be lost" and in such a short book the comment that weight bearing applies only to the lower limbs except in acrobats (page 37) appears somewhat facetious. At last on page 45 we find the clear statement that the most important duty of the doctor is to decide whether the patient's life is in imminent danger.

The reliance on cyanosis for diagnosis of airway obstruction can be dangerous in injured persons who may have suffered blood loss as well since a reasonably high haemoglobin percentage is required for cyanosis to be apparent.

The chapter on abdominal injury is perhaps the weakest part of the book and there is much advice of very debatable value. One cannot agree that X-rays are not very helpful nor that a ruptured liver should be either stitched or packed and to wait for twelve hours observing a possible abdominal injury is, one feels, far too long a time. To advocate primary suture of the urethra over a catheter condemns a patient to subsequent stricture formation.

In head injuries too, the statement that there is never any urgency for active treatment of depressed fractures and advocating waiting for 24 to 48 hours is dangerous advice as is recommending the use of chloramphenicol in compound skull fractures. It is indeed gratifying to see the necessity of avoiding suturing skin under tension stressed and delayed primary suture advocated (page 106).

These small objections however in no way mitigate against the value of this concise, readable and inexpensive book which will form a useful handbook for any young Medical Officer.

J. C. WATTS.

Mountain Sickness. B. BHATTACHARJYA. London: John Wright & Sons Ltd., 1964. Pp. 58. Illustrated. 12s. 6d.

This booklet outlines the problems, both physiological and clinical, of mountain sickness. The clinical syndromes encountered are discussed in greater detail and the treatment of each condition is summarised.

In the last chapter the author suggests further researches into specific problems of high altitude sickness which should lead to a greater understanding of the problems involved.

H. F. MCELLIGOTT.