

fine address he gave when 75 years of age at the Leishman Memorial Celebrations in 1966.

"I stood at one time" I said "in the same relationship to Sir John as he stood to Sir William. I regarded him with the same blend of awe and affection. He too, as has been said so well of Sir William, had the outward appearance of a soldier, yet spoke like a Fellow of the Royal Society."

When Boyd retired in 1946, we dined him out in the Mess. There cannot be many people around who were present on that occasion when our great war-time Director General Sir Alexander Hood, paid him a handsome compliment. "The mantle of Leishman" he said "has fallen upon Boyd's shoulders." Now it would be easy to sustain this statement. Their contributions to science, their careers in the Corps had much in common. But in one respect, I am happy to say, they differed markedly. Whereas Sir William was cut off in his prime, Sir John was spared for many years to become the elder statesman — the *doyen* of Army Pathology. He continued to be one of our most valued counsellors right up to the end.

If ever a man could be said to have happily harmonised the rival calls of Mars and Aesculapius, it was John Boyd. May he rest in peace.

## BOOK REVIEWS

**Problems in Practice Series.** Var Eds. Problems in Geriatric Medicine. A Martin. Lancaster. M T P Press Ltd. 1981. p 187. £7.95.

Army general practitioners do not commonly see the considerable problems that the ageing civilian population are producing for their colleagues but this book gives a brief survey of the main problems. The chapter on the demographic and social factors clearly delineate the size of the problem comparing the European situation with that of Eastern Countries. This book does not claim to cover the subject completely but it is an excellent introduction to the subject for Army general practitioners.

W G KILPATRICK

**Topics in Respiratory Disease.** Interstitial Lung Disease. Respiratory Infections and Tumours. Assessment of a Patient with Lung Disease. Airways Obstruction. Var Eds. Lancaster. M T P Press Ltd. 1981. Pp var 88-112. £5.95 each. Illustrated.

This series of Topics in Respiratory Disease are pleasantly small books, clearly illustrated, well written, and cover a wide range of respiratory medicine. Each volume is complete in itself, but the series make more complete reading. For the undergraduate the series would make a complete text book, for the postgraduate working for his MRCP diploma, the series will be particularly useful to introduce and revise Respiratory Medicine, and for the general physician, an excellent refresher.

M BROWN

**Bailey & Loves Short Practice of Surgery.** 18th ed. Revised by H J Harding Rains and H David Ritchie. London. H K Lewis & Co Ltd. 1981. Pp ix + 1350. £23.00 (cloth). Illustrated.

No FRCS candidate can afford to be without this book which is the standard text in British surgery.

It would be presumptuous of a reviewer to offer anything but praise and I cannot claim to have read every word of its 1370 pages, however, I did notice a minor misprint on page 1148.

Army surgeons can find themselves in isolated situations faced with challenging surgical problems and, remembering some of my own, I looked up a few examples. It does not

record that primary carcinoma of the liver is common in Thailand and that it may present with haemoperitoneum. It advises that spleno-renal anastomosis for portal hypertension should be performed through a left thoraco-abdominal incision, I believe that a purely abdominal incision is preferable. Amoebic colitis is not given as a differential diagnostic of appendicitis and every experienced Army surgeon will have come across such patients.

The range of general surgery is so vast that it could not be encompassed in one book. The surgeon in training requires a firm foundation of basic surgical knowledge on which he can build from his experience, from his reading of journals and monographs and from his discussions with his contemporaries and his seniors. "Bailey & Love" is the most important book in British surgery and rightfully deserves its central place in our surgical training.

R SCOTT

**A Colour Atlas of Tropical Medicine & Parasitology.** 2nd ed. W Peters and H M Giles. London. Wolfe Medical Publications Ltd. 1981. p 385. Illustrated.

This excellent little book has been updated in this 2nd Edition with the welcome additions of the life cycles of the major parasites, and includes a brief reminder of those 'new diseases including Lassa Fever, Marburg and Ebola Haemorrhagic Fevers.' The illustrations have been updated with the same excellence as in the 1st Edition.

It must remain an invaluable hand book for those serving overseas, both for doctors and paramedicals, and for those who have to deal with similar problems in their UK practice, as an aid to recognition of the disease. Used along with a standard work in Tropical Medicine it helps to illustrate and improve the understanding of this fascinating subject.

M BROWN

**British National Formulary. 1981. No. 1.** London. The Pharmaceutical Press. 1981. p 400 (0 85369 140 1). £3.80.

Many doctors took their first faltering steps in prescribing with the aid of the old BNF and being guided by it would have learned to prescribe sensibly, safely, and economically. The new version has been radically altered but its effect on prescribers who use it will be the same. It is to be revised twice a year, it now contains the price range of products, the description of preparations follows after the notes associated with their general group and it covers many more products available in UK. It should certainly be consulted before looking through MIMS or Data Sheet Compendium and although it will take time to become accustomed to the new layout, once this is overcome it will repay the user. It is an excellent book, should become an essential and familiar companion for all doctors involved with the treatment of patients, and is enthusiastically recommended.

W G KILPATRICK

**Missile Head Injuries in Nigerian Soldiers.** Adelola Adeloye. Nigeria. DAMC Army HQ. 1978. Pp xvi + 137. Illustrated.

Monographs on missile injuries which record personal experience are rare. For this reason military surgeons should be grateful to Professor Adeloye for a detailed study of 250 Nigerians admitted to the University College Hospital, Ibadan with missile head injuries. Ninety-two of these patients sustained tangential missile wounds, and 70 of these were inflicted by rifle bullets. Fifteen patients sustained perforating wounds but as Professor Adeloye remarks, usually few such cases reach hospital to receive treatment.

Beginning with a historical review, Professor Adeloye classifies missile head injuries, describes the evacuation of war casualties in Nigeria and gives a detailed account of the clinical findings, investigations, operative procedures, complications and prognosis in tangential wounds. He discusses mortality, infection, post traumatic epilepsy and deafness in his patients. His discussion of the post-concussional syndrome is of particular interest because since there was no expectation of financial gain he was led to attribute the syndrome in his patients to an organic cause.

I am sure that the comprehensive account of tangential missile wounds will, as the author hopes, be of lasting benefit and a source of ready reference for those whose duty it is to deal with missile head injuries.

This monograph should be available in military medical libraries. It should be of particular interest to English speaking surgeons in Africa and Asia.

R SCOTT