BOOK REVIEWS


The microcomputer revolution of recent years has made powerful machines and highly complex programs generally available. While the advantage of this is freedom from much of the arithmetical and algebraic detail associated with analysis, it is vital that the underlying basic principles of statistics be understood. The authors’ stated intentions are, therefore, laudable:—

(i) to explain the rational basis of widely applicable statistical methods without requiring the reader to understand the underlying algebra; and

(ii) to summarise the limitations of the various statistical procedures so that the user can make an informed choice when analysing data.

The title might imply a wider coverage than is, in fact, contained within the book, which is a collection of articles reprinted from the Journal of Clinical Pathology. As such, the statistical methods described are those applicable in the area of laboratory investigations and the worked examples reflect this. Concentration is also limited to the menu-driven package, STATGRAPHICS and the command-driven package, MINITAB, although the general principles are applicable whichever software tool is being employed.

Considering the size of the book, coverage of the statistical method is fairly comprehensive. The first chapter provides a useful introduction to data, microcomputers and software packages. Chapters 2-7 cover methods of summarising data; analysis of data from one or two groups; distribution-free methods, applicable when assumptions of Normality are not met; correlation and regression and the analysis of categorical data. The misuse of correlation analysis in the examination of agreement between two methods of measurement is discussed. The inclusion of Chapter 8, “Statistical methods for diagnostic tests” is to be welcomed. It covers reference ranges; sensitivity, specificity, false positive and negative rates and predictive power and discriminant analysis (only the simplest form of the last method is considered, with two groups to discriminate between and two variables on which to base the analysis).

Throughout the book, some methods are explained in detail, while others receive minimal attention. As an example, the problems (encountered in some cases) of interpreting back-transformed results are not discussed and it may not be immediately obvious where the confidence interval based on percentages (page 69) comes from in the example on comparing two methods of measurement. One of the questions I am frequently asked is “how many cases do I need?”, and I was disappointed not to find any discussion of the power of statistical tests and the concepts associated with the estimation of required sample sizes. From time to time, annoyingly (to the reader seeking a solution to his or her particular analysis problem), though soundly, as soon as anything complicated is introduced, the authors suggest seeking out a statistician (or, as they put it, a “friendly local statistical guru”) for advice. One of the most unfortunate of a number of misprints is the association of p<0.05 with a “not significant difference” (page 31).

While reading through the book, I attempted to assess its suitability for readers with little previous statistical knowledge or experience in the use of computer software packages. Inevitably, it is not possible for a small book to meet everyone’s every need, but, overall, I consider that it usefully complements existing texts on medical statistics. One of the strong points of the book is its emphasis on the importance of understanding which methods are appropriate in different situations and, for this alone, I would recommend it to any doctor embarking on data analysis. The authors’ “Reprise” on pages 98-99 states that “the investigator should always remember that it is stupid to use the wrong technique to answer an irrelevant question” and I believe that educating the reader in the avoidance of this sums up the purpose and achievement of the book very nicely.

M M Snell


This little book is just the job to stimulate the little grey cells of the membership candidate about to take the written section of MRCP (UK) Part II. The author is to be congratulated on collecting sixty-two clinical cardiological vignettes to test the analytical capability of senior house officers who may think they know it all.

In general, the discussions of each case presented in the second half of the book are sensible, balanced and refreshingly honest in suggesting that, on occasions, no clear choice can be made between competing diagnostic possibilities.

Unfortunately, there are the occasional typographical errors; the “creatinine” kinase (p34), the “thoractomy” scar (p59), “They” hypokalaemia (p162) and the missing line (p173) which was probably advising instant progress to the cardiac operating theatre for the obstructed Bjork-Shiley valve. Substantive criticisms are few. On occasions, the ECG representations could be clearer: membership candidates can rest assured that the ECGs in the examination will be reproduced to a much better standard. The pure cardiological background of the author is revealed in the lucid descriptions of the
ruptured sinus of Valsalva aneurysm, the pacemaker syndrome and the atrial flutter arising in the native atrial remnants of a heart transplant recipient. It is reflected equally in some cases where this reviewer feels a better bolized and echocardiography had failed to demonstrate any residual atrial tissue? Was cardiac biopsy really required for a patient with suspected sarcoid cardiomyopathy before liver function tests and possible liver biopsy were considered, let alone mentioned? The case of diabetes that developed adult respiratory distress syndrome was entirely mismanaged when no discussion of the cause of the renal failure was considered. This case would have made a useful point in a book on cardiology that haemodynamic assessment can be justified readily before proceeding to what was admitted to be an inappropriate form of dialysis therapy. If any Bjork-Shiley valve problems were to be discussed, it would have been topical to mention strut failure in addition to partial thrombotic occlusion. Why was a nocturnal EEG or a fasting, sleep-deprived EEG not considered in the case of suspected nocturnal epilepsy?

As intimated in the opening paragraph of this review, books such as this are good for mental gymnasts to assess their agility. One particularly interesting case was that of Private Mills with an enlarged cardiac silhouette on chest X-ray where the advice was that he should be suspended from military duties. Those of us with rather more military medical experience would advise total separation of the private soldier from his Unit by urgent admission to a military hospital! Probably, this is yet another case of failed communication between military and civilian doctors.

I enjoyed this book. I have little doubt that those for whom it was intended originally will do so as well. It is good value for money. I suspect it will sell well and have no doubt that a third edition will appear before long in order to incorporate many of the rapid changes, still occurring in clinical cardiology, which are mentioned in the preface. Such a further edition will also permit elimination of the few blemishes which this text contained. If the other volumes in this series, which includes case presentations in renal medicine and gastroenterology, are as good, then the publisher will have made a worthwhile contribution to medical education in this country.

M J World


More than 20 years after its first printing the authors rightly continue to include in the latest version the preface to the first and second editions; which refers to the surprising degree of acceptance of this textbook outside the Australasian region. Written for doctors, paramedics and diving instructors by a Sydney-based combination of diving physician (Edmonds), consultant anaesthetist (Lowry) and diving physiologist (Pennefather) Diving and Subaquatic Medicine has been for some years now the recommended text for the Standard Underwater Medicine course at Alverstoke.

The reviewer expects this third edition to remain so. During the 1950s and 60s the late Surgeon Rear Admiral Miles’ Underwater Medicine, a text whose brevity reflected the diving technology of those times, achieved a similar longevity by teaching principles of diving medicine through their application in actual clinical cases. This aim has been amply achieved in Diving and Sub-Aquatic Medicine where clarity of expression and a high standard of illustration are enhanced by “pearls” of boxed text e.g. “Elevation of the chest and abdomen out of the water reduces the severity of the blast injury” (p 352). Such “pearls” provide ideal revision for the MCQ examination which nowadays concludes many courses in underwater medicine and could also—with appropriate acknowledgement—form the basis of teaching slides.

New sections in the third edition include diving fatalities, diving environments, the female diver, psychological problems, long term disorders, cardiac disease in diving, submarine medicine and drugs and diving. Much of the remainder has been extensively edited and updated. The references at the end of each chapter provide a comprehensive entry into the literature—nevertheless readers in the UK and elsewhere will wish that the citation of the 1972 edition of the British Sub Aqua Club Diving Manual on p 273 at the end of the vitally important chapter on breathing gas contamination could have been of the current edition of that manual, as the latter reflects state of the art techniques of prevention. Furthermore British Sub Aqua Club medical guidelines on asthmatics differ from those set out by the authors, the Australasian experience with asthmatic recreational divers being much more unhappy than the virtually incident-free series reported recently by British Sub Aqua Club medical referees. Royal Naval Diving Medical Standards (which apply to all three Services) of course exclude asthmatics from Service diving for the reasons set out in Chapter 35.

At a cost of nearly £50 this text is not a cheap one, yet it needs to be on the bookshelves of every medical officer with a serious interest in the subject. With an Army cadre of some 300 soldiers currently qualified as Service divers and much larger numbers of service personnel and dependants diving for adventurous training or for recreation a wide variety of AMS personnel will continue to be involved in diving medical examinations. By extension this means that a copy of this new edition should be available in the library of every military hospital and ideally in every garrison medical centre as well.

Finally a classical note sets the tenor of this third edition in its dedication to: “the memory of Pluto who
died even though he never left dry land”, indicating the ultimate fate of all life whether facultatively aquatic or not. The reviewer recalls the dedicatee as the Edmonds family’s affectionate Bassett hound, and does not feel that in revealing this fact to readers of the Journal that he has breached a confidence tantamount to revealing the identity of the BMJ’s Minerva. “De mortuis nihil nis bonum”, the better known Latin version of Chilon of Sparta’s dictum of the 6th century b.c. must surely apply to Pluto as he gently reminds us in a litigation-conscious world to keep an appropriate perspective on each case of diving injury and death according to the guidelines set out in this book. “Sic transit gloria canis” in the dedication leads on to “Sic transit gloria editionis libris” in the positively Dionysian preface to this third edition. Read the preface—and the rest of the book.

N K Cooper


Bailey & Love’s Short Practice of Surgery is 60 this year! Readers may recall Maj Gen Bob Scott’s review of the 18th edition in the journal in 1982. He stated “No FRCS candidate can afford to be without this book which is the standard text in British surgery.” He would no doubt express the same opinion of this, the 21st edition. The editors have assembled 37 general and specialist contributors to assist them in producing this current masterpiece. The book has been comprehensively updated. The new chapter on trauma surgery is most welcome and brings the book into line with its competitors. Having done so, the editors might usefully have removed the final section of chapter one dealing with the management of the severely injured, particularly as it conflicts with the advice given in chapter two.

The book retains its traditional format with clear line drawings and excellent illustrations, many in colour. The style remains crisp, lucid and clear, no mean achievement with 37 contributors. It is particularly pleasing to note that the new editors have retained the historical vignettes, one of the hallmarks of Bailey and Love.

The new edition is strongly recommended. At £49.00 it is a bargain.

J M Ryan


This book is a revised edition of a work first produced in 1978. Its revision reflects the changes in the 21st edition of Bailey & Love’s Short Practice of Surgery. Over 250 new questions have been introduced. The format is clear and precise allowing the book to be used as an easy test of progress in learning the principles and practice of surgery. Clearly it is best used in conjunction with the 21st edition of Bailey & Love although it will be useful for all fellowship candidates irrespective of the choice of text. It is also suitable for undergraduates. Good value for money.

J M Ryan


This is a comprehensive book supposedly for the lay person. This new edition is divided into three sections: the first concerns the principles of drug use and is well written and easy to comprehend. Part two concerns drugs used to treat specific disorders and is very comprehensive indeed. Finally there is a ‘popular pharmacopoeia’ (my inverted commas) of nearly three hundred pages.

The book is well laid out and easy to read but I would wonder quite how many lay people wish to have such a comprehensive volume available.

The first edition appeared in 1975 with the specific purpose of increasing the layman’s knowledge of drugs and their side effects, and hopefully to involve the patient in deciding which drug should be used to treat which condition. The author complains that some doctors communicate poorly—an opinion with which I heartily agree—but surely it is the doctor’s responsibility to improve these skills to allay any possible fears or anxieties the patient may have rather than for the latter to have to refer to such a volume as this.

The author also wishes to see an increase in self treatment and recommends discussion between patient and pharmacist about drug selection. This again obviates the doctor’s responsibilities. Over the counter drugs are potentially dangerous and in parts of the world where nearly all drugs are available in such a manner far more problems have been created than solved.

As a guide it would be useful for junior doctors but no more so than an up-to-date British National Formulary. For the lay person it can hardly be recommended as essential reading.

G E Ratcliffe
VIDEO REVIEW

The Obstructed Airway: The Services Sound and Vision Corporation A3888.

Management of the obstructed airway is a difficult subject to teach. However, SSVC in conjunction with the Royal Naval Medical Staff School, RN Hospital, Haslar, have done just this in an excellent 25 minute video. The viewer is taken sequentially through the different manoeuvres and procedures that may be necessary to safeguard a patient’s airway. The superb graphics allow a clear understanding of the thinking behind these techniques, and make the instruction material very easy to follow.

The first part of the video consists of the maintenance of a clear airway and the assessment of breathing. This is a basic life support and is appropriate for all levels of medical carer from combat medical technician to doctor. The second half of the video deals with subjects which can be classified as advanced life support eg cricothyroidotomy and intermittent positive pressure ventilation. It is the intention of the Surgeon General that all medical officers in the Royal Army Medical Corps should be trained in advanced life support. This video would be an excellent part of the airway and breathing teaching package for this training.

This video should be seen, its message learnt and practised by all doctors. It will be useful in the training of all who attempt to perform resuscitation efficiently thereby saving lives.

W A McFADZEAN
J RESTALL

OBITUARIES

Regimental Headquarters would welcome self written obituaries and when completed they should be forwarded to Regimental Secretary RHQ, RAMC, Keogh Barracks, Ash Vale, Aldershot, Hants GU12 5RQ.