

various risks involved, and concludes that although it may for a time be the optimum available treatment in certain conditions, as a form of therapy it is crude, dangerous, and repellent to anyone who holds the central nervous system in respect.

In addition to giving reviews of publications appearing during the previous year, the medicine section of the *Annual* contains a number of interesting special articles covering certain subjects such as mass radiography for pulmonary tuberculosis, typhus fever, yellow fever and sciatica.

Surgical subjects discussed are very numerous, and many of the contributions are illustrated by excellently reproduced photographs (some being in colour) and diagrams, and of course war surgery occupies an important place.

An interesting minor point concerns fractured ribs:—‘Surgery of the Chest.—The time-honoured treatment of fractured ribs by strapping the chest is being replaced by the much more effectual method of injecting a local anæsthetic, such as nupercaine or procain.’ A special article deals with ante-partum hæmorrhage, and another with blood and serum transfusion.

**ESSENTIALS FOR FINAL EXAMINATIONS. IN MEDICINE.**—By John de Swiet, M.D. (Lond.), M.R.C.P., Captain, R.A.M.C. Second Edition. 1943. J. and A. Churchill, Limited, London. Pp. viii plus 165. Price, 7s. 6d.

THE reviewers' first section to this booklet was unfavourable. How could a small book of 165 pages be of any real use? How could it do anything but encourage ‘cramming’, a deplorable procedure?

In the preface to the first edition the following sentences appeared:—

‘The object of this little book is to provide students up for their “finals” in medicine with the means of rapid revision of the most important and most likely subjects which they may encounter in their papers. It is not claimed that anything like all the possible questions have been provided for, but the endeavour has been to make the selection representative of all the systems and their diseases. It is naturally assumed that the major textbooks have been gone through thoroughly, and therefore this book is chiefly intended for those who now wish to crystallize and summarize their knowledge.’

This edition has been thoroughly revised and all bacteriological and public health aspects have been omitted; a few common skin conditions and infectious fevers are discussed.

After reading much of the book, the reviewer feels that some of his doubts have been removed. The accounts of some diseases however are so condensed that their utility is rather doubtful. Used as the author intends it to be used, the book should be of value, but it seems rather likely that the book will be used in other ways. Nevertheless the reviewer is keeping this book for possible use by his son while studying medicine!

J. L.

**TROPICAL AND SUB-TROPICAL DISEASES (OXFORD WAR MANUALS).**—By C. H. Barber, D.S.O., M.A., D.M. (Oxon.), M.R.C.S., L.R.C.P., Lieut.-Col., I.M.S. (Retired). 1942. Oxford University Press, London: Humphrey Milford. Pp. xii plus 189. Illustrated. Price, 5s. Obtainable from Oxford University Press, Nicol Road, Bombay

This book was published in 1942 but has only recently reached us. It is apparently designed and written as a manual for medical officers proceeding from England to the tropics for the first time; its small size is intended to make it possible to carry it anywhere in the pocket. It contains only 138 pages, including the index, and it deals with about 60 diseases, some of which might easily have been left out as they are either very rare or else unlikely to be seen by British medical officers, e.g. melioidosis of which only few cases have been recorded; espundia and tularæmia. Perhaps in writing on the latter two diseases the author

has the American market in view, but we hope that American readers will not regard this book as representative of British tropical medicine to-day, for it is in many ways inaccurate and often out-of-date.

The author writes about sunstroke, a condition which most authors consider as non-existent. His course of quinine treatment for malaria lasts for nine weeks and requires 640 grains of quinine. He recommends beginning malaria treatment by a purge of 3 grains of calomel ‘to bring the temperature down (if malignant tertian) as soon as possible’. The prevention of relapse in malaria includes such procedures as applying locally to the spleen (*sic*) red iodide mercury ointment or iodine paint. Many statements made in the malaria section are rather inaccurate or misleading. Details are given of Field's method of 1940 of staining malaria parasites, but Field's much better method of 1941 is not given.

In other sections too, particularly those on kala-azar, dysentery, cholera and sprue, misleading or inaccurate statements are made. Some mortality rates quoted are far too high, e.g. cholera (untreated) 70 per cent, enteric fever in the tropics 30 to 40 per cent.

The author appears ignorant of the fact that ‘sulphanilamide’ is the name of a chemical compound and not the name of a group of drugs. He writes repeatedly of ‘sulphanilamides’.

For immunization against yellow fever, the ‘pantropic tissues virus vaccine’ is recommended!

To deal with 60 tropical diseases in 188 pages means drastic selection and much condensation, but much more care should have been taken to see that the material included was accurate and in accordance with modern practice.

This is a very poor book.

J. L.

**A POCKET MEDICAL DICTIONARY.**—Compiled by Lois Oakes, S.R.N., D.N. (Lond. and Leeds). Assisted by Thos. B. Davie, B.A., M.D. (Liverpool), F.R.C.P. (Lond.). Sixth Edition. 1943. E. and S. Livingstone, Edinburgh. Pp. xx plus 451. Illustrated. Price, 4s. and postage 3d.

DOCTORS and nurses will remember how, when they were students, their teachers and their textbooks would often use words which they didn't understand; and how often they did not like to display their ignorance by asking the meaning of these words.

This little dictionary is designed to meet the situation. In a 450-page book of pocket size there is, in addition to a medical dictionary, information regarding degrees, diplomas, temperatures, weights, measures, tray preparations, first aid, poisons, physiological standards, examination of urine, stools, blood, etc.

Some of the terms given in the dictionary the reviewer has never heard or seen used, and out of the first twenty-six words there were eight with which he was completely unfamiliar; for example ‘abiogenesis’. Is this a word which a medical student or nurse is likely to meet? Many other unusual words are also included. Some selection might make the dictionary smaller and handier.

On the whole however a very useful little book.

J. L.

## Correspondence

### INCOMPATIBILITY OF SULPHONAMIDES AND QUININE

SIR,—I have read with interest the note from a recent issue of the *Lancet* regarding the above, reported in the editorial columns of the *Indian Medical Gazette*, January 1944.

On this subject my observations are not the same as those of Dr. Niblock. I have on several occasions administered sulphapyridine with quinine ethylcarb without any visible uræmic symptoms. Each dose of