

nary medical subjects such as orthopaedic, skin, or gynaecological disorders are by different specialist authors, and contain little information not already accessible in standard textbooks. Anaemia, for example, occupies a chapter of 20 pages, although

anaemia in adolescents is neither particularly common, nor possesses any special characteristics; the pages are mainly taken up by a discussion of basic biochemical theories about haemoglobin synthesis which seems strangely placed here.

Dr. Daniel has not provided a convincing answer to the doubts expressed in my opening question.

DOUGLAS GAIRDNER

## Skin Disease in Practice

**Synopsis of Dermatology.** 2nd edn. W. D. Stewart, M.D., F.R.C.P. (Pp. 445; £6.25) Henry Kimpton 1970.

In most general practices at least 10% of patients seek advice because of skin disorders and the new practitioner soon finds that his student manual contains too little information, particularly on differential diagnosis and on treatment, for his present purposes, yet he has no need for a large reference book. The fact that there are few books which can be recommended to him is a measure of the far greater difficulty of writing effectively for the practitioner than for the student or the specialist.

Drs. Stewart, Danto, and Maddin, dermatologists in Vancouver, published the first edition of their *Synopsis of Dermatology* in 1966. Deservedly it was well received, for it was clearly written and up to date and provided precisely the type of information required in practice. This second edition has been extensively revised. The introduc-

tory chapter on the anatomy and physiology of the skin contains some generalizations which seem at first to be too sweeping, but which prove after careful consideration to be acceptable in a short didactic text. New work on the aetiology of many diseases has been incorporated in the appropriate chapters with equally ruthless but intelligent selection. A chapter of over 30 pages devoted to regional diagnosis should be of real value to the inexperienced in suggesting a wide but realistic range of diagnostic possibilities. The numerous black and white illustrations are almost all informative. Some should be replaced in future editions—for example, the poor photograph of dermatitis herpetiformis on page 58 could be omitted as this condition is well illustrated on page 114.

The systematic account of skin diseases is well presented, and a sensible balance is maintained between common and rare diseases. Perioral dermatitis receives a short chapter to itself, but is not mentioned in

the differential diagnosis of rosacea or acne. Pemphigoid is commoner than pemphigus in most parts of the world and deserves more detailed discussion. An increased incidence of diabetes is associated with generalized granuloma annulare but not with the common localized forms. Macular amyloidosis, which is omitted, is commoner than some forms which are included, and perhaps napkin psoriasis should be briefly described. The therapeutic recommendations are sound and are sufficiently full to be helpful. It is good to see the use of radiotherapy in acne discouraged, but the unwisdom of prolonged application of topical steroids in facial dermatoses should be emphasized.

The authors have most successfully carried out a difficult task. This book is strongly recommended to the general practitioner, and will also serve as a very readable introduction to clinical dermatology for the general physician.

ARTHUR ROOK

## Poet and Physician

**Thomas Campion:** Poet, Composer, Physician. Edward Lowbury *et al.* (Pp. 195; £2.10) Chatto & Windus, 1970.

The music of Thomas Campion lay forgotten until Edmund Fellowes in the 1920s revived the songs of the English lutenists. His poems had fared rather better, being rediscovered in early Victorian days after long years of oblivion. This scholarly study combines biography with appraisal of him as poet, composer of music and masques, and musical theorist.

Thomas, who had the rare genius for "making poem and music flow in a single stream," lost his father when he was 9 and his twice-widowed mother soon after her third marriage. He was but 13 when his stepfather remarried and little more than 14 when he was sent to Peterhouse for three years. He did not graduate. He was admitted to Gray's Inn in 1586, where he

acquired the many social and artistic accomplishments of a cultured gentleman. He was not called to the bar, but it was here that he showed equal promise as poet and composer. He seems to have interrupted these agreeable pursuits in order to serve in the Earl of Essex's ill-fated endeavour to help Henri IV to resist Spanish invaders in Brittany. In 1605 he acquired the M.D. of Caen, a university less known for medical learning than for its music, its pageantry, and its poetical contests. His small creative output for the next few years is believed to have been due to the pressure of medical duties in London in the wake of an epidemic of plague. He was implicated, but innocently it seems, in the alleged poisoning of Sir Thomas Overbury in the Tower. He died in 1620 and left his fortune of £20 to Phillip Rosseter, with whose *Booke of Ayres* (1601) he had been

so closely associated.

A lyric poet by nature, a gifted composer—so much is certain, because his written words and his notations are preserved. A good physician? We would like to think so, but a doctor's claim to immortality rests on his own writings and on the views of his patients and professional contemporaries: of these we have none. A man may devote his whole life to the care of humble and illiterate patients yet remain unknown to posterity. Campion's music seems not to have obtruded obsessively into his medical life, for he claimed to be more reasonable than Galen, who "must apply all the proportions of Musick to the uncertain motions of the pulse." Few members of our profession can have shown such versatility, prowess, and promise in the arts in a life of 53 years.

W. H. McMENEY

## SHORTER NOTICES

"Recent recommendations and regulations concerning clinical experimentation require that a physician explain to the patient that he is being experimented upon. Is this to be applied to all therapeutics? If not, why not? Is it moral for a physician to perform a bad experiment without explanation, and yet to be required to explain fully if it is a good experiment? Forty-five years of clinical experience have convinced me that the cardinal sin of any physician is that he frightens his patient."—Sir George Pickering.

"While scientists are a common breed

whichever research council they may associate with, nobody would have any difficulty at all in distinguishing the British Medical Association from the National Farmers Union."—Dr. J. A. B. Gray, Secretary of the Medical Research Council.

Quoted from *Medical Research*, proceedings of a conference organized by the Council for International Organizations of Medical Sciences, October 1969, and published by the World Health Organization, 1970 (80p net).

A miscellaneous collection of seven essays on medical subjects are brought together in *Problems and Progress in Medical Care*, edited by Gordon McLachlan. The various authors of

these essays range over the distribution of medical manpower, financing of health services in Britain, geriatric medicine, and children's behaviour. The book (174 pages) is published by the Oxford University Press for the Nuffield Provincial Hospitals Trust (£1.75 net).

That invaluable compendium of information *The World of Learning* has now appeared in its 21st edition (1970-1). It gives information on universities, libraries, museums, and learned societies throughout the world, listing the members of their staffs and giving some idea of the scope and interests of each institution. Comprising 1,868 pages, it is published by Europa Publications, London, for £10.50.

## MEDICAL NEWS

### Report on Issels Clinic

On 3 March the report of the team which visited Dr. Issels's clinic was published by the Department of Health and Social Security (see leader at p. 516). The team, led by Professor Sir David Smithers (*B.M.J.*, 16 January, p. 183), spent over 200 hours in the clinic, during which they met the staff, studied the records, attended ward rounds and demonstrations, and made abstracts of notes on former patients. The conclusion reached by the team was that "on the clinical and scientific evidence available to us we consider that no further investigation of the methods of treatment peculiar to this clinic is called for." *A Report on the Treatment of Cancer at the Ringberg-Clinic Rottach Egern, Bavaria*. London, H.M.S.O., 1971. Price 15p net.

### Postgraduate Seminars at B.M.A. House

The one-day obstetric and gynaecological seminar organized by Mr. David Brown of Chelmsford will be held at B.M.A. House, London, on Friday, 19 March from 9.30 a.m. to 5 p.m. Open to any N.H.S. general practitioner in England and Wales (limited to 50) the seminar has been approved as two sessions under Section 63 of the Health Services and Public Health Act 1968. (For details see advertisement page xxiv.) The registration fee is £2 (including lunch), and application should be made to the Secretary of the Board of Science and Education by telephone (01-387 4499) or by using the form in the advertisement.

It is hoped that the subjects for the two following seminars will be: paediatrics (Friday 16 April), general medicine (Friday 14 May).

### Postgraduate Medical Education

The Council for Postgraduate Medical Education in England and Wales held its second meeting on 16 February at the Royal College of Physicians, London. At its first meeting the council had decided to defer consideration of the appointment of specialist advisory committees until a later date, but had agreed that the representatives of the B.M.A. and of the Royal College of General Practitioners should put forward ideas about the composition of an advisory committee on general practice. At its second meeting the council received a report on the suggested composition of such a committee and agreed that it should consist of the general-practitioner members of the council and their appointed deputies, together with a further four members each of the Royal College of General Practitioners and of the General Medical Services Committee of the B.M.A. The Council added one postgraduate dean and one clinical tutor to this number. The general-practice advisory committee is to advise the council on all aspects of its functions which concern or affect general practice in the National Health Service.

The council decided to discuss at an early meeting the composition and functions of regional postgraduate committees, together with the necessary staffing provision. Inquiries are being made in all regions and discussion has already begun on the best

methods for securing good communications between the regions and the council.

Among other matters which the council considered were the steps to be taken to ascertain the costs of postgraduate medical education at the present time to universities, to the National Health Service, and to the professional bodies. The council also considered its policy in the matter of research. It is unlikely that the council will undertake research directly itself, but its interests will cover methods of postgraduate training and education, the techniques for taking information from the centre to the periphery, and the assessment of needs, region by region, to determine the logistics of the problems of postgraduate medical education and training.

## COMING EVENTS

**Obstetric Anaesthetists Association.**—Day symposium, "Epidural Analgesia in Obstetrics," 18 March, Kingston Hospital. Details from the secretary, Department of Anaesthetics, Kingston Hospital, Kingston-upon-Thames, Surrey. (Tel. 01-546 7711, extn. 401.)

**Society of Medical Officers of Health: Research Group.**—All-day meeting, "Organization of Research," 19 March. Wellcome Building, Euston Road, London N.W.1. Fee 50p (including lunch). Details from Dr. F. W. Murphy, Health and Welfare Department, Billet Lane, Hornchurch RM11 1XL, Essex. (Tel. Hornchurch 52555.)

**"Medical Hazards of Environmental Pollution."**—Day symposium, 19 March, Middlesbrough, sponsored by Cleveland and Middlesbrough Division of B.M.A. and the Newcastle upon Tyne Regional Postgraduate Institute. Application forms and details are obtainable from the clinical tutor, Dr. J. K. Morgan, South Teesside Postgraduate Centre, West Lane Hospital, Middlesbrough, Teesside.

## SOCIETIES AND LECTURES

*For attending lectures marked \* a fee is charged or a ticket is required. Applications should be made first to the institution concerned.*

**Monday, 8 March**  
INSTITUTE OF DERMATOLOGY.—4.30 p.m., Mr. A. K. Monro: Malignant Melanoma.

**Tuesday, 9 March**  
EDINBURGH AND EAST OF SCOTLAND SOCIETY OF ANAESTHETISTS.—At Royal College of Surgeons of Edinburgh, 8 p.m., Dr. A. A. Spence: Problems and Mechanisms of Postoperative Hypoxaemia.  
ROYAL COLLEGE OF GENERAL PRACTITIONERS: SOUTH LONDON FACULTY.—At Royal Army Medical College, 8.15 p.m., Dr. G. F. Vaughan: Areas of Deficient Knowledge in Adolescence.

**Wednesday, 10 March**  
INSTITUTE OF DERMATOLOGY.—4.30 p.m., Dr. L. Szur: Radiotherapy for Malignant Skin Diseases—I.  
INSTITUTE OF DISEASES OF THE CHEST.—5 p.m., Dr. M. Honey: Diagnosis and Treatment of Acute Massive Pulmonary Embolism.  
INSTITUTE OF UROLOGY.—5 p.m., Surgeon Commander N. J. Blacklock: Prostatitis.  
OXFORD UNIVERSITY.—At Radcliffe Infirmary, 5 p.m., Dr. G. Dean: Multiple Sclerosis—a Preventable Disease.

ROYAL FREE HOSPITAL.—5.15 p.m., Dr. C. O. Carter: Genetic Counselling.  
ROYAL POSTGRADUATE MEDICAL SCHOOL.—11.45 a.m., Clinicopathological conference by Professor R. Fraser: Phaeochromocytoma; 2 p.m., Professor M. A. Epstein: Viral Oncogenesis.

### Thursday, 11 March

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—5 p.m., Hunterian lecture by Professor P. James: Surgical Treatment of Mandibular Joint Disorders.

WESTMINSTER MEDICAL SCHOOL.—At Page Street lecture theatre, 5.15 p.m., Dr. C. J. Gavey: clinicopathological conference.

### Friday, 12 March

ROYAL POSTGRADUATE MEDICAL SCHOOL.—11 a.m., Professor J. D. Hardcastle: Organ Perfusion for Studying Function; 4 p.m., Dr. J. G. G. Ledingham: Renin and Angiotensin and its relationship to Hypertension.

INSTITUTE OF LARYNGOLOGY AND OTOTOLOGY.—5.30 p.m., Mr. A. Radcliffe: Management of Chronic Maxillary Sinusitis.

NEWCASTLE UPON TYNE REGIONAL NEUROLOGICAL CENTRE.—At Newcastle General Hospital, 5.30 p.m., Dr. T. A. Lie (Holland): Congenital Malformation of Carotid and Basilar Systems.

### Sunday, 14 March

INSTITUTE OF LARYNGOLOGY AND OTOTOLOGY.—10.15 a.m., seminar for general practitioners by Mr. S. E. Birdsall.

## UNIVERSITIES AND COLLEGES

LONDON  
PH.D.—In the Faculty of Medicine: Diana M. Bailey, M. I. Berry, P. V. Chatfield.

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH  
The following have been elected Members:  
G. Sangster, H. Conway.  
Hill Pattison-Struthers Bursaries have been awarded to Dr. R. Kumar, and to Dr. V. H. L. Sundrasingham.

## H.M. FORCES

Major-General R. I. Mitchell, late R.A.M.C., has been appointed Honorary Physician to the Queen, in succession to Major-General J. A. D. Johnston, late R.A.M.C., retired.

Surgeon Commodore A. O'Connor has been appointed an Honorary Physician to the Queen, in succession to Surgeon Captain J. W. Walker.  
Appointments.—Group Captain D. O. Williams, Wing Commander F. E. S. Keiller (R.A.F. Hospital Cosford, consultants in surgery); Wing Commander M. W. Sleight (P.M. R.A.F. Hospital, Akrotiri, consultant in surgery).

### ROYAL NAVY

Surgeon Commanders J. Keeling, P. J. Preston, and W. A. N. Mackie to be Surgeon Captains.

### ARMY

Colonel J. F. D. Murphy, late R.A.M.C., to be Brigadier.  
Lieutenant-Colonel R. N. Evans, from R.A.M.C., to be Colonel.

### ROYAL AIR FORCE

Air Vice-Marshal E. S. Sidey, C.B., Q.H.S., to be Air Marshal.

Group Captains T. H. Redfern and D. C. Paley to be Air Commodores.  
Wing Commander J. D. Crowlesmith to be Group Captain.

## CORRECTION

In the article "Retinal Detachments" by Mr. J. R. Hudson (16 January, p. 155) Figs. 5, 7, 8, 10, 11, and 12 originally appeared in an article by the same author in *Operative Surgery*, Vol. 10, published by Butterworths. We regret that no acknowledgement was made of the original source.

## Notice to Authors

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