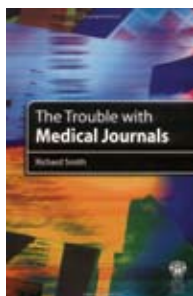


Book Reviews

The Trouble with Medical Journals.

Richard Smith. Royal Society of Medicine Press, London, September 2006. 292pp. £19.95. ISBN: 1853156736.



The only trouble with Richard Smith, for 13 years Editor of the British Medical Journal, is that he writes well but tends to repeat himself. Editors, and ex-editors, are a small group in the medical world, but we like to think we have been influential. This book is a series of stories of Richard Smith's interaction with prospective authors, medical researchers of all sorts, the authorities of the BMA and the public at large. In between these well told stories are his thoughts and concerns for the future of medical journals. After leaving the BMJ he went off to Venice, sat in a palazzo and unburdened himself of all his editorial worries.

In his own words "medical journals have many problems and need reform: over-influenced by the pharmaceutical industry, too fond of the mass media, neglectful of patients. Peer review, the process at the heart of journals and all of science is deeply flawed. The scientific community has not responded adequately to the problem of fraud. And the whole business of medical journals is corrupt because owners are making money from restricting access to important research, most of it funded by public money".

This is heady stuff, but with his racy style and continuous name dropping, any of us who have read medical journals over the years can feel at ease with his thoughts. He ranges over the broad field of medical and scientific publishing, not restricted to the BMJ. We all have our own views on the MMR vaccine crisis, or the tobacco industry, or cancer research, and he is not afraid to be outspoken about these and many other topics that interact with medical journals. He keeps coming back to the substantial profits made by the publishers, who do not have to pay the authors, nor the hapless peer reviewer, and contribute no added value to the educational process. He would like all medical knowledge to be freely distributed throughout the world. Some of it is, but the process is still complex.

The Ulster Medical Journal is well down the list in terms of impact factor, and does not envisage lawsuits or high financial deals – we even have difficulty in getting any support at all from "big pharma". But we do fulfil a purpose – local, academic, informative, and above all to provide a platform for those of us who live and practice medicine in Ulster, to say what we are doing in a formal and ethical manner. The journal is the biggest expense to the Ulster Medical Society, and cannot be said to make a profit. But I think it will go on coming through our letter boxes two, or even three times a year, in well printed paper format, with the familiar blue cover, for a long time in the future. The e-mail and the internet may facilitate urgent matters and take the place of the public

meeting and the telephone, but we still like to read. Maybe the local journal will survive when the big players succumb to globalization.

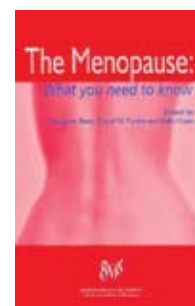
Another way of reacting to this well informed diatribe is to join the opposition, become a medical publisher, and make your fortune! Brendan Bracken, a well known pre-war politician with Irish roots and Churchillian connections had arrived in London penniless after the first world war, but managed to buy the now defunct "Practitioner" for £50,000 in 1928, which became the foundation of his financial empire, culminating in the ownership of the Financial Times and a safe seat in Westminster.

This book is a good read: you can take it lightly, in short chapters, but at the end you will be better informed as well as entertained, both as a reader and as a potential author. You may even decide to join the iconoclasts and cancel all your journal subscriptions!

David R Hadden

The Menopause : What you Need to Know.

Eds: Margaret Rees, David W Purdie & Sally Hope. Royal Society of Medicine Press, London. June 2006. 176pp. £10.95. ISBN: 1853156728.



The British Menopause Society published the 4th Edition of its excellent handbook for health professionals, Management of the Menopause in January 2006. This companion volume has been revised and updated and is aimed at "the people who actively have to face the menopause and its consequences", namely the patients. This small volume, of just over 100 pages, covers a wide range of issues relating to women's health prior to, during, and after the menopause. The information is unbiased, non promotional and up-to-date. The recent publications from numerous studies on hormone replacement use, and the reaction to these by the media, have generated confusion, if not even hysteria in both the public and some members of the medical profession. The chapter on benefits, risks and controversies goes a long way to addressing the present state of knowledge in the most simple terms. There is a useful chapter on alternative and complementary therapies, which not only discusses the advantages but also the dangers of some of the so-called and commonly used herbal remedies.

Where possible medical language has been avoided, but detailed definitions of words used by health professionals are given. So often a book of this nature is patronizing, but not this one. Doctors can not only recommend this small book, but they should be aware that women who read it will have gained a great deal of knowledge, and this will result in searching questions during a consultation. There are useful sources of information at the end of each chapter, including journal, book and website references; the latter, if sourced, may make an interview even more taxing!

William Thompson

Get Through Accident and Emergency Medicine. Amy Herlihy. Royal Society of Medicine Press, London. October 2006. 140pp. £22.50. ISBN: 1853156949



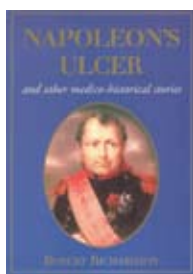
Most MRCP and MRCS Part 1 candidates would be advised to invest in a Sainsbury's shopping trolley if they decide to venture to their local university bookshop in pursuit of a relevant MCQs textbook. The shelves of these stores creak from the burden of the wide selection of texts. The unfortunate MCEM / MRCS A&E candidate will be left with growing anxiety and the knowledge that there are very few suitable MCQs textbooks. "Get Through" aims to bridge this gap and help you prepare for your exams.

The book covers a wide range of topics, from paediatrics to toxicology, and the book's strength lies in its relevance to day to day practice. The various questions address many clinical scenarios we come across on run-of-the-mill, shop-floor work. The book's stated main focus is revision for Part 1 examinations, however the MCEM part 1 syllabus is heavily based in the realms of anatomy, patho-physiology, microbiology, biochemistry, etc., with only 5 out of a possible 50 questions relating to clinical medicine. The book does try to address this imbalance with a chapter on anatomy, however MCEM candidates will probably find limited relevance to the content of their Part 1 exam.

The book is ideally suited to candidates preparing for 2nd Part exams or MRCS A&E MCQ, where there is a greater emphasis on clinical topics. It certainly would be a useful revision tool to highlight areas for further study. One area of concern that may confuse and will certainly frustrate candidates is the number of incorrect answers in the book. Hopefully this is a problem that will be addressed on further prints.

Paul D Faulkner & Ruth Spedding

Napoleon's Ulcer (and other medico-historical stories). Robert Richardson. Quiller Publishing, London. October 2006. 192pp. £14.95. ISBN: 1904057969



I was lured into reviewing this book under false pretences. All that was mentioned in the request was the most famous gastric ulcer in history – surely a gastroenterologist would be the ideal candidate to review such a book? With no more information than the first line of the title, I naively agreed. The nicely presented package arrived resplendent with a glossy cover endowed with a portrait of the great man and embossed with the headline title in bold gold lettering. Only then did the first question simmer in my sub-conscious: Why the sub-title '*and other medico-historical stories*'? The reputable book editor of this esteemed journal mentioned nothing other than gastric ulceration!

Let us begin with the ulcer, which takes up the introductory chapters of the book. I confess that I had limited knowledge of Napoleon's predicament prior to this review and I have emerged much the wiser (or at least better informed). However, not for the last time in this review process, I found myself confused. Was I reading a detective story requiring a solution? Or was it being presented as a clinical case history for medical analysis? Or was it a fantasy based on speculation? I struggled to know which role the author wanted it to fulfil. What I did enjoy in these early chapters was the information conveyed about the state of knowledge at that time regarding ulcer disease. They did not have to worry about breath tests and helicobacter pylori.

Just as I was engaging with Napoleon and finding myself speculating about whether or not he had H. pylori, Napoleon is gone. Not just dead and dissected but by page 41 of 226, his presence left this scene of time; or at the very least the pages of this book. And guess what comes next?

One turns over the page anticipating more on Napoleon or perhaps his doctor (who is to feature later), or some treatise on other famous ulcers or anything but the menopause. The *menopause*? Yet that is the non-sequitur that "sequiturs". Hence the second question I have with this book: What is its purpose? How does it hang together? What is the common thread? Where are we going? (Four questions, I know...)

But back to the story of the menopause. Here we find such useful comments from history as "woman is a pair of ovaries with a human attached" (Virchow) and Galen's view that menses were simply the natural blood-letting necessitated by overeating. Here we begin to see the virtue of the book. It is a book full of quotes and anecdotes to be used in appropriate circumstances, dropped into the conversation to impress the dinner party, thrown out in lectures to medical students to maintain interest.

If you were looking for an unusual angle on your chosen field of medical expertise, the chances are you will find it in this book. Provided of course your chosen field is one of the eclectic topics covered within it. Having said that, it is hard to envisage the use of either of the above quotations in any circumstance that would not result in a lynching of the utterer.

However the fact that Roman sailors only cut their hair during a storm and that French physiologists injected themselves with canine testicular extract in the pursuit of eternal youth must have value and interest to some discerning readers.

For an enjoyable historical read, the chapter on Larrey is the most enlightening. In this chapter a historical tale is told that engages the reader and leaves him admiring a multi-talented but flawed man. That is a good "medico-historical" chapter that fulfils the promise of the book's subtitle. However that chapter only highlights my third question: Is this book really "medico-historical" as it claims? Chapters such as those on blood have more to do with mythology than history. Other chapters on hair, death and transplantation lean towards psycho-analysis and philosophy. Mind you, I am still not sure about the castration complex and its link with hair.

I can tolerate psychology, I enjoy history and I love mythology but I keep coming back to the question now burning into my

consciousness: What is the purpose of this book? What is it trying to be?

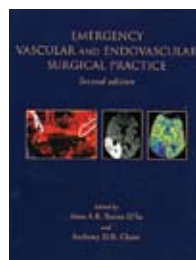
Only when we come to the last page of the book do we learn the secret. The page that solves the riddle comes after the book has ended, after the index, and at the end of a series of pages advertising books by the same author. Finally, an answer to the purpose of the book; finally a link that binds the apparently un-associated! The solution is a novel previously written by the author; a novel that spans all the epochs referred to in this tome; a novel in which the hero visits the historical characters of this book. This current book is the back-text of that novel. Perhaps next time I will be asked to review the novel.

Brian Johnston

Emergency Vascular and Endovascular Surgical Practice, 2nd Ed. Aires A.B. Barros D'Sa, Anthony D.B. Chant. Hodder Arnold, London. October 2005. 592pp. £155. ISBN: 0340810122

I congratulate Barros D'Sa and Chant in producing an excellent book which brings together the pathophysiological, administrative, therapeutic, radiological and surgical aspects involved in the management of a wide spectrum of emergency conditions, that may be encountered by all physicians with an interest in vascular and related specialties. The book is ingeniously divided into subsections, with each theme elegantly presented.

It provides some basic facts in the provision of emergency vascular services and treatment outcomes in the UK, USA and Scandinavia. It also supplies the reader with knowledge



on the pathophysiology of vascular conditions and the complications that may develop in the management of some of these conditions. The risk assessment and the medico-legal minefield involved in the management of these patients are also discussed.

The section on Acute Cerebrovascular Syndromes gives a good synopsis on acute ischaemic strokes and their management, in particular the timing and role of surgical intervention, a subject upon which many vascular surgeons are still hesitant. This section is followed by another well put together section on acute lower limb ischaemia and diabetic feet. This gives an excellent overview on surgical and endovascular options and the possible problems that may be associated with intervention. However, chapter 18, "Acute Ischaemia Secondary to Occult Prosthetic Graft Infection", is just slightly difficult to read because of the many complex algorithms. Nonetheless, it covers an arduous subject commendably. The rest of the book embraces magnificently catastrophes, injuries and emergencies of the arteries and veins in the thorax, abdomen and peripheries. It provides the reader with wealth of information on the aetiology, pathophysiology and the various medical and conventional surgical options necessary for dealing with these conditions.

I have no doubt this book will be a valuable asset in any private or institutional library. The authors have managed to put together a book on the diverse emergency vascular conditions encountered by vascular clinicians, including some rare conditions which, although not typically seen in Northern Ireland, nonetheless have presented at our doorsteps, and will no doubt challenge our capabilities and resources at some stage in our careers. This is definitely a very good reference and guide book for vascular surgeons at all levels.

Chee Soong