Amoxycillin 250 mg 8 hourly (7 subjects); flucloxacillin 250 mg 6 hourly (6 subjects); fucidic acid 250 mg 6 hourly (6 subjects); cephadrine 500 mg 6 hourly (6 subjects). Samples of SF and blood were withdrawn at 0, 30, 45, 60, 90 minutes and 2, 3, 4, 6, 8, 12, 24, 36 hours. Antibiotic concentrations were measured by quantitative bioassay. With these doses

cephadrine in SF did not consistently reach the minimum inhibitory concentration (MIC) for *Staphylococcus aureus*. The other 3 antibiotics all reached the MIC, but concentrations in SF peaked later and lower than in serum. Considerable variation in serum and SF concentrations was observed independently of the severity of inflammation.

Book reviews

Drug Treatment of the Rheumatic Diseases. By F. Dudley Hart. Pp. 201. £12.95. MTP Press: Lancaster. 1979.

This book is aimed primarily at the general practitioner to help him find his way through the many and various drugs that are available now for the treatment of arthritis in its various forms. It does, of course, have the limitations of such a book in that treatment is restricted to chemotherapy whereas the treatment of arthritis involves very much more than just drugs. The first section of the book comprises a review of clinical pharmacology of the various types of drugs, starting with general principles and then going on to review the non-steroidal anti-inflammatory drugs, followed by those that actively affect the rheumatoid disease process. There are chapters on the use and abuse of corticosteroids and the place of analgesic drugs and intra-articular and soft-tissue injections.

This general review of the drugs available is, I think, helpful and gives plenty of useful information on side effects and clinical use. In particular there is information on drug interactions, and this is a welcome point. Proper names for the drugs are used throughout which may be a little confusing to some general practitioners, who are perhaps, more familiar with the proprietary names, and I think it is a pity that both are not used. The book is clearly aimed at the American as well as the United Kingdom general practitioner, and of course the use of drugs in the treatment of arthritis varies somewhat on the 2 sides of the Atlantic. This inevitably involves some compromises.

I felt that the chapter on the use of drugs in rheumatoid arthritis was a little disappointing, as I think more could have been said about the role of penicillamine and gold and the particular problems in their use in this disease. By contrast, the chapter on gout was a little overelaborate, and some of the recommendations for the investigation of gout will, I think, be a little difficult to follow in general practice. The chapters on ankylosing spondylitis and polymyalgia rheumatica were useful. On balance, I think this book is a very helpful one to have on the shelf for ready reference for the general practitioner faced with the arthritis which forms such a large part of his practice. Particularly valuable are the lists of references and recommended reading. The book is to be recommended.

A. K. THOULD

Concise Management of the Common Rheumatic Diseases. Edited by D. N. Golding. Pp. 226. £8.50. John Wright: Bristol. 1979.

Management cannot be separated from diagnosis and investigation. The editor of this book, in recognising this has included enough about each rheumatic condition so that readers and particularly those unfamiliar with the field, can clearly understand the detailed management sections. Within a small compass he, in conjunction with other members of his own team and 2 guest authors from Israel, has succeeded admirably in his aim of describing every aspect of the care of patients as it applies to the commoner conditions, while the publishers have played their part in ensuring that it is right up to date.

Although the book is written primarily for general practitioners and junior staff new to the specialty, I would recommend it strongly to nurses and paramedical staff, and indeed some patients would gain much from reading the relevant sections. Inevitably in a specialty that still allows clinical judgment to flourish there will be areas of disagreement, but the ability to find them allows one to question one's own treatment, and that must be a good thing. Indeed, on this basis senior members of the specialty might gain the most from this book.

ALASTAIR G. MOWAT

The Radiology of Joint Disease. 2nd edn. By C. M. Forrester, J. C. Brown, and J. W. Nesson. Pp. 626. £24.25. W. B. Saunders: Eastbourne. 1979.

This is the second edition of a book which was first published in 1973. It differs from the earlier edition mainly in that a new section has been added which deals in more detail than before with the differential diagnosis of the arthritides. This section was necessary in order to draw together the rest of the book, which is laid out on an anatomical basis. Thus the first part of the book concerns changes in the hand. After a brief description of the normal, it deals with abnormalities of the soft tissues, alignment of the bones, abnormalities of mineralisation, and abnormalities of the cartilage space. The next and largest part of the book deals with 'arthritis from head to foot', dealing in turn with conditions that affect the foot and ankle, knee, hip, elbow, shoulder joint, and spine.