

Book reviews

D'Aix en Savoie à Aixilia: pour les curieux et curistes d'Aix-les-Bains. By F. FRANÇON, 1972. Pp. 130, 17 figs. Éditions Trévoux, ain, France

Many will have happy memories of the International Congress des Maladies Rhumatismales at Aix in June, 1972, where both Dr. François Françon and Dr. Jacques Forestier, doyens of French Rheumatology, played an active part. In this small book Dr. Françon presents reminiscences of his own, and of his father and grandfather, all of whom practised with conspicuous success at Aix-les-Bains, and who are now succeeded in turn by Dr. Françon's son Jean.

Dr. Françon describes vividly some of the many personalities who have visited Aix-les-Bains and have taken 'the cure', among them Balzac, Lamartine, Maupaussant, Verlaine, Queen Victoria, and Dom Pedron, the Emperor of Brazil.

Dr. Françon paints a convincing and charming picture of these celebrities and of their annual sojourn at Aix-les-Bains. He points out that these were the private patients of the past, the predecessors of those sent by the Sécurité Sociale—the French National Health Service. Today 90 per cent. of those who are treated at Aix are paid for by the State. He discusses the benefit they received from their treatment and briefly notes that taking the waters is *sans risques iatrogènes*, suggesting that 'the cure' at Aix may well be less dangerous than swallowing some of the pills that we are accustomed to prescribe for our rheumatic patients.

FRANCIS BACH

An Introduction to Clinical Rheumatology. By WILLIAM CARSON DICK. 1972. Pp. 186, 42 figs. Livingstone, Edinburgh (£1.25)

This is a paper-back type of book in size and production. The author indicates that it is based on lectures designed for undergraduate medical students, and postgraduate practitioners, and the majority of chapters, indeed, read like short talks. These are well set out and illustrated by simply drawn diagrams which are clear and easy to follow. A very wide range of topics is well covered, although at times, to simplify the subject, statements are made that are not entirely accurate or that would benefit from amplification. In particular more advice on history taking, joint examination and recording, and the diagnosis and

management of the commoner osteoarthritic and soft tissue syndromes would have been useful. The major weakness is a complete absence of references so that, although many very rare causes of joint symptoms are mentioned, it would be necessary to search elsewhere for further reading on these topics. Thus, while useful in stimulating interest and in exposing the student to the width of the subject, this book is unlikely to replace other standard works, and notably Mason and Currey's book which carries the same title.

B. M. ANSELL

The Arthritis Handbook: A Patient's Manual of Arthritis, Rheumatism and Gout. By DARRELL CRAIN. 1972. Pp. 220, 25 diagrams, 15 figs (which are also diagrams). Arlington Books, London (£2.25)

The American edition of this book, first published 13 years ago, carried the title 'Help for Ten Million'. It was reminiscent of the heretical slogan of the Jehovah's Witnesses 'Millions now living will never die', but was apparently less successful in attracting attention, so that this time a more orthodox approach has been used. The opening sentences reveal that the plant is still firmly rooted in good American soil. 'Congratulations, arthritics, on your medical ancestry. Your disease is no Johnny-come-lately in the realm of medicine.' The roots go deep into American dirt, apart from the style, in that the proprietary forms of aspirin will be unfamiliar to Common Marketeers, the value of climate is discussed in terms of U.S. geography, the dose of colchicine is nostalgically given in grains, and patients injure their fingers by catching baseballs instead of cricket balls.

The book is written for patients, who are to be advised by their doctors which parts are relevant (the dust-cover says). There are three sections, one on gout, another on the rest of the rheumatic disorders, and the third on diets, exercises, and aids. Gout commands 33 per cent. of the attention devoted to the rest of the diseases put together—a disproportion like that allotted by Lord Cohen in his lectures to us at Liverpool, which was fully justified (in our minds) by a question on it in the final examinations.

The reader is presented with a strange mixture of elementary medicine and patient instruction. And the medicine isn't so elementary—the hypothesis of rheumatoid inflammation is illustrated and discussed in terms of

complement and lysosomes, Selye's Adaptation Syndrome is described, details of the mechanism by which probenecid produces its uricosuric effect are given, an honourable mention is made of intravenous nitrogen mustard in the treatment of rheumatoid disease, and chondrocalcinosis receives its acknowledgement. It is probably true that American patients are more medically sophisticated than English medical students. But one winces to read that 'fibrositis is an inflammation in the fibrous connective tissue rather than the joints', and 'although the exact cause is not known, it seems probable that it is basically due to infection'. Many medical terms are defined in the text, including 'ankylosis', 'proliferation', 'anti-phlogistic', and (sad to say) 'neoplasm' at some length (I thought we used it to hide the truth, not that our euphemistic secrets should be divulged).

It was interesting to learn that at Georgetown they have carried out a controlled trial of drinking spa water and found that tap water is equally good. For the record let it be said that the sulphur water at Harrogate is good value at six pence a glass—its nauseating effect saves you the price of a dinner.

All in all, for my patients, I think I'll stick to the booklets produced by the Arthritis and Rheumatism Council (here anachronistically called the Empire Rheumatism Council).

V. WRIGHT

Douleurs d'origine vertébrale et traitements par manipulations. By ROBERT MAIGNE. 2nd ed., 1972. Pp. 512, 561 figs. Expansion Scientifique, Paris (Frs 106)

Dr. Maigne is one of the best known physicians specializing in manipulative treatment. The first edition of this book is well known and is available in English. So far the second edition has been published only in French. Basically this is a practical book devoted to the indications for manipulation and details of technique. It is well set out and is clearly the work of a skilled enthusiast who is a good teacher. The illustrations are excellent and helpful. Unfortunately it has the inevitable major weakness of all books of this kind that there is no true assessment of the value of the treatments described. At present there are no firmly established facts and a manual of this type can be based only on evaluation by practical experience.

DERRICK BREWERTON

La sclerodermie (Scleroderma). Edited by F. DELBARRE, Director of the W.H.O. International Reference Centre for Connective Tissue Diseases, Paris. 1972. Pp 311, 152 figs. Masson, Paris.

Scleroderma is the one connective tissue disease which is unique to the naked ape. Many millions of the rest of the animal kingdom are regularly flayed for their hides and pelts to protect the integument of their hairless though intelligent fellow creature. Surely one of those intelligent naked apes would have noticed animal scleroderma by now if it existed? Has the unique hairlessness of man nothing to do with the aetiology? Is it the lack of animal analogues which has so delayed effective research in this disease?

A student of scleroderma might be expected to ask these questions. But the symposium under this title does not pose them. Rather does it report the deliberations of a group of international authorities describing their clinical series and the various manifestations they have encountered. Yet, although mainly concerned with the clinical aspects, as a clinical description of this disease the book cannot be considered comprehensive; compare, for example, the superbly illustrated chapter on Systemic Sclerosis in Boyle and Buchanan's 'Textbook of Rheumatology'. Nor is it a comprehensive source of references—to be fair, it does not set out to be. The editor has done his job carefully, but the trouble has obviously been that only a few of the contributors had anything new to say. One notes especially G. P. Rodnan's illustration of the microcirculation in scleroderma kidney (pp. 138–139) and the demonstration by E. Housset and his colleagues that various non-specific chromosomal anomalies are more common in scleroderma than in controls. B. Duperrat's digital pulp biopsies (p. 223) and G. P. Rodnan's forearm skin punch biopsies (p. 271) offer further methods for histological, biochemical, and metabolic research. One is grateful also for F. Coste's clear and comprehensive final summing up of the proceedings.

Yet as a whole it must leave the reader dissatisfied. Is there no new message? Have all leads proved blind so far? Is the condition quite so fruitless to investigate as to treat? Have the epidemiologists nothing to teach us here?

Clearly the editor has chosen the most difficult of his topics as the subject of his first symposium, the real value of which may be in the formation of an international corresponding group of doctors and scientists interested in tackling this formidable problem.

A. ST. J. DIXON