To me no disease is more protean in its manifestations than SLE. It remains clinically one of the great challenges. This book certainly provides ready access to the vast amount of published work on the subject and therefore is invaluable to the clinician. A rheumatology department without it will certainly be the poorer.

Whipps Cross Hospital, London

J LHAM


For those revising for MB and MRCP examinations this little book of 200 picture tests is excellent value at £6.50. It also provides a quick and entertaining self assessment for those rheumatologists who do not routinely see (or do not diagnose) the broader spectrum of rheumatic diseases. Not quite all the x rays have reproduced adequately; equally, not all my wrong answers could be attributed to this cause. I was interested to note an example (perhaps the first) of the north/south divide in rheumatology, in which the stoical citizens of Leeds must endure five or more attacks of acute gout annually to qualify for allopurinol! How refreshing to find a rheumatology book which can be read from cover to cover with such enjoyment in the course of one evening.

Consultant Rheumatologist, Herts and Essex Hospital, Bishop’s Stortford

JACQUELINE CURREY


Despite the availability of more non-drug treatments in rheumatology than in most specialties, all clinical rheumatologists need an in depth understanding of therapeutics. This book is devoted entirely to the drug treatment of the rheumatic diseases. The chapters are written mainly by Drs Frank Dudley Hart and Edward C Huskisson. There are, however, contributions by other authors. Particularly noteworthy are the chapters written by Dr Barbara M Ansell on juvenile chronic arthritis and rheumatic fever, which are instructive and well referenced.

The first half of the book deals in depth with the clinical pharmacology of each individual drug used in rheumatology. The balance here is in favour of the many non-steroidal anti-inflammatory drugs available. These are discussed in 56 pages compared with 23 and 11 pages devoted to ‘slow acting drugs’ and analgesics respectively. The detail in this part of the book makes it a useful initial reference book for the clinician with a query in clinical pharmacology in relation to rheumatology.

The second half of the book clearly outlines the drug treatment of the different rheumatic diseases. The limiting factors in this section are the size of the book and the small