BOOK REVIEWS

Physiology of the Gastrointestinal Tract, 3rd ed.
Editor-in-chief, Leonard R. Johnson; associate editors, David H. Alpers, James Christiansen, Eugene D. Jacobson, John H. Walsh. Raven Press, New York, 1994, 2326 pp., $345.00.

ad astra per aspera: This, the motto of Kansas, teaches us that we achieved great things only by encountering and overcoming adversity. I felt as if I were achieving great things merely by successfully working my way through several of the chapters in this tome. Physiology of the Gastrointestinal Tract is an awe-inspiring product—as it should be, and it was a daunting experience for this clinician to browse through it but, as one of my former professors said during an introductory seminar in medicine, “If you understand all you read, you are reading the wrong books.” This is the right book! It is the right book for a library or research laboratory; it is the right book for a physiologist or an academically oriented clinician. Anyone who has an interest in a particular problem in physiology will most likely find the answer herein; it may not, however, be readily apparent. Thus, for example, if one wanted to know the recent advances made in understanding hunger and appetite control, the information is found under “gastric storage, satiety”—not an imponderable listing, but not too “user friendly” either. Certain citations are missing or given short shrift. The physiology of the gastrointestinal tract in aging is covered in just 10 pages while AIDS is not discussed at all, despite severe associated derangements in the intestinal immune system. The gastric circulation is discussed fully, but blood flow of the colon is not mentioned and intestinal blood flow is treated in only nine lines within the enteric neuropeptide chapter. Liver disease is covered only in two chapters on bile acids and the enterohepatic circulation, both by the same expert author (Alan F. Hofmann): one from the hepatobiliary perspective and one from the intestinal viewpoint. Perhaps here then is my most significant critique. While I enjoyed studying the text, and learned a great deal from each and every section that I read, I found little that was directly applicable to my everyday duties. Rather, I felt as if I were on vacation in a land that spoke a vaguely familiar language, but not one with which I grew up.

LAWRENCE BRANDT
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The Growth of Gastroenterologic Knowledge During the 20th Century. By Joseph B. Kirsner. Lea & Febiger, Philadelphia, 1994, 522 pp., $75.00.

As one approaches a book of this type and title, it might appear to be boring and anachronistic, especially in light of the rapidly paced, high-tech nature of the specialty of gastroenterology at the present time. Happily, this is not so. The book is moderately sized and reflects very nicely the devotion of the authors and their enthusiasm for the exciting and evolving knowledge in gastroenterology during the 20th century.

There are 31 chapters, each directed toward the historical background, incidence, and epidemiology and an emphasis on changes that have occurred in this aspect of the specialty during the past century. Perhaps the initial response by a reader is of the usefulness of this book as background material in case one must give a talk relating to one of the subjects covered in the book. In addition to a very nice historical review of the subject covered, there are photographs and historical anecdotes relating to the specific field or disease.

It is obviously not possible to review each contribution, but a number of highlights can be emphasized. In the section “History of Acid, Peptic Disease,” Basil Hirschowitz takes us from bismuth to Billroth to Black and back to bismuth. He provides a sharply focused review of peptic ulcer disease, including a review of the natural history and current status. Likewise, the section “Esophageal Malignancies and Premalignant Conditions” is well written and well referenced and goes through the evolution of the concept of premalignant conditions. Likewise, Dr. Kirsner, himself, describes the historical antecedent of inflammatory bowel disease including the contributions of Crohn, Bargen, and the evolution of our understanding of the diseases. It does seem, however, that the chapters, “Gastrointestinal Defenses against Injury and Inflammation” and “Immunology of the Gastrointestinal Tract,” should have been incorporated or integrated more along with the inflammatory bowel disease chapter. The chapter by Dr. Dienstag, “Viral Hepatitis,” and by Dr. Lieber, “Pathogenesis of Cirrhosis,” linked well with each other.

Chapters on important diseases and symptoms, appendicitis, diverticular disease, intestinal gas, and irritable bowel syndrome, were all well developed and
likewise provide good background particularly if one were to lecture on one of these topics.

One of the most interesting review chapters was by Dr. Starzl—"Contribution of Transplantation"—as this would certainly appear to be a subject for the immediate future and this serves as a very nice background for it.

On the other hand, the chapters on gastrointestinal endoscopy and gastrointestinal radiology appear to be somewhat dated, undoubtedly because of their rapid and continuing evolution.

Nevertheless, the text is well written, well edited, and lends itself nicely to the reading of an individual chapter at a specific time (rather than reading the book from cover to cover, unless one's curiosity is piqued). In addition to the obvious historical aspects, which are covered very nicely, one can see somewhat into the future, by persons who are expert, knowledgeable and experienced, and it will certainly be of interest to see whether the predictions come to pass.

The book seems to be particularly valuable for gastroenterologists in a teaching situation and also for internists, surgeons, and nurses who work in gastroenterology to illustrate how events of the past have led to the evolution and development of current activities and how these might lay the cornerstone for the future. For this reason, a hospital library would very likely wish to have a copy of this book as well.

RICHARD D. FARMER, MD
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Ultrasound in Gastroenterology (Clinics in Diagnostic Ultrasound). Edited by Paul A. Dubbins and A. E. A. Joseph. Churchill Livingstone, New York, 1994, Hardbound, 223 pp., $125.00.

This relatively small book is well presented. The organization is good and the imaging illustrations appear to me to be excellent, in contrast to the few histology illustrations, which are not good. There are 18 international contributors to nine chapters. Eleven of the 18 contributors are radiologists experienced in ultrasound.

The first five chapters are each written by radiologists specializing in ultrasound and are typically descriptive. The clinical correlations make up the differential diagnosis of the observations, which are extensive and well presented. The experienced clinician (and pathologist) will find fault with some of the statements made concerning clinical manifestations and presentations of disease but that would miss the more important points in the presentations. Those doing diagnostic ultrasound will, I think, find these five chapters on the cutting edge of diagnostic techniques.

The interest of the gastroenterologist lies in the last four chapters. These are written by gastroenterologists who are developing the techniques of intraluminal endoscopic ultrasonography, a topic that has captured the attention of a large number of clinicians. The presentation of this diagnostic method is, of course, descriptive but is appropriately conservative. Nevertheless, it conveys the excitement and the promise of this new diagnostic tool. Those gastroenterologists who are interested in getting into the field will profit from careful perusal of these four chapters.

The cost of the book is a bit steep but is reasonable in view of the approximately 240 figures, an expensive process. I can recommend it to those who are interested in the field and suggest that it should be in institutional medical libraries for those who simply want to learn more about gastrointestinal ultrasound.

JAMES L. ACHORD, MD
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Liver Transplantation & the Alcoholic Patient: Medical, Surgical and Psychosocial Issues. By Michael R. Lucey, Robert M. Merion, and Thomas P. Beresford. Cambridge Press, New York, 1994, 134 pp., Hardback, $49.95.

In many ways, alcoholic liver disease is the final frontier of liver transplantation. With an estimated one to two million persons having alcoholic cirrhosis in the United States and a scarcity of donor livers limiting the number of liver transplants to about 3000 annually, the potential for patients with alcoholic liver disease to overwhelm the system is substantial. Until recently, a lid was kept on the problem by the perception that results of liver transplantation in patients with alcoholic liver disease were significantly worse than those for patients with nonalcoholic liver disease. However, this conclusion has proved to be erroneous, and several centers have recently reported comparable results in carefully selected patients with alcoholic liver disease and those with nonalcoholic liver disease undergoing liver transplantation.

This monograph by Dr. Lucey and his colleagues is therefore timely. Drawing on their interest in and experience with liver transplantation in patients with alcoholic liver disease at the University of Michigan and reviewing the literature carefully and critically, they have put together an elegant summary of the state of the art. In seven concise, beautifully orga-
nized, and clearly written chapters, they explore important aspects of alcoholic liver disease as it relates to liver transplantation, including diagnostic difficulties, psychiatric assessment, medical assessment, peri-transplant management, psychiatric follow-up, and the ethics of liver transplantation in alcoholics. By focusing on the issue at hand and ignoring related but peripheral matters that can be found in standard textbooks, such as the pathophysiology of alcoholic liver disease, the authors have produced a tightly knit and practical guidebook that can be read easily in an evening and that will be of enormous use to anyone with an interest in alcoholism, liver disease, or liver transplantation.

A particular strength of this book are chapters by Dr. Beresford, a psychiatrist, on the diagnosis of alcoholism and the psychiatric assessment of alcoholic candidates for liver transplantation. With a scope that is worldly and perceptive, Dr. Beresford provides insight into the complexities and frailties of human behavior that underlie alcoholism. Sprinkling his discussion with numerous enlightening case studies and clinical vignettes, he expertly discusses the difference between alcohol abuse and alcohol dependence, positive and negative risk factors for abstinence, the value of administering a pledge to an alcoholic, difficulties in confirming abstinence, and the important distinction between denial and ambivalence in the alcoholic’s perception of his dependence. These discussions will be particularly enlightening to physicians who focus primarily on the medical aspects of alcoholic liver disease. A chapter by Dr. Lucey provides similarly perceptive insights into the medical aspects of liver transplantation in the alcoholic. He points out, for example, that, despite initial concerns, alcoholic cardiomyopathy has proven to be a less significant problem in patients undergoing liver transplantation than anticipated.

In some cases, one may quibble with the opinions expressed by the authors. For example, prophylactic variceal band ligation in patients with varices that have not bled is dismissed, perhaps too hastily, as ineffective by extrapolation of studies of prophylactic variceal sclerotherapy. Nevertheless, one must admire the forthrightness of the authors and their willingness to take a stand and defend it on virtually all relevant issues. Their recommendations are often empirical, though always reasoned. The problem, of course, is that the data base is quite limited. Even with their particular interest in alcoholic liver disease, they report on only 98 transplants in 90 alcoholics, and their principal study on assessing candidacy for liver transplantation is based on only 99 alcoholics, of whom 54 were deemed unsuitable for liver transplantation and in many cases lost to follow-up.

Still, this book is a superb introduction to a topic that is at the forefront of liver transplantation. Moreover, the issue of liver transplantation in alcoholics is likely to become more contentious with time as greater constraints are placed on health-care expenditures. Fittingly, the book concludes with a thoughtful consideration of the ethical aspects of liver transplantation in the alcoholic patient by Drs. Martin Benjamin and Jeremiah Turcotte, who point out that it is no longer justifiable to exclude alcoholics from liver transplantation in the alcoholic will require considerable more study, debate, and thought for years to come. This book is an excellent start.

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Margulis and Burhenne’s Alimentary Tract Radiology, 5th ed. Edited by Patrick C. Freeny and Giles W. Stevenson. Mosby, St. Louis, 1994, 2154 pp., Hardbound, 4605 illustrations, $350.00.

In their foreword to the 5th edition of Margulis and Burhenne’s Alimentary Tract Radiology, Drs. Alexander R. Margulis and H. Joachim Burhenne state that their philosophy in the development of their textbook has been to create a resource that will stand as the “international cutting edge final word on alimentary tract radiology.” This latest edition of the most comprehensive general textbook on radiology of the gastrointestinal system succeeds in its mission and proves itself a fitting successor to its four predecessors.

The editors of the 5th edition, Drs. Patrick C. Freeny and Giles W. Stevenson, have enlisted the assistance of 152 contributors from 11 countries in North America, Europe, and Asia. These men and women bring to their task a breadth of knowledge and experience in the field of gastrointestinal imaging that is remarkable in its scope.

The textbook consists of 2154 pages organized into two volumes with 16 major subdivisions and 112 chapters. Volume 1 presents sections on the history of alimentary tract, radiology, general anatomy and physiology, the hollow viscera, and miscellaneous disorders of the gastrointestinal tract, including infections and infestations, gastrointestinal manifestations of the acquired immunodeficiency syndrome, and the diagnosis and therapy of gastrointestinal hemorrhage. Volume 2 deals with the solid viscera, the biliary tract,
the peritoneum and retroperitoneum, the pediatric alimentary tract, interventional abdominal radiology, the acute abdomen, and abdominal trauma.

The appropriate imaging procedures for the diseases specific to each organ—including plain films, fluoroscopically guided contrast examinations, CT, MRI, ultrasonography, scintigraphy, arteriography, and endosonography—are discussed and illustrated. Among the interventional techniques that are covered are: extracorporeal shock-wave lithotripsy; endoscopic intervention in calculus disease, chronic pancreatitis, and biliary duct neoplasm; percutaneous intervention in benign and malignant biliary disease; percutaneous biopsy of abdominal masses; percutaneous abscess drainage; percutaneous fluoroscopically guided gastrostomy; and therapeutic embolization for spontaneous gastrointestinal hemorrhage and hemorrhage after trauma.

The text is supplemented with 46055 well-chosen illustrations of very good to exceptional quality. The index is 74 pages long and has detailed cross-referencing.

This excellent textbook sets the standard against which other references devoted to radiology of the entire alimentary tract must be measured. It should be in the library of all gastrointestinal radiologists, all general radiologists performing gastrointestinal procedures, and all interventional radiologists. It is highly recommended to gastroenterologists. The book is expensive, but its cost is comparable to other radiology texts of similar magnitude. Because of its expense, however, and the presumption, stated in the editors’ preface, that a major revision will be required in four or five years, residents and fellows are advised to postpone purchase of this textbook until the completion of their training.

CYNTHIA I. POWERS, MD
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Viral Infections of the Gastrointestinal Tract, 2nd ed, Revised and Expanded. Edited by Albert Z. Kapikian. Marcel Dekker, New York, 1994, 785 pp., Hardbound, $195.00.

This tenth monograph in The Infectious Disease and Therapy series details scientific advanced concerning the etiology, epidemiology, pathophysiology, molecular biology, and immunology of viral agents causing diarrheal illness. The volume combines some basic reviews, such as chapters on the pathophysiology of viral diarrhea and gastrointestinal tract immunology, with detailed exploration of more focused topics, such as rotavirus proteins. This hardbound book is handsomely illustrated in black and white with excellent quality print. There are excellent photomicrographs of gastrointestinal tract histopathology and superb electron micrographs of various viruses which, in addition to some of the protein profiles and DNA studies, are the outstanding features of this book.

As seems inevitable in books authored by multiple contributors, the chapters vary in quality and detail. Particularly praiseworthy are the chapters on the natural history of human rotavirus infections and the rotavirus proteins, the latter providing fine detail with methodical approach and the most current references in the book. The chapter on enteric adenoviruses is also very current and covered many aspects of viral molecular biology including protein profiles, restriction fragment length polymorphisms, amino acid sequence comparisons, and genetic maps. The Norwalk and Norwalk-like viruses chapter provides an excellent synthesis of the literature with references dating into 1993 and contains a notably well-presented discussion of acquired immunity to these agents. Rotavirus enthusiasts will be pleased to find at least 43% of the text devoted to this viral agent, including discussions of the natural history of human infections, viral proteins, detection assays, animal and non-group A rotaviruses, and vaccine-related issues.

The section on Jennerian approaches to vaccine development deals exclusively with rotaviruses. The chapter is well written but too brief and may surprise some readers by its failure to even mention live polio vaccines as an example and/or prototype to round out this introductory chapter. Subsequent chapters cover current rotavirus vaccines that use animal viruses as possible human vaccine candidates. These chapters were informative, particularly the more up-to-date discussion of rhesus rotavirus-based human vaccines. In addition to rotaviruses, other viruses highlighted include Norwalk agents, enteric adenoviruses, caliciviruses, toroviruses, and coronaviruses (human and animal). While interesting and one of the more clinically applicable sections of the book, the inclusion of a chapter on bacterial diarrhea in a volume dedicated to viral gastroenteritis is somewhat puzzling. Similarly, the final chapter, which deals with the treatment of (predominantly bacterial) diarrheal diseases, may strike some readers as more of an afterthought than an integral part of a text focused on viral infections of the gastrointestinal tract.

While this book has certain outstanding features, there are some shortcomings which warrant mention, most notably a paucity of references beyond 1990 in...
some chapters and the failure to recognize viral pathogens which, through gastrointestinal tract infection, cause significant disease other than diarrhea. Some readers may be disappointed to find the enteroviruses (eg, poliovirus, echovirus, coxsackievirus) simply listed in a single table with no further recognition or discussion. Hepatitis A virus is neglected altogether. Human immunodeficiency virus receives short shrift in a single paragraph discussing immunology of the gastrointestinal tract. In all fairness, these omissions likely reflect a deliberate focus on viral gastroenteritis rather than an oversight implied by the broader scope of the book's title. Perhaps a more descriptive title would be “Viral Gastroenteritis.”

The book is weighted toward animal models and should appeal to those interested in research concerning diarrheal disease caused by viral agents. Clinical applications are limited, but the volume could be a valuable reference resource for physician-scientists with a strong interest in viral molecular biology.

NANCY J. DORMAN, MD, PhD
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Atlas of Gastrointestinal Motility in Health and Disease. Edited by Marvin M. Schuster. Williams & Wilkins, Baltimore, 1993, 323 pp., Hardbound, $95.00.

This atlas is written by a panel of national and international experts in the field of gastrointestinal motility. The book is divided into two sections. The first deals with the basic physiology and the available technology to study gut motility. This section reviews thoroughly various manometric devices as well as the different tests available for the clinician to study gut motility. These include the radiopaque markers and hydrogen breath tests used for large and small bowel transit measurement, respectively. Scintigraphy, ambulatory pH monitoring, and ultrasound of the anal sphincter are also covered. The second section of the book deals with the clinical use and application of these tests in the clinical practice of gastroenterology. The effects of sleep and stress are detailed in two chapters. The final chapter in the book is devoted to the therapeutic aspects of gastrointestinal motility, including biofeedback training for fecal incontinence.

This atlas is well balanced with enough text and extensive illustrations to help the reader understand the various technological aspects of studying gut motility. The numerous photographs of actual tracings and machines as well the different schematic representations made this valuable reference quite appealing and use friendly. This is a major strength in a book that deals with several topics not frequently covered in the basic training of a gastroenterologist. Each chapter is preceded by a table of contents, which facilitates looking up a certain point. The bibliography that follows each chapter is both comprehensive and largely up to date. The size of the atlas is appealing, making it useful as a quick reference to the various tests described.

As more tests of gastrointestinal motility are moving out of the confines of research laboratories and into our daily practice of gastroenterology, clinicians will find this atlas a helpful source to understand both the technological aspects of each test and their applications. Gastroenterology fellows in training will also appreciate the wealth of diagrams and motility tracings in this atlas. Technicians working in gastrointestinal motility laboratories will find this atlas invaluable for their daily practice. Endoscopy is becoming only one of several tools made available for the clinician to tackle the complexity of gastrointestinal diseases, and this atlas is a valuable addition to the library of every gastroenterologist.

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Clinical Gastroenterology, 4th ed. Edited by Howard B. Spiro. McGraw-Hill, New York, 1993, 1235 pp., Hardbound, $141.00.

Since the first edition of Dr. Howard Spiro's, Clinical Gastroenterology, generations of physicians (today referred to as health-care workers) have learned from it the pearls and realities of gastroenterologic practice. As more editions were forthcoming, more and more pages illustrated the seemingly unsoundable depths of Dr. Spiro's erudition and fatherly advice. And now, dabit qui didit, for like the professional fundraiser's maxim, “he who has given, will give.” Once again, Dr. Spire has reached down into the charitable pockets of his experience and come up with a hearty 1200 plus pages of instinct, anecdote, and guidance, laced with a healthy dose of physiology, sophisticated diagnostics, and current nostrums—all the while, cautioning us “To mediate between the images and the patient” and “to listen to the story.” Hence, the beauty of this book. Despite Dr. Spiro's need to enlist the aid of nine colleagues to write about half of the text, it still is flavored with redux of Spiro. The book reads like the lyric of a storyteller whose main character is still the patient—with the patient's
narrative woven into a clinical tapestry rich with pearls of wisdom and edged with science.

Ten parts, 57 sections, 332 divisions, countless sub-sections (at least for this review) and 1235 pages make up the volume. It is comprehensive, including the hollow viscera as well as the solid organs, adult diseases and congenital/metabolic disorders. The book does not pretend to be encyclopedic, and thus differs from the multivolume text in gastroenterology; nor is it a reference work written in the third person singular to maintain scientific objectivity. Rather, it is to a large extent a personal approach to the practice of gastroenterologic medicine by a master—nuts and bolts with some chrome plating. Illustrations are mainly roentgenographs, with black and white pathologic specimens. Endoscopic photos are sequestered in a section inserted halfway through the volume. The latter galley is colorful and runs the gamut of common pathology seen throughout the gut. Unfortunately, almost half of the photos are oriented upside down, not diminishing their teaching value, but distracting the purist’s eye.

Reviewers are expected to criticize, for that is part of the job description. Yes, the text paper is somewhat thinner than the weight I enjoy feeling as I languish over the text; yes, I wish there were specific sections on H. pylori, so I did not have to search frenzatically in different sections to get a complete discussion of the organism; and I wish there were a softening of such absolutisms as “CMV esophagitis does not occur in an immunocompetent host” or that “mesenteric angiography is of value (in bowel infarction) only to exclude the possibility that the superior mesenteric artery needs to be bypassed or cleaned out...” These and other minor carpings notwithstanding, I accept some “dogma”—even if I believe it to be wrong—from this great educator.

At $141.00, the book is somewhat pricey, but I would pay that for the wisdom in the introduction alone. A great book for house staff, fellows, and young attending physicians who were not fortunate enough to grow up with the first three editions and those who rely too much on the data rather than on the patient’s story.

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Techniques of Patient-Oriented Research. Edited by Charles Y. C. Pak and Pierre M. Adams. Raven Press, New York, 1994, Hardbound, 205 pp., $49.50.

In a number of ways research with human subjects is more difficult than animal or basic research. If the project is well constructed, it usually takes two to five years to gather the data, perform a careful analysis, write the paper and, finally, see it in print. While molecular biology and other basic research methods have provided understanding of physiology and pathophysiologic processes, therapeutic clinical research must provide the final step in human applications. Funding for clinical research has received short shrift in recent years. In some part, this is probably related to a dearth of well-trained MD researchers. This small offering is based on seminars conducted at the University of Texas Southwestern Medical School in Dallas. Its aim is to provide the basic principles of clinical research for those interested in the field. It addresses guidelines on possible conflicts of interest, informed consent, protocol preparation, and research grant applications. Especially valuable are chapters 5 and 6, which cover various study designs and appropriate statistical approaches. These two chapters alone, comprising only 67 pages, justify the price.

This book fills a need in all advanced training programs. It is intended to provide the basic needs and, if carefully read, serves its purpose admirably. In addition, it can serve every postgraduate as a source of reference when analyzing the clinical research published by others. I recommend it highly; for $49.50 it’s a real bargain.

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The Pancreas, Biology, Pathobiology, and Disease, 2nd ed. Edited by V. L. W. Go, E. P. DiMagno, J. D. Gardner, E. Lebenthal, H. A. Reber, and G. A. Scheele. Raven Press, New York, 1993 1137 pp., $247.00.

It is a mere 15 years that the first textbook on the exocrine pancreas, by Howat and Arles, was published. Since then, numerous books, monographs, proceedings of meetings and two international journals devoted solely to the pancreas have appeared. The present book, renamed simply The Pancreas, from its former title, The Exocrine Pancreas, is clearly the most comprehensive text on the organ currently available. The addition of a chapter on endocrine—
exocrine relationships of the pancreas in the new volume has all but perfected the book, making it impressive in content and range of subjects covered as well as size. Whereas most previous texts have tended to have a clinical bent, the sections in this book relating to the biology of the gland, experimental models, and endocrine–exocrine relationships comprise 729 of the 1137 pages. These include the gross and fine developmental and comparative anatomy of the gland cell and molecular biology, gene expression of protein processing receptors, and electrophysiology of the acinar cells. Hormonal and neural control of enzyme, lithostatine, and mucous secretion are all considered in detail, while experimental procedures encompass not only animal models but the cell and molecular biology of cell injury. Current concepts of the enteroinsular axis, insulin–acinar relationships, and the endocrine changes encountered in protein insufficiency are fully explored.

The clinical sections, while more standard fare, have been revised and updated, and one would be hard pressed to find any subject of clinical pancreatology that has not been covered. One omission that may be mentioned is that it contains very little information regarding the use of endoscopic ultrasound in diagnosing pancreatic lesions, one of the rapidly growing areas in pancreatology today. Both the medical and surgical aspects of pancreatic cancer as well as endocrine tumors are fully considered, and the penultimate chapter on congenital and hereditary diseases are particularly informative as they are rarely considered in detail in more recent books on the pancreas. Needless to say, the editors have chosen authors who are household names in pancreatology with lives steeped in the biochemical or clinical aspects of the gland, and the list of contributors, of which there are 83, is as impressive as the book itself.

Despite the formidable scientific content of many chapters, the book is highly readable but has geared itself more to scientists and pancreatologists than general readership. It is just this wide net of content and expertise that makes it virtually essential in every library and in gastroenterological research and clinical departments. The quality of the text, the reproduction of the x-rays, figures, and tables are excellent, with ample bibliography and indexing. Unfortunately, as the book became heftier, so did the price, which hopefully will not compromise access to it.

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Motor Disorders of the Gastrointestinal Tract: What's New and What To Do? Edited by Robert S. Fisher, MD, and Benjamin Krevsky, MD. Academy Professional Informational Services, New York, 1993, Paperback, 247 pp., $74.95.

This book is designed as a review of the motor disorders of the gastrointestinal tract. It is divided into two sections. The first section consists of a series of chapters by an impressive collection of experts on gastrointestinal motility disorders, basic biochemistry mechanisms, and an overview of neuropeptides and pharmacology. The sequence of chapters then begins in the oropharynx and extends through to the rectum including discussion of pain management as well as psychiatric therapy for symptoms from gastrointestinal motor disorders. The second part of the book is a transcript of a series of interactive sessions. These sessions were conducted at the 1992 AGA postgraduate course on gastrointestinal motility. The data were obtained using a computerized audience interactive system. The audience response and transcription of the panel discussions are provided.

The chapters are well organized and presented in a logical sequence. They seem to follow the lecture format from the AGA postgraduate course. The first three chapters discuss motility in general along with neuroregulation. This is, by necessity, an overview of those areas and adequate supplemental readings are suggested. A brief section on pharmacology then follows. Once again, adequate references are provided for those who desire more in-depth study. The next several chapters begin at the oropharynx and proceed through the gastrointestinal tract, presenting a discussion of the motility of each area.

The second half of the book is devoted to the question and answer sections from the postgraduate course. The panel discussions are interesting, although frequently not in-depth. It would have, perhaps, been better to have the moderator summarize the comments in more of a generalized statement.

The editors and the American Gastroenterological Association should be congratulated for compiling the topics from their postgraduate course into this very useful book. It is a much more usable reference than the lecture handout guideline that was presented at the time of the course. One hopes similar efforts are forthcoming from subsequent AGA postgraduate courses. I would recommend this book to gastroenterologists seeking an overview of motility and to gastroenterological trainees to provide a core of knowledge to assist in their training to assist in their
training as well as prepare for their Board examination. The price is listed at $74.95 which is somewhat high for a 247-page paperback book but can be justified by the expertise of the individual chapter authors.

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Acute Pancreatitis: Diagnosis and Therapy. Edited by E. L. Bradley. Raven Press, New York, 1994, 294 pp., $131.50.

This excellent book is a summary of the Atlanta International Symposium, the presentations of 40 experts who assembled in Atlanta, Georgia, in the fall of 1992 to discuss acute pancreatitis and its complications. These contributors represented six medical disciplines and 15 countries. About half were pancreatic surgeons. The book is organized based on the Atlanta Classification and divided into sections, such as severe acute pancreatitis, necrotizing pancreatitis, pancreatic abscess, acute pancreatic fluid collection and pseudocysts, and mild acute pancreatitis. Each section has multiple authors. Professor Bradley has most succinctly written the last section, which is the summary.

Since each chapter is written by an international expert, there is variability in style and quality. Dogmatic and controversial opinions are evident. The majority of authors are surgeons. These merely reflect the fact that it is basically a symposium proceedings.

Many chapters are excellent. These include the chapter on the Atlanta Classification by Bradley, pathology of severe acute pancreatitis by Kloppel, and contrast-enhanced CT by Balthazar. Internists and generalists would benefit from following the concepts put forward by Barkin’s group about medical therapy of severe acute pancreatitis. The whole section on the important topic of pancreatic abscess is outstanding. In general, the figures and tables are clear and of high quality.

This is a fine monograph on an important topic. It should be of value to generalists as well as specialist in fields such as medicine, surgery, radiology, and emergency medicine—indeed all who encounter patients with acute pancreatitis. It covers all the relevant areas related to acute pancreatitis and so should be purchased by all libraries as a single authoritative reference source.

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