essential hypertension is widely accepted. The relatively late conversion of many of us to this view owes more to practicalities than to academic persuasion. Central nervous regulating mechanisms are rather less accessible than the heart, the kidney or the peripheral blood vessel. It is no coincidence that fashionable theories of hypertension have centred by turns on each of these tissues. It is for this reason that the second component of the Dickinson hypothesis, ie the attribution of a primary role to atheroma of the arteries which supply the vasomotor centre, has attracted relatively little interest. Anaesthesia, as he points out, fundamentally negates the experimental approach and we have no appropriate non-invasive tests in man. In spite of these difficulties Neurogenic hypertension concludes with no less than 46 testable predictions and feasible experiments. One is left with a persuasive case for this mechanism as a contributory factor in the progressive skewing of the blood pressure distribution curve to the right, which occurs with ageing.

A review such as this cannot convey the style of a distinguished book. Almost 1500 references are introduced into an elegant text which is both critical and at times delightfully personal. Nonsense and inconsistency in the literature are mercilessly dissected out; once the debris is removed, we are left with a constructive carefully argued case based upon an invaluable review of a difficult field. It should be read as a model of its kind.

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Patient information in medicine. Ed by Ronald D. Mann. Parthenon, Carnforth, Lancs, 1991. 199pp. £19.95.

Patient information in medicine is based on two separate symposia which appear to have been arranged in response to the forthcoming directive (1989/341/EEC) which will affect doctors and patients in the European Community. The book has twenty chapters which are preceded by a helpful introduction and followed by a discussion and a summary. There are chapters on patient information in Germany, France, Sweden and the Netherlands which I found fascinating because of the contrasts they provide. There are chapters on ethical matters, patient compliance, the patient’s rights in clinical research, and the nature of product liability.

It becomes clear that the matter of patient information as defined for this book is intertwined with that of original pack prescribing and that changes in both these fields are likely to change the responsibilities and behaviour of pharmacists, physicians and patients. It also seems likely that these changes will create as many new problems as they resolve.

Dr Mann closes his introduction with the sentence ‘If little progress is made it will be due, more than anything else, to the inertia of patients, and we should remember that we are all, at one time or another, patients—the issue is, therefore, one of importance to the whole community.’ No one is likely to argue that the subject itself is unimportant. However, the questions raised are complex and I doubt that this book is the best method of communication between experts in the field and their audience of professionals and patients, and that is a pity.

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New drugs. Ed by John Feely. BMJ, London, 1991. 430pp. £14.95.

The first six chapters of this BMJ paperback revise in digestible form the principles of pharmacokinetics, pharmacodynamics, adverse drug reactions and interactions with short sections on the elderly and children. These chapters are informative, readable and rapidly remind one of the basis underlying much of our accepted dose scheduling and monitoring in clinical practice. If one wonders for example why phenytoin dosage increments need to be small the answer is here. Subsequent chapters deal with classes of drugs, drugs used in particular diseases, and a final chapter covers poisoning.

The remit of this book is to ‘describe the most important therapeutic advances of the past decade’ and lead us into the 1990s. The first drug mentioned is sublingual glyceryl trinitrate which, while available in new formulation, can hardly be considered new. Here lies the problem of all attempts to describe what is new. One first has to describe what is old! The right balance depends on the real aims which in this edition seem to be more encompassing than just the most recent therapeutic advances. Thus nifedipine, verapamil and diltiazem are given more space than the newer calcium antagonists, nicardipine, nimodipine, amlodipine and isradipine. Generalists who may have learnt about the former group and look to this book for information on the newer agents with which they are unlikely to have had experience, would be disappointed. The same applies to most chapters, which serve well as reviews of existing therapeutics but are short of practical advice. The newer devices for delivery of aerosols in asthma are well presented and advances in therapy for chronic obstructive airway disease are interesting.

There are occasional slips, like cladronate being omitted from the drugs for hypercalcaemia in malignancy as it was not ‘commercially available’ when this edition went to press. It was available by the time of printing. Some therapeutic suggestions are questionable but not debated, like advice to prescribe misoprostol for patients with a past history of gastric ulceration who require non-steroidal anti-inflammatory drugs, and still more dubious is advice to give H2 receptor antagonists in the same circumstance. 5-HT3 inhibitors,
notably endonsetron, are not mentioned and cisapride, another newish GI drug, has been omitted.

The book is interesting to browse through. The information on many newer drugs is superficial and would not satisfy more than the mildly curious. Most of the drug groups which will be coming on stream in the next decade get a mention and the book could be a source of thumbnail sketches of otherwise unheard-of compounds. In my view this is a book for libraries with some petty cash rather than for personal collections.

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Clearing the air: a guide for action on tobacco. By Martin Raw, Patti White and Ann McNeill. BMA, London, 1991. 151pp. £6.95.

The campaign against smoking, initiated 30 years ago by the first Royal College of Physicians report on Smoking & Health, was slow to get going but is now a world-wide movement. This book tells the stories of ten successful campaigns in western countries, five of them in the UK, which could guide those who wish to join in the action themselves. The aims of such action should be: to establish the right of non-smokers to live and work in a smoke-free environment, to stop all promotion of tobacco sales, to provide help to smokers who wish to but cannot manage to stop, to raise the price of tobacco above the rate of inflation, using some tax revenue for health promotion, and to counter the evasions by the tobacco industry of restrictions which have been imposed on their advertising.

These stories provide fascinating and often amusing reading about what has been achieved and could be repeated elsewhere. One of the elements listed as essential to all campaigns, to monitor their effects on smoking habits, does not feature in most of these stories. Only the attack on oral snuff was completely successful, being confined to a single issue. The most encouraging aspect of these stories is the spirit of enthusiasm and determination which inspired them. If more people were to show this conviction and adopt the detailed methods summarised by the authors in their final chapter on ‘the next steps’, the tobacco fortress might ultimately collapse. If, as is to be hoped, more people do join in this battle, they will find an invaluable store of information and example here with a full biography of other anti-tobacco successes and a list of helpful agencies.

It would have been interesting to have included some account of the why and wherefore of the unwillingness of governments to legislate against the promotion of the lethal habit of smoking by advertisements, sponsorship and shop window displays, or to raise its cost by crippling taxation. Is this because in most western countries smoking is now uncommon among politicians so that they think the battle has already been won, or is advertising such an essential component of free enterprise that it is more important to conservatives at least, than public health? A political analysis, as a sequel to these stories, would be of great interest and might well help in future demands for legislative action against tobacco.

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