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Gut publishes original papers and reviews concerned with practice and research in the field of gastroenterology. The field is that of alimentary, hepatic, or pancreatic disease, and papers may cover the medical, surgical, radiological, or historical aspects. They may also deal with the basic sciences concerned with the alimentary tract, including experimental work. The report of a single case will be accepted only if it is of sufficient interest in relation to a wider field of research.

COMMUNICATIONS Two copies of papers and figures should be addressed to the Editor, *Gut*, BMA House, Tavistock Square, London, WC1H 9JR. Papers are accepted only on the understanding that they are not published elsewhere without previous sanction of the Editorial Committee. Manuscripts should follow the Vancouver conventions (see *Br Med J* 1979; 1: 532-5. *Gut* 1979; 20: 651-2). They should be in double-spaced typewriting on one side of the paper only. On the paper the name of the author should appear with initials (or distinguishing Christian name) only, and the name and address of the hospital or laboratory where the work was performed. A short summary should be provided at the beginning of the paper.

ACKNOWLEDGEMENT OF MANUSCRIPTS Manuscripts will not be acknowledged unless a stamped addressed postcard or international reply coupon is enclosed.

ILLUSTRATIONS *Photographs* Unmounted photographs on glossy paper should be provided. *Diagrams* These will usually be reduced to 2½ in wide. Lettering should be in either Letraset or stencil, and care should be taken that lettering and symbols are of comparable size. Illustrations should not be inserted in the text, they should be marked on the back with Figure numbers, title of paper, and name of author. All photographs, graphs, and diagrams should be referred to as Figures and should be numbered consecutively in the text in Arabic numerals. The legends for illustrations should be typed on a separate sheet. *Tables* Tables should be numbered consecutively in the text in Arabic numerals and each typed on a separate sheet.

ETHICS Ethical considerations will be taken into account in the assessment of papers (see the Medical Research Council's publications on the ethics of human experimentation, and the World Medical Association's code of ethics, known as the Declaration of Helsinki (see *Br Med J* 1964; 2: 177).

SI UNITS All measurements except blood pressure are expressed in SI units. In the text they should be followed by traditional units in parentheses. In tables and illustrations values are given only in SI units, but a conversion factor must be supplied. For general guidance on the International System of Units, and some useful conver-

sion factors, see *The SI for the Health Professions* (WHO, 1977). Such conversion is the responsibility of the author.

REFERENCES These follow the Vancouver system—that is, references numbered consecutively in the text and listed numerically with titles abbreviated in the style of *Index Medicus. Standard journal article*—(list all authors when six or less; when seven or more, list first three and add *et al.*): James A, Joyce B, Harvey T. Effect of long-term cimetidine. *Gut* 1979; 20: 123-4. NB: Accurate punctuation is essential.

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The British Society of Gastroenterology
is pleased to announce the

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The Fellowship will be awarded by the British Society of Gastroenterology for the purpose of promoting research into the aetiology, prevention and treatment of disorders of the digestive tract and the liver.

The Fellowship, donated by Smith Kline & French Laboratories Limited, Welwyn Garden City, Hertfordshire, will be given to an applicant of Senior Registrar or equivalent status in the U.K. Remuneration will be commensurate with the applicant's salary at the time of appointment. The award for full time research will be granted for one year, extendable to three years.

Further information and application forms are available from:—

Professor M. Hobsley,
British Society of Gastroenterology,
University College Hospital Medical School,
The Rayne Institute,
5 University Street, London WC1E 6JJ.
(01-387 3534)

Completed application forms should be submitted by 1 February 1980, and the successful applicant would be expected to take up the Fellowship in June 1980. TG:AD629

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Notes and activities

BSG Research Award 1979

Five-hundred word summaries of personal research work are invited by the Awards Committee who will recommend to Council the recipient of the Award for 1979. The Award consists of a medal and £100 prize. Entrants must be 40 years or less (on 31 December 1979) but need not be a member of the BSG. All (or a substantial part) of the work must have been performed in the United Kingdom or Eire. The recipient of the Award will be required to deliver a 40 minute lecture at the Plenary Session at the Spring meeting 1980. Entrants please write to Professor R. H. Dowling, Chairman, Awards Committee, The Rayne Institute, University College Hospital, 5 University Street, London, WC1E 6JJ, by 1 January 1980.

British Society of Gastroenterology Research Funds

Applications are invited for financial support for research, education and travel or equipment from the Society's research funds. For application forms and further information concerning specific guidelines, please contact the Honorary Secretary, University College Hospital, The Rayne Institute, 5 University Street, London WC1E 6JJ. Closing dates for applications: 1 February and 1 August.

Annual Oxford Course of Gastroenterology

This course will be held 6-9 January 1980. The topics to be covered are: parenteral nutrition, small intestinal bypass, some aspects of ulcerative colitis, treatment of Crohn's disease, and varieties of colitis. For further particulars, please apply to Dr. S. C. Truelove, Nuffield Department of Medicine, Radcliffe Infirmary, Oxford OX2 6HE.

Gut:

Volumes 1-6, 7-16 Swets & Zeitlinger, P.O. Box 810, 2160 SZ Lisse, The Netherlands, has available from stock volumes 1-6 of *Gut*. If sufficient interest exists volumes 7-16 will be reprinted in the near future. Please address your inquiries to the above-mentioned company.

Books

The Treatment of Obesity Edited by J. F. Munro. (Pp. 230. £12.95.) MTP Press: Lancaster. 1979.

This book is the second volume in the Current Status of Modern Therapy Series. The editor, J. F. Munro, has joined with

12 fellow experts to produce an outstanding text. The first chapter is a beautifully concise and balanced account by Garrow on 'How to treat and when to treat'; as expected, it contains many quotable lines. Then follow chapters on dietary management by MacCuish and Ford, psychopharmacology of anorexic drugs by Blundell and Burrige, their clinical use by the editor. Physical exercise is discussed by Björntorp and colleagues and Howard reviews the use of starvation and semi-starvation regimens including his own ideal very low calorie liquid diet supplying optimal amounts of protein and carbohydrate, consistent with good health and relatively few side-effects. This chapter contains an unfortunate misprint (page 152, para 2, line 7) where 'admitting' should read 'omitting'. Baddeley's chapter on surgical treatment is a *tour de force* and Stunkard and Brownell conclude with an outstanding chapter on behaviour therapy.

I enjoyed reading this well-produced and simulating book. I shall refer to it frequently.

T. R. E. PILKINGTON

Liver Disorders in Childhood A. P. Mowat. (Pp. 407. Illustrated. £18.50.) Butterworths: London. 1979.

This volume provides what Dr Mowat intends—a very comprehensive and up-to-date account of disorders of the liver and biliary system in childhood. The book is extremely well organised, containing many clear illustrations, figures, and tables. At the end of each chapter there is a helpful bibliography and list of references.

The first two chapters give a concise account of the anatomy and physiology of the liver and biliary tract and provide a sound basis for the disorders which are subsequently discussed. All the common and rare liver diseases encountered in both the developed and developing parts of the world are covered and, deservedly, Indian childhood cirrhosis is given a chapter of its own. Many important developments have been made in the investigation of hepatic structure and function in recent years and the last two chapters deal very well with the assessment and investigation of hepatic biliary disease.

This book is an important addition to the literature and provides a valuable source of information not only for the practising clinician but also for all others concerned with liver diseases in childhood. It is a must for the shelves of all paediatricians.

J. T. HARRIES

Protein-Calorie Malnutrition Edited by Robert E. Olson. (Pp. 467. Illustrated. £21.30.) Academic Press, USA. 1975.

Although this book was published in 1975 it still remains one of the few collections of advanced reviews for physicians interested in the effects of malnutrition on different organs of the body and the metabolic consequences of inadequate intakes of protein, energy, and other nutrients. During the last five years the emphasis in protein-energy malnutrition, or 'PEM' as it is now called, has switched from considering protein deficiency as the dominant cause to emphasising the importance of energy supply and its effects on protein metabolism. This aspect is considered briefly both from the metabolic and therapeutic aspects but more detailed consideration is given to the aminoacid requirements at different ages and the mechanisms of adaptation to low protein intakes. Hegstead's chapter on protein turnover would now be considered very out of date and readers would be better referring to recent reviews by Waterlow's group. The works reviewed on cellular energy metabolism and on carbohydrate and fat metabolism in PEM have changed little, however, and are well covered. Other good chapters include Alleyne's review of mineral metabolism and a summary by Edelman of his work on cell-mediated immunity in PEM. Scrimshaw also re-emphasises the large experimental and epidemiological literature demonstrating the important interactions between malnutrition and infection.

For those more interested in the clinical management of malnourished children, the Nigerian experience is set out with its finding of a higher mortality rate if children are admitted to hospital rather than being kept at home where cross-infection is less likely and frequent feeding can more readily be instituted. Even so, their mortality is still often 10% compared with recent death rates of less than 1% in the Tropical Metabolism Research Unit in Jamaica where the emphasis is on combating infection, correcting the electrolyte imbalances, and increasing food intake only gradually in order to avoid precipitating acute heart failure. The Thai system, detailed by Suskind in the book, has a 5-7% mortality.

This book is wide-ranging and specialised: it is unsuitable for medical students but a valuable book for paediatricians and those physicians wishing to broaden their view of the nutritional aspects of their patients' illnesses.

W. P. T. JAMES

Problems in Liver Diseases Edited by Charles S. Davidson. (Pp. 321. Figures. \$35.60. DM 98). Stratton Intercontinental. 1979.

The title of this book is aptly chosen; it promises to define specific problems encountered in the management of patients with liver disease, to present the current state of the art in each problem situation, and to offer guidelines for rational therapy based on scientific evidence. This excellent book does all this and far more, for the reader is soon captivated by the enthusiastic and scholarly approach of each distinguished author and finds himself intrigued by the rapid advances of the past three decades, yet bewildered by the potential for further research.

Thirty-one essays cover a wide range of topics: interpretation of the commonly measured indices of hepatic dysfunction; quantitative assessment of each aspect of hepatic functions; pathophysiology and management of the four major complications of cirrhosis; identification and treatment of haemochromatosis, alcoholic hepatitis, Reye's syndrome, and liver disease in pregnancy; succinct statements of modern knowledge on hepatocellular carcinoma, halothane hepatitis, Wilson's disease, antiviral agents in chronic hepatitis B and immunology of primary biliary cirrhosis; stimulating discussions on the use of animal models of liver disease and the hepatic removal of circulating glycoproteins.

This book was not intended to provide an all-embracing review of the literature or a complete education on diseases of the liver. Only key references are cited. It is a book which will appeal not only to hepatologists but to gastroenterologists, general physicians, postgraduate students, and research workers seeking a terse statement of modern knowledge in a rapidly advancing field.

J. M. BRAGANZA

Radiological Atlas of Biliary and Pancreatic Disease By H. Baddeley, D. J. Nolan, and P. R. Salmon. (Pp. 218. Illustrated. £18.) HM & M Publishers: Aylesbury, Bucks. 1978.

The investigation of biliary tract and pancreatic disorders has advanced enormously in the last 10 years with the advent of endoscopic retrograde cholangiopancreatography (ERCP) and percutaneous transhepatic cholangiography (PTC). Experience with these techniques has grown recently so that there are now several

radiological atlases of the normal anatomy and appearances in the diseased state. The authors, two radiologists and one endoscopist, are authorities on the subject. Their atlas contains a wide-ranging collection of radiographs of biliary and pancreatic disease, drawn mainly from their own work but also relying on illustrations from colleagues and the literature to fill important gaps. Nine chapters are devoted to the biliary tree and three to the pancreas with two sketchy introductory chapters on the clinical and radiological aspects of the subject. Some guidance is given in each section for choosing the appropriate radiological investigation for a given disorder but there is greater emphasis on the structural abnormality to be found than on the technique used to show it. Apart from ERCP and PTC the illustrations include barium radiology, other forms of cholangiography, arteriography but only four computerised tomograms. ERCP is favoured here over PTC for the more complex biliary tract disorders, a view that would not meet with widespread approval. There are several surprisingly poor reproductions of presumably good original radiographs, with lack of distinction between the hazy grey background and pale contrast or air-filled ducts. Labelling of the plates is often scanty, which is regrettable where the anatomy is confusing or the picture unclear. Most of the radiological diagnoses of pancreatic disease are unsubstantiated by case reports and, as correlations are still being established in the subject, it would have been reassuring to have more confirmation from surgery, necropsy, or other techniques. Despite these criticisms, this small and relatively inexpensive atlas can be recommended as a personal copy to gastroenterologists and radiologists alike, for it is compact and inexpensive compared with other works on the subject and the comprehensive nature of the selection of illustrations amply compensates for the few poorly reproduced or labelled ones.

A. REUBEN

Pancreatitis By Peter A. Banks. (Topics in Gastroenterology Series). (Pp. 236. Illustrated. £14.17.) Plenum Medical Book Company: New York and London. 1979. This is the first volume of a new publishing venture on Topics in Gastroenterology. In his Foreword the Senior Editor, Dr Howard M. Spiro, indicates that the series is aimed at the intelligent clinician. Written by Dr Banks of Boston, well known in

this country for his papers on the pancreas in clinical and experimental journals, the monograph provides an impressive account of his personal views and practice particularly in the management of pancreatitis. The volume is divided into two main sections: acute pancreatitis of some 173 pages and chronic pancreatitis of some 53 pages. This discrepancy in the size of the sections creates some imbalance, though it should be stated that there is an overlap in considering some of the diagnostic tests of pancreatitis which leads to a blurring of the distinction of an episode of early chronic pancreatitis from acute pancreatitis.

The physiological principles underlying pancreatitis are outlined, and discussed more fully in the chapters on the basic treatment of acute pancreatitis, both medical and surgical, as are the management of recurrent pancreatitis, protracted acute pancreatitis, and their complications, which make rewarding reading. The need for brevity leads on occasions to curtailed argument, even on occasions to the listing of various hypotheses without choice or criticism, which may prove difficult for the uninitiated to understand and absorb. This defect is mitigated by a bibliography of the current literature, largely American though few references are made to the not inconsiderable European contributions to the understanding of pancreatitis. Some familiarity and experience with pancreatitis is an essential for the full value of the book to be appreciated. One wonders how far in the monograph the constraints of brevity have added to the imbalance. To give an example, consideration of the amylase creatinine ratio comprises almost four pages, whereas ultrasonography (apart from the excellent illustrations) less than one page of text. These are minor criticisms; the book is of a handy size and will appeal to gastroenterologists who presumably are not only intelligent but also experienced.

HENRY T. HOWAT

Books received

Unexpected Complications in Medical Care (Skandia International Symposia) Edited by H. Boström and N. Ljungstedt. (Pp. 301. Sw. Kr. 125). Almqvist and Wiksell: Stockholm.

Clinical Aspects of Albumin Edited by S. H. Yap, C. L. H. Majoor, and J. H. M. van Tongaren. (Pp. 203. Illustrated. Price not quoted). Martinus Nijhoff Medical Division. 1978.

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