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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 WC1 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.

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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 in SI units, but a conversion factor must be supplied. For general guidance on the International System of Units and some useful conversion

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.

CORRECTIONS other than printer's errors may be charged to the author.

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Books

Rational Diagnosis and Treatment: An Introduction to Clinical Decision Making Second edition By Henrik R Wulff. (Pp. 209. Illustrated. £7.25.) Blackwell Scientific: Oxford. 1981.

The scope of this important book is much wider than its title suggests. As well as being an introduction to the process of medical decision making it also sets out to cover its logic (in 'new' mathematical terminology) and to provide an introduction to the ethics of investigation and treatment and the appreciation of the design and presentation of medical papers.

Dr Wulff is a gastroenterologist, and many of the examples which he quotes are drawn from the specialty. This is fitting, as it has at least its share of the problems attendant on costly technology, shaky taxonomy of disease, and the introduction of new drugs on arguable statistical evidence. Inevitably, a wide range is sometimes attained at the expense of superficiality, and I found myself wanting a fuller discussion of many of the subjects which were

touched upon and then dropped, notably the potential conflict between a narrow duty to one's patient and a broader one to those who pay or may compete for the resources used. The management of Crohn's disease, as illustrating the problems posed by a syndrome which may not be homogeneous, also deserved a less dismissive and, I thought, more sympathetic approach than it received.

Many people have been grateful to the first edition as their source of the professional self-inquiry needed to meet the criticisms of Illich or Kennedy, and the second deserves even wider recognition as the classic it is. I had had the privilege of reviewing the first edition, and renewed my pleasure in the author's humour and choice of literary allusion: it was particularly pleasing to find that my favourites, the evolution of the bill of the ibis and the disputed definition of a triple-blind trial, were still there.

PETER BALL

Notes

Endoscopy Teaching Meeting

The BSG Endoscopy Teaching Meeting 1982 will take place at the Robin Brook Centre, St. Bartholomew's Hospital, London from 22-24 April. There will be separate courses of instruction for beginner endoscopists, more experienced endoscopists, and for nurses and endoscopy assistants. Details and application forms may be obtained from The Postgraduate Secretary, The Robin Brook Centre, St. Bartholomew's Hospital, London EC1.

Correction

Nocturnal growth hormone and gonadotrophin secretion in growth retarded children with Crohn's disease by M J G Farthing, C A Campbell, J Walter-Smith, C R Edwards, L A Rees, and A N Dawson. *Gut* 1981; 22:933

We regret the printing errors in the first seven lines of the summary of this paper and print the correct lines below. A loose gummed slip to paste over the incorrect summary is also included in this issue.

SUMMARY Although impaired growth hormone secretion in response to pharmacological stimuli occurs in some growth retarded children with Crohn's disease, its relationship to past and future growth is uncertain. We have therefore determined the growth hormone and gonadotrophin response to the physiological stimulus of sleep by continuous venous sampling in five severely growth retarded children with Crohn's disease. From the complete nocturnal growth hormone and gonadotrophin profiles, the mean plasma hormone concentrations during the first five hours of sleep were determined. In three of the five patients, five hour mean growth hormone levels were