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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. A case report will be accepted only if it deals with a clinical problem which has been studied in detail and the resulting data provide material for further research. Letters dealing with matters arising from articles published in *Gut*, or with topics of general professional interest are encouraged, but the correspondence column should not be used for publication of original data.

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 written understanding, signed by all authors, that they are not published elsewhere without previous sanction of the Editorial Committee, and that all authors agree to publication in *Gut*. 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 first 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 value 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). **NB: 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 printers' errors may be charged to the author.

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previous chapter on the 'mucus-bicarbonate barrier'; in part repeat of the section on gastric circulation; and actually deals with 'cellular' aspects of 'resistance' (to acute damage by noxious chemicals) in only two paragraphs. 'Ulcer' is mentioned, in passing, four times and not in the context of the title of the chapter.

In summary the book is a reaction to recent diagnostic and therapeutic advances, and therefore to an increased interest in ulcer disease. Its defects are a reminder that our basic knowledge about the function and the diseases of the upper alimentary tract is still grossly inadequate. For those who can read between lines and beyond full stops, the book provides a satisfactory background for further study.

K G WORMSLEY

Intrahepatic calculi By K Okuda, A F Nakayam, J Wong. (Pp. 340; illustrated; £60.) New York: Alan R Liss, 1984.

This is a well produced and interesting book but is a bit of a mixture, combining areas of pathophysiology such as bile pigment metabolism and the solubility of bilirubin in bile, with chapters on sphincterotomy, chemical dissolution of stones and the like, and only seven chapters on intrahepatic stones. The associated chapters are by well known authors from Europe and the United States and are excellent, but the information they contain can be found elsewhere. The intrahepatic calculus is chiefly a phenomenon of the Far East, and so the specific chapters are therefore written by authors from Japan and Hong Kong and draw mainly on the local literature, although to read more widely it does not appear to be necessary to know Japanese!

Intrahepatic stones are fascinating and poorly understood, but this book will be of value chiefly to those with a particular interest in gall stones and who have enough money.

R P H THOMPSON

Surgery for morbid obesity Edited by John H Linner. (Pp 208; illustrated; \$67.20.) Berlin: Springer-Verlag, 1984.

This book is drawn from the experience of the Metropolitan Medical Center in Minneapolis. It has some of the defects of a multi-author book, but in general is well informed and suitably illustrated to be of considerable benefit to surgeons involved with the treatment of morbid obesity. It covers the whole field of technical surgery in some detail, and though one might quibble with some of the philosophy, it is to some extent a history of their experience and a confirmation of their views on current practice.

The text is well written, and the topics are covered in logical sequence. This is principally a book for the library, though it should also find a place in the personal collection of any surgeon involved with so-called bariatric surgery.

C G CLARK

Books received

Liver biopsy diagnoses and reports. SNOMED Codes ICD-9-CM Codes nomenclature and terminology By J Ludwig. (Pp 156; not illustrated; \$34.75) Basel, Switzerland: Karger, 1984.

Epidemiology and prevention of gallstone disease Edited by L Capocaccia, G Ricci, F Angelico, M Angelico, and AF Attili. (Pp. 240; illustrated: £29.95.) Lancaster: MTP Press Ltd, 1984.

Proceedings of the 1st international symposium on bile acids in hepatobiliary and gastrointestinal disease held at Guy's Hospital (Pp. 201; illustrated; £15.00.) Oxford: IRL Press, 1984.

4th report of the WHO expert committee on filariasis. Lymphatic filariasis (Pp. 112; illustrated; SW.Fr.20.) Switzerland: WHO, 1984.

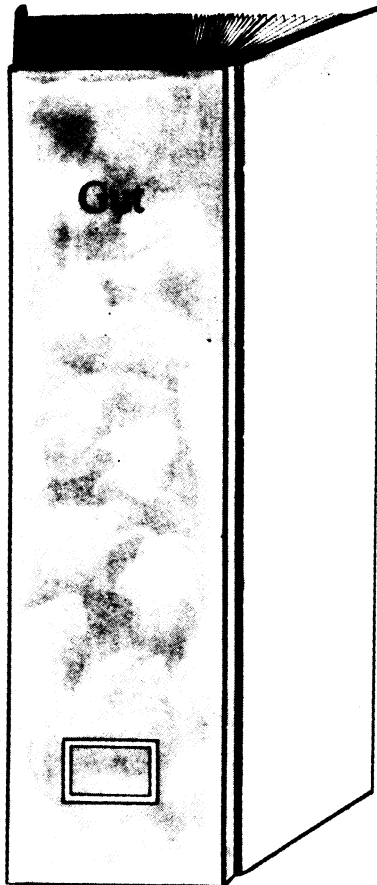
News

BSG Research Award 1985

A three page summary of personal research work is invited by the Award Committee of the British Society of Gastroenterology who will recommend to Council the recipient of the 1985 Award. A bibliography may also be submitted if desired. The Award consists of a medal and £100 prize. Entrants must be 40 years or less (on 31 December 1985) but need not be a member of the BSG. All (or a substantial part) of the work must have been performed in the UK or Eire. The recipient will be required to deliver a 40 minute lecture at the Plenary Session of the Spring meeting in 1986. Applications (six copies) should be made to: The Honorary Secretary, BSG, The Rayne Institute, 5 University Street, London WC1E 6JJ. **BY 1 DECEMBER 1985.**

Correction

Abstract F 76: D W Bullimore, *Gut* May issue. Sentence beginning 'Ten alcoholics and non-alcoholics were used in the licensing industry' should have read '... were employed in the licensing industry'.



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