

Journal of the British Society of Gastroenterology which is a registered charity

Editor: R N Allan Technical Editor: Jackie Foulds

Review Editor: Ian Forgacs Editorial Assistant: Michelle Dimler

EDITORIAL BOARD

D Adams C A Hart D Rampton R G Newcombe
M J P Arthur C J Hawkey P J Shorvon (Statistical adviser)

I S Benjamin S G Hubscher D Swallow Editor

P Bland D Kumar D G Thompson British Medical Journal

I W Booth M McMahon B J R Whittle

R Chapman H O'Connor G J Dockray P Quirke

INTERNATIONAL ADVISORY BOARD

B S Anand (USA) D Y Graham (USA) R Modigliani (France)
C Arvanitakis (Greece) J Hansky (Australia) T Muto (Japan)

G P van Berge Henegouwen

(Netherlands)

G P van Berge Henegouwen

(Netherlands)

G Paumgartner (Germany)

D Rachmilewitz (Israel)

G Bianchi-Porro (Italy)

J R Jass (New Zealand)

J Rask-Madsen (Denmark)

A L Blum (Switzerland) S-J Jiang (China) E Rene (France)
M van Blankenstein S J Konturek (Poland) A Torsoli (Italy)

(Netherlands) S K Lam (Hong Kong)
J P Delmont (France) M M Levine (USA)
J Dent (Australia) J-R Malagelada (Spain)

DYSPHAGIA RESEARCH SOCIETY

presents the

Fourth Annual Dysphagia Research Society Meeting

Ritz-Carlton, Tysons Corner McLean, Virginia USA

October 26-28, 1995

Fees (before September 26, 1995) \$295.00 Physicians and Allied Health Professionals

\$225.00 DRS Members and Faculty \$150.00 Students Fees (after September 26, 1995): \$335.00 Physicians and Allied Health Professionals

\$265.00 DRS Members and Faculty \$150.00 Students

Course Director: Clarence T. Sasaki, M.D.
Department of Surgery,
Yale School of Medicine
New Haven, Connecticut.

For information please contact: Lynne K. Tiras, CMP/Pam Roberts Meeting Managers International Meeting Managers, Inc. 4550 Post Oak Place, Suite 248 Houston, Texas 77027

Telephone 001 713 965 0566 Fax 001 713 960 0488

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH

SECOND ADVANCED COURSE IN GASTROINTESTINAL AND LIVER DISEASE

16-20 OCTOBER 1995

This course has been organised by the Education Department of the Royal College of Physicians of Edinburgh (Dean: Dr N J Douglas). It is designed for consultants, senior registrars and career registrars with a particular interest in gastrointestinal and liver diseases. The emphasis is on group interaction and plenty of time is available in the programme for discussion. The maximum number of delegates to be accepted on the course will be 40.

Subjects to be covered will include:

Oesophageal carcinoma, Gastro-oesophageal reflux, Oesophageal investigations, Dyspepsia, Helicobacter pylori, Gastrointestinal bleeding, Inflammatory bowel disease, Irritable bowel syndrome, Infectious diarrhoea, Colon cancer, Anorectal disease, Immunology, Nutrition, Epidemiology, Chronic hepatitis, Chronic cholestasis, Hepatitis C, Complications of cirrhosis, Liver transplantation and Chronic pancreatitis.

The Course Directors are Dr P W Brunt and Dr N D C Finlayson and the speakers include:

Dr G Alexander, Dr R Allan, Mr D Bartolo, Professor D Carter, Dr R Chapman, Professor M Farthing, Professor A Ferguson, Dr M Ford, Dr P Hayes, Dr R Heading, Professor R Jones, Dr N Krasner, Dr D Lebrec, Dr R Logan, Dr A MacGilchrist, Dr R O'Carroll, Dr K Palmer, Dr P Simmonds, Mr A Watson.

Details including programme and application forms are available on application to:

Miss C Devoy, Course Assistant, Second Advanced Course in Gastrointestinal and Liver Disease, Royal College of Physicians, 9 Queen Street, Edinburgh.

Telephone 0131 225 7324 Fax 0131 220 4393

131 220 4393

Approved

	PUBLIC'S RATING	DOCTORS' RATING
SCREENING FOR BREAST CANCER	2	7
HEART TRANSPLANTS	5	9
HIP REPLACEMENT FOR ELDERLY	7	5
SUPPORT FOR CARERS	6	3
HEALTH EDUCATION	8	4
CHILDHOOD IMMUNISATION	1	1
CARE OFFERED BY GPs	3	2
ARE O, MATUL ABIE	D	8

<u>Rationing in Action</u>

It is becoming increasingly obvious that there are not enough resources in the health service to do everything that is possible for all patients. Most doctors accept that some kind of priority setting or rationing of health care is inevitable. But the burning issues are: how should the available resources be distributed? — Is it, for example, more important to finance hip replacements or screening for breast cancer? Who should make these painful decisions?

How can public views be accommodated?

Rationing in Action, grown out of a conference organised by the BMJ, BMA, and King's Fund, discusses the inevitability of rationing; the challenges; what it means to patients, doctors, and managers; and possible solutions. Written by doctors, managers, politicians, economists, and philosophers, this is an important book for anyone involved in decision making in medicine.

ISBN: 0 7279 0813 8 20 October 1993 160 pages (approx) UK £10.95; Overseas £13.00; (BMA Members £9.95; £12.00)

		R FORM IC1H 9TE, medical booksellers or the BMJ bookshop in BMA House
	Please send me copy/ies of RATIONING IN ACTION	Membership No.
	Name	I enclose(Please make cheques payable to British Medical Journal) Debit my credit card
	Address	Card No
		Ехр
		Signature
4	Postcode	Please send me a BMJ PUBLISHING GROUP CATALOGUE

160 Book reviews, Note

accurate. Broelsch is somewhat dogmatic, and in places out of date (for example the death rate of 7-15% for right hepatectomy, obstructive jaundice as a contraindication to resection, and the use of a prophylactic chest drain). Unfortunately he has shunned the modern accounts of hepatic anatomy, and the use of the now widely accepted segmental numbering would have permitted more concise descriptions. He has his own nomenclature for the main hepatic veins, which could be confusing to the inexperienced reader (Cameron uses the conventional terminology), There are many ways to divide the liver, and it is not the reviewer's place to argue over the choice of method (though I have several points of disagreement). However, Broelsch chooses to describe only one method, the 'mosquito clamp and fracture', but unfortunately does not really describe or illustrate this well. Although justified by a statement in his preface, failure to describe at any point the use of the ultrasonic surgical aspirator, which is now very widely used throughout the world, is surely an important omission. There are several other important omissions: there is no account of individual segmental resections, no mention of the treatment of hydatid disease in the section on cysts, no mention of the caudate lobe in relation to cholangiocarcinoma, and unaccountably no description of the extended left hepatectomy, probably the most difficult of the hepatic resections. In contrast there is a wealth of detail on liver transplantation, on removal of the left lateral segments of the liver both for tumour and for transplantation, and on the excision of segments of inferior vena cava for tumours. This selectivity clearly reflects Broelsch's own interests and practice.

Cameron's book has many contrasts with Broelsch's. It has an altogether different look and feel, not least because of the illustrations by Leon Schlossberg. These have a somewhat 'antique' look, and follow a long tradition of such surgical illustration, but are none the less extremely rich in detail. Cameron's text is much deeper, and his introduction to each section is a concise and lucid account of the procedures and their indications. Each could stand alone as a brief, masterly summary: his short description of the indications for open or laparoscopic cholecystectomy, for example, could hardly be bettered. Similarly his discussion of alternatives within each operative procedure are sensible and balanced, and he has not avoided mentioning controversies.

As befits his own special interest, the account of resection for hilar cholangiocarcinoma is much more realistic than Broelsch's, which is somewhat simplistic. Cameron does mention the importance of resection of the caudate lobe, but unfortunately does not actually describe it in the operative account; ideally you need a combination of the two books to get a clear concept of the whole procedure.

Just as Broelsch becomes expansive on the surgery of the left lateral segment of the liver, Cameron expends many words and illustrations on the use of transhepatic tubes, on which his firmly held views are well known. There is even a detailed account of percutaneous transhepatic biliary drainage and ductal dilatation, which would not be out of place in a text on interventional radiology. Not all would agree with Cameron's dogmatism on the use of preoperative tubes, which may facilitate the procedures but are not mandatory, and in particular his recommendation for permanent transhepatic tubes for tumours takes no account of the many alternatives. including stents of various types and the use of access loops.

The books have achieved their objective in allowing master surgeons to give an account of their own work, and there is therefore much of value in each. It is hard to define the precise place of these volumes in a surgeon's library, and in many ways a combination of the two into one work with removal of some of the repetition would have produced the best result, though this would run counter to the series editor's philosophy. The books certainly repay careful reading by any surgeon with an interest in these fields.

I S BENJAMIN

NOTE

Sir Francis Avery Jones BSG Research Award 1996

Applications are invited by the Education Committee of the British Society of Gastroenterology who will recommend to Council the recipient of the 1996 Award. Applications (eighteen copies) should include:

- (1) A manuscript (2 A4 pages only) describing the work conducted.
- (2) A bibliography of relevant personal publications.
- (3) An outline of the proposed content of the lecture, including title.
- (4) A written statement confirming that all or a substantial part of the work has been personally conducted in the UK or Eire.

Entrants must be 40 years or less on 31 December 1996 but need not be a member of the BSG. The recipient will be required to deliver a 40 minute lecture at the Spring meeting of the Society in 1996. Applications (eighteen copies) should be made to: The Honorary Secretary, BSG, 3 St Andrews Place, London NW1 4LB by 1 December 1995.



Gut publishes original papers, short rapid communications, leading articles, and reviews concerned with all aspects of the scientific basis of diseases of the alimentary tract, liver, and pancreas. Case reports will only be accepted if of exceptional merit. Letters related to articles published in Gut or with topics of general professional interest are welcomed. Authors should include the names and addresses of four experts whom the authors consider suitable to peer review their work.

COMMUNICATIONS Two copies of the manuscript and figures should be addressed to the Editor, Gut, BMA House, Tavistock Square, London WC1H 9JR, UK. Manuscripts should follow the Vancouver conventions (see BMJ 1979; i: 532-5. Gut 1979; 20: 651-2). They should be in double spaced typewriting on one side of the paper only. The title page should include the name of the author with initials or distinguishing first name only, and the name and address of the hospital or laboratory where the work was performed. The paper must include a precise summary of the work of less than 200 words, which should be divided into six sections headed background, aims, patients (or subjects), methods, results, and conclusions. Keywords (maximum six) should be included. Use of abbreviation is discouraged. Short rapid communications should not be more than 10 double spaced A4 pages including references, tables, and figures. These papers will be subject to peer review in the normal way. The interval from acceptance to publication will be much shorter. A covering letter should include a request for the paper to be considered in this category with valid reasons for that request. A separate covering letter signed by all authors must state that the data have not been published elsewhere in whole or in part and that all authors agree to publication in Gut. Previous publication in abstract form must be disclosed in a footnote. Papers must not be published elsewhere without prior permission of the Editorial Committee. If requested, authors shall produce the data upon which the manuscript is based for examination by the editor.

ACKNOWLEDGEMENT OF MANUSCRIPTS Manuscripts will only be acknowledged if an addressed postcard is enclosed.

ILLUSTRATIONS *Photographs* Unmounted photographs on glossy paper should be provided. Illustrations should not be inserted in the text but marked on the back with the figure numbers, title of paper and name of author. All photographs, graphs, 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.

ETHICS Ethical aspects will be considered 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 *BMJ* 1964; ii: 177)).

si UNITS All measurements except blood pressure are expressed in SI units. In tables and illustrations values

are given in SI units. For general guidance on the International System of Units and some useful conversion factors, see *The SI for 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 journal titles abbreviated in the style of *Index Medicus, Standard journal article*. List up to six authors, then add *et al.*

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

REPRINTS Reprints will be available on payment of the necessary costs; the number of reprints required should be sent to the Publishing Manager on the form provided with the proof.

NOTICE TO ADVERTISERS All applications for advertisement space and rates should be addressed to the Advertisement Manager, *Gut*, BMA House, Tavistock Square, London WC1H 9JR.

NOTICE TO SUBSCRIBERS Gut is published monthly. The annual subscription rates are £191.00 (USA \$309.00). Reduced subscriptions of £79.00 available to trainees for one year (direct only). Orders should be sent to the Subscription Manager, Gut, BMA House, Tavistock Square, London WC1H 9JR. Orders can also be placed with any leading subscription agent or bookseller. (For the convenience of readers in the USA subscription orders, with or without payment, can be sent to: British Medical Journal, PO Box 408, Franklin, MA 02038, USA. All enquiries, however, must be addressed to the Publisher in London.) Subscribers may pay for their subscriptions by Access, Visa, or American Express by quoting on their order the credit or charge card preferred together with the appropriate personal account number and the expiry date of the card. All overseas copies of the journal are sent by accelerated surface post. If required, full air mail rates and enquiries for single copies already published should be addressed to the Publisher in London.

COPYRIGHT © 1995 Gut. This publication is copyright under the Berne Convention and the International Copyright Convention. All rights reserved. Apart from any relaxations permitted under national copyright laws, no part of the publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means without the prior permission of the copyright owners. Permission is not, however, required to copy abstracts of papers or articles on condition that a full reference to the source is shown. Multiple copying of the contents of the publication without permission is always illegal.

Second class postage paid, Rahway NJ. Postmaster: send address changes to: *Gut*, c/o Mercury Airfreight International Ltd Inc, 2323 Randolph Avenue, Avenel, NJ 07001, USA. ISSN 0017-5749.

Published by British Medical Association, Tavistock Square, London WC1H 9JR. Typeset by Bedford Typesetters Ltd Printed by Stott Brothers Ltd, Halifax