MEDICAL PRACTICE

Autumn Books

Longevity's legacy

P J SLEIGHT

Plans to enjoy a leisurely late Devon summer were affected not only by the weather. The arrival of a book to review that weighed 2.7 kg, was 1300 pages long, and had 72 contributors effectively sabotaged many an evening's windsurfing. My problems were compounded by the need to compare this major work with the third edition of the *Textbook of Geriatric Medicine and Gerontology*, edited by J C Brocklehurst (2.8 kg, 1100 pages, and 61 contributors)—until now the standard textbook on geriatric medicine in Britain.

Much of the *Principles and Practice of Geriatric Medicine*, edited by Professor Pathy, from the University of Wales, is devoted to describing clinical problems in the elderly, and these are dealt with system by system. Each chapter begins with an account of how aging affects the organ concerned and goes on to discuss the relevant pathological disorders. One disadvantage of this approach is that it neglects the fact that elderly people often present with multiple problems and that the clinical picture may be non-specific, crossing the boundaries between systems.

The difficulty of diagnosing disease in the elderly is illustrated by the approach advocated by B H Davies in the chapter on the respiratory system where he states, "An effective approach to acute respiratory disease is to base a differential diagnosis on the chest radiograph and relate the clinical history, signs, and other tests to this illness, and so produce a diagnosis." I thought chest physicians did this all the time, but I am not sure this approach would win the approval of the censors of the royal colleges.

Early chapters give an overview of old age and the process of aging. There are reviews on the biological, physiological, psychological, and pharmacological changes that occur with advancing age, and sexual aspects of aging are not forgotten. A clear article on the social and community aspects of aging, by J A Muir Gray, dispels many received wisdoms: the increasing number of old people is not a result of the medical profession "keeping all these old people alive," but of the increased expectation of life at younger ages; there is no evidence that the modern family in Britain cares less for its elderly members than it did in the past; for most people retirement is beneficial to health.

The chapter on sleep and its disorders, by R Spiegel and A Accona, gives a clear account of what questions should be asked and investigations considered before a doctor prescribes a hypnotic. It is

interesting that complaints of disturbed sleep are commoner in elderly women whereas, according to polygraphic criteria, it is elderly men whose sleep patterns show most deterioration. The chapter on falls, by P W Overstall, is excellent but I would have liked to have seen further articles on how to investigate and manage patients presenting with similarly difficult and vague symptoms such as immobility, giddiness, and failure to thrive. Other chapters cover preventive aspects of geriatric medicine, anaesthesia and surgery, rehabilitation, cancer in the elderly, and management of the dying patient.

The section on delivery of health care deals with the US, Japan, and the Third World as well as Britain, and presumably this will add to the international appeal of the book. Comparative statistics show that in Britain the population over the age of 70 is set to rise by 9% between 1980 and 2000, in the US it will rise by 38%, and in Brazil by an amazing 138%.

Nine of the contributors to this new geriatric volume wrote

articles in "Brocklehurst" (*Textbook of Geriatric Medicine and Gerontology*) and of these, five wrote on exactly the same topic. I am not sure that such parochialism is healthy—it might have been advantageous to choose different authors—still, it does avoid controversy. For example, on the management of back pain in osteoporosis Courpon and Drugnet in the *Principles and Practice of Geriatric Medicine* state, "An acute vertebral compression fracture requires complete bed rest until the acute pain subsides. After this period a corset is fitted to the patient." Exton-Smith in the *Textbook of Geriatric Medicine and Gerontology* says, "It is important to avoid immobilisation, except in occasional cases, during the acute phases. Spinal supports, which few elderly patients tolerate, have little place in treatment." Well, you pay your money and take your choice, and here I should mention that "Brocklehurst" costs £70, and "Pathy" a mere £62.50.

The text of the *Principles and Practice of Geriatric Medicine* is well laid out and most of the chapters are extremely readable, though I must confess to getting into a bit of a neurofibrillary tangle with the article on the psychology of aging. The clinical chapters are comprehensive and well referenced, though the mechanics of production of a book like this mean that very few references are after 1983. There are a few printing errors but not enough to cause annoyance. It is hard to find a topic that is not adequately covered, though much more could have been said about the workings of geriatric day hospitals for this is an important topic, not least because of the amount of health authority money that goes into their creation. The publishers, together with Professor Pathy, obviously feel there is room for another massive account of the medicine of old age and I think that they are right. I suspect this book will become an essential reference guide to all who are concerned with the maintenance of health, and the management of ill health, in the elderly.

Principles and Practice of Geriatric Medicine. Ed M S J Pathy. (Pp 1336; figs; index; £62.50.) John Wiley and Sons. 1985. ISBN 0-471-10346-2.

The aim of this new series, according to its editor, Dr John Wedgwood, is to keep readers abreast of developments in geriatric medicine, and these two books are the first from the stable.

Acute Geriatric Medicine discusses seven common conditions affecting the elderly: pneumonia, cardiac failure, stroke, electrolyte disturbances, hypothermia, thyroid disease, and confusion. The reviews are all well written, though the same information could be found in either of the large standard textbooks mentioned above. Furthermore, a large section of acute geriatric medicine is left uncovered. Professor Lye contributes two articles: a particularly clear account of the use of drugs in cardiac failure and a chapter on preventing electrolyte problems in acute illness—which appears to be a shorter version of his account of the "milieu interieur" in "Brocklehurst." Many of the pharmacological points made in the first article are repeated in the second, and I think that in a 136 page book costing nearly £30.00 there is little room for such duplication.

Fits, Faints and Falls in Old Age is comprehensive. An initial description of the normal walking pattern progresses to an account of the mechanical reasons for falling. Dr P W Overstall, who wrote on falls in "Pathy," contributes a chapter on the epidemiology and pathophysiology of falls, restating some interesting facts: of old persons who fall and injure themselves sufficiently to need medical attention, 17-25% are dead within a year of the fall. In only a few cases is death related to the accident. Active rehabilitation in hospital is associated with a high risk of falling. Low nursing staff levels are associated with a low "fall rate" because of reduced patient activity. Further chapters deal with clinical aspects of falling, rehabilitation of patients who fall, and analysis of the patterns of gait. The chapter on community and hospital services reviews the organisation of care of the elderly in Britain. The final article discusses injuries caused by the falls and liaison with the orthopaedic department and repeats a lot of what has already been written.

Despite the editor's attempts to avoid duplication in this volume the amount of overlap among chapters is large. It may have been a

topic more suited to a single author than a multiauthor approach. The publishers hope that the book will "easily find a place in the individual libraries of the team," but I am not sure who will fork out half the cost of a new Pathy for such a small book.

Modern Geriatrics Series. "Acute Geriatric Medicine." Ed M Lye. Series editor J Wedgwood. (Pp 150; figs; £29.95.) MTP Press. 1985. ISBN 0-85200-801-5.

Modern Geriatrics Series. "Fits, Faints and Falls in Old Age." Ed M S Kataria. Series editor J Wedgwood. (Pp 150; figs; £29.95.) MTP Press. 1985. ISBN 0-85200-802-3.

Freud at his desk in London, where he arrived from Vienna in June 1938. From *Sigmund Freud: his life in pictures and words*, recently reprinted by Penguin Books (£9.95)—which is also publishing in 15 volumes the first full paperback edition of Freud's works in English. Also to have appeared in paperback is Professor Michael Shepherd's *Sherlock Holmes and the Case of Dr Freud* (Tavistock Publications, London, £2.95), based on his 1984 Squibb History of Psychiatry lecture. Both men, as Shepherd points out, grounded their work on strikingly similar sets of assumptions and presented the world with strikingly similar sets of mysterious accounts: the very names of Freud's memorable patients (The Wolf Man, the Rat Man, Anna O, and Little Hans) conjure up Sherlockian overtones. Moreover, the drug cocaine figures prominently in the careers of both men, as does an indebtedness to the work of the Italian physician Giovanni Morelli—who showed how a painter's work could be identified by his depiction of hands, ear lobes, or drapery.