High Velocity Missile Wounds By MS Owen-Smith (pp 179; £12.75) London: Edward Arnold, 1981.

Professor Owen-Smith's book on high velocity missile wounds is a short book which is extremely readable, providing the reader with an account of the historical aspects of pathophysiology and treatment of missile wounds. Lord Marlow in his Foreword points to the importance of such knowledge to all those dealing with casualties because of the increase in "peace time" violence as a result of such injuries. Despite all the recent literature on such wounds, it is still fairly common to find medical colleagues who imagine that a missile wound has the same characteristics as a knife wound or a depressed fracture, and this book will quickly disabuse the reader of such errors.

There is an excellent historical section and this is followed by three sections, one on the mechanism of injury, a second on the principles of treatment and the third section on a brief synopsis on the management of injuries to specific areas. There are good diagrams and illustrations. The section on the mechanism of injury explains, with great clarity, wound ballistics and the mechanisms of injury: the effects of explosion are also well described. In the section on the principles of treatment, primary care of the wounded appears to be a précis of the instructions for Casualty Clearing Stations, much of the advice pertaining to "field" conditions. The general first aid principles are adequately covered apart from one typographical error in the use of blood transfusion in the first ten minutes after injury. The problem of mass casualties is covered, perhaps, too briefly and some more up-to-date references with regard to the evaluation of the injured from the American literature would be helpful. In the third section on regional injuries, injuries of the trunk and limbs receive more attention than the rest of the body, understandably from a general surgical point of view, and also from the likely site of injury from a bullet. The more specialised areas such as eyes, ears, brain, spinal cord, are dealt with very briefly.

For whom is the book written? Professor Owen-Smith feels that all medical personnel, particularly surgeons in training, should have a knowledge of high velocity missile wounds and blast in-

juries and this book will certainly act as a primer in this topic and dispel some of the myths around their treatment held by the medical profession. It will not be enough, however, for the definitive treatment of any such injury. Such detailed instructions would have required a considerably larger volume, multiple authors, and would be considerably more expensive and consequently less widely read.

H ALAN CROCKARD

Management of Acute Head Injuries By R Hayward (pp 100; £4.80) Oxford: Blackwell Scientific Publications, 1980. The time was right for a new, simple guide for use by the orthopaedic and general surgical registrars who are responsible for the management of so many head injured patients. This book aims to fill this gap and contains much sensible advice for the non-neurological specialist. All sections contain sound guidance about the practical details of management. The author is good at describing what to look for, how to look and what to do about the findings but is less convincing when explaining why things should be done. Indeed, the book as a whole makes more sense than its parts, because the arrangement of subjects means that cross-reference, both forward and backward, is frequently necessary. The chapters on assessment, prediction, treatment and observation precede the account of the complications of injury, even though the early detection and treatment of the latter is the key to management. Cerebral oedema is made to seem to be the root of many of the evils after head injury, despite our ignorance about its real frequency and about its importance. Recent work has vindicated the author's commendable caution about the use of steroids and this might have been extended to the use of mannitol and glycerol. There is appropriate guidance about limitations of investigations such as CT scanning and ICP monitoring, as well as an emphasis upon their undoubted value. The author includes a classification of head injuries based upon four grades of severity. His system would be difficult to apply in practice because it does not incorporate some common patterns of injury; fortunately, little use is made of the system in subsequent sections. From a surgical aspect, the distinction between closed and com-

pound depressed fractures of the skull is not made sufficiently clear. It would also have been appropriate to draw attention to the relative infrequency of extradural haematomas as compared with intradural lesions because operation for the latter is certainly beyond the capabilities of the surgeons for whom the book is intended. In future, many of these doctors will be carrying Mr Hayward's book in their pockets when dealing with all sorts of head injured patients. I predict that neurosurgeons will find that this will do no harm and that if the practical advice it contains is heeded, the effect will usually be to improve a patient's management. If some of the concepts it conveys provoke constructive dialogue between neurosurgeons and primary surgeons, this can only be beneficial, as the author rightly points out.

GRAHAM TEASDALE

Psychological Medicine: An Introduction to Psychiatry, 9th ed, by Desmond Curran, Maurice Partridge, Peter Storey (pp 437; £8.50) Edinburgh: Churchill Livingstone, 1980.

This is the ninth edition of Psychologica Medicine; the first was published in 1943. In the intervening years psychiatry has emerged from the dark ages, although it would take a bold man to complete the historical analogy in terms of its present exact whereabouts. The latest version contains a number of improvements, most notably a chapter on psychogeriatrics (though at nine pages this would bear considerable expansion), an updated section on the aetiology of schizophrenia, and an expanded chapter on the psychotherapies. Inevitably, perhaps, in a book that has been revised so many times, the seams are apt to show. Some pages gleam with recently acquired information; others have a distinctly hand-me-down quality. A detailed description of Kretschmer's body types, complete with cartoon illustrations, can be found in one chapter; in another, the complexities of neurotransmitter theory. Present day medical students could probably do with more of the latter.

These quibbles aside the book remains a model of no-nonsense British eclecticism: down to earth and pragmatic are the adjectives which most immediately come to mind. However, it may be criticised in terms of both scope and cost. There is no section on child psychiatry and in this it compares unfavourably with most of its