handouts are said to be of value in counselling—examples would have been helpful. The chapter on disinfection considers HIV only and does not discuss organisms such as atypical mycobacteria. Despite my criticisms I am sure that many physicians will find this a helpful short therapeutic reference book to aid them while they obtain personal experience. There is much useful information, which I hope will be restructured in the next edition.—NJ

Annual Review of Pulmonary and Critical Care Medicine 88/89. RA Matthay, MA Matthay, HP Wiedemann. (Pp 201; £39·50.) Hanley and Belfus, 1988. ISBN 0-932883-15-X.

The aim of this series is to produce a concise and analytical review of recent pulmonary and critical care publications. Each chapter contains a critical analysis of a few studies selected from recent publications. Most of the chapters address topics in clinical respiratory medicine, but there are additional chapters on diagnostic imaging, respiratory physiology, and cardiorespiratory aspects of intensive care. A chapter on heart-lung and lung transplantation appears in this volume for the first time in the series. The data from the studies reviewed are presented well, including the relevant tables and figures, and are followed by a brief analysis of the study and discussion of its significance by North American authors. Most of the studies selected have been published within the last two years, and careful restriction of the analysis to important studies has enabled the editors to succeed in their aim of producing an up to date and concise review. This is an eminently readable book that will be of most value to the respiratory physician who wishes to keep abreast of developments outside his own particular sphere of interest.—WK

Computing for Clinicians. T Chard. (Pp 136; £18.) London: IOP Publishing, 1988. ISBN 0-9512981-0-0.

Like it or not, computers appear to be destined to play an increasing part in the clinician's life style. Their use initially within the National Health Service was to carry out repetitive tasks at an administrative level (for example, salaries, pharmacy). Individual enthusiasts then developed programs for their own units, usually in the more service oriented departments of medicine (such as lung function and biochemistry). After the Griffiths and Korner reports the need to collect more clinical information was recognised. This information may, however, be inaccurate if left to non-medical personnel, as shown by previous analyses of, for example, Hospital Activity Analysis codes. To safeguard the accuracy of this information therefore clinicians need to take part in the planning of how this information is collected. It is clearly important that clinicians, like others, have a thorough understanding of the methods by which the data are collected and analysed. A good introduction to these methods is provided by Professor Chard's small paperback, whose main aim is to present the principles of medical computer application. The book addresses the broad concept of the use of computers for clinical data collection, diagnosis, and treatment. Other chapters cover the value of computing in medical equipment and in medical education. Each chapter is well referenced (up to 1987), to allow interested readers to delve deeper into whatever aspects particularly interest them. Readers hoping to come away with detailed information on useful software for their own units will be disappointed. The book is well written, easy to read, and nicely presented. The approach assumes no prior knowledge of computing and only rarely resorts to complicated mathematical equations. As such I found it a good introduction to the language of medical computing.—CRKH

The Role of Platelet Activating Factor in Immune Disorders. P Braquet. (Pp 213; £90.) Basel: Karger, 1988. ISBN 3-8055-4744-7.

This volume consists of the proceedings of the 1987 Paris meeting on platelet activating factor (PAF) and the immune system. It described the in vivo relation between PAF and immune disorders and emphasises the therapeutic potential for PAF antagonists. The chapters vary considerably in scope but provide good background reading on the subject of PAF. The chapters are concise and easy to read. They range from excellent reviews to specific descriptions dealing with specialised topics. There is, inevitably, a lot of repetition in the introductions to all chapters. A minor problem with this volume relates to the numbering of the chapters, which are referred to by numbers in the preface but are not numbered in the text. In general, this is an interesting review of the subject and can be recommended.—TL

Anaesthesia for Thoracic Procedures. Marxhall, Longnecker, Fairley. (Pp 632; £74·50.) Oxford: Blackwell, 1988. ISBN 0-86542-043-2.

This comprehensive multiauthor volume is a welcome addition to the few texts on thoracic anaesthesia. It has a good theoretical base, with extensive chapters on the functional anatomy of the respiratory system, pulmonary physiology, pulmonary blood flow, and oxygenation. After an interesting chapter on historical developments in thoracic anaesthesia there is a detailed account of the evaluation of lung function, including sections on preoperative evaluation, tests of split pulmonary function, and radionucleotide imaging. This section also specifically addresses the effects of thoracotomy, lobectomy, and pneumonectomy. This is followed by an excellent chapter on assessing disease of the chest wall and mediastinum. One of the highlights of this book is the chapter on endoscopy, which includes an extensive section on local anaesthetic techniques for bronchoscopy as well as a section on the use of jet ventilation and lasers. Besides some fairly traditional chapters on anaesthesia for pulmonary surgery, oesophageal surgery, and mediastinal surgery there are three chapters devoted to the more specialised areas of tracheal resection, thoracic trauma, and heart-lung transplantation. The final 90 pages are given over to the immediate postoperative management of patients undergoing thoracic