

surgery, including chapters on complications of thoracotomy and acute respiratory failure. For a specialised text on thoracic anaesthesia, however, a major criticism in my view is that no less than one fifth of the book (120 pages) is taken up with five somewhat irrelevant chapters on pharmacology, coincident medical conditions, psychological preparation, developing a plan for anaesthesia, and control of infection, none of which has a particular bearing on thoracic anaesthesia. Such chapters, which are really better suited to basic texts on general anaesthesia, could usefully be omitted in future editions. Furthermore, there is no section on paediatric thoracic problems, which is a pity. Otherwise, this is a well written book, with many tables, high quality photomicrographs, and good diagrams. Indeed, the exploded diagram showing the position and shape of all the bronchopulmonary segments (page 21) is quite the best I have seen.—RWDN

Clinical Exercise Testing. 3rd ed. Norman L Jones. (Pp 325; £24.95.) Philadelphia: Saunders, 1988. ISBN 0-03-011838-7.

This is the third edition of the important monograph first published in 1975. The text has not been extensively revised but now includes additional, well referenced comments from Professor Jones on the implications of more recent research in clinical exercise physiology. The early chapters clearly outline the basic physiology of exercise followed by clinical testing, divided for convenience into four stages in order of increasingly invasive methodology. Large numbers of examples with useful interpretations are provided plus an extensive appendix which not only gives helpful information on methods but also shows the calculation of key formulae and prediction equations from the normal population. Professor Jones deals in depth with the difficulty in applying prediction equations to individual patients because of the complexity of the interrelationships between the large number of variables that may influence exercise performance. In view of the author's own estimate that over 90% of clinical problems can be satisfactorily explained by the stage 1 test, the original chapters on stages 2, 3, and 4 could have been shortened in the current edition and less prominence given to Barcroft's 4 quadrant analysis of the linkage between mechanisms, which is of less practical relevance to modern exercise testing than originally envisaged, although still a useful teaching aid. Despite two other recent excellent publications—*Physiology and Clinical Applications* (vol 5 (1) of *Clinics in Chest Medicine*, 1984) and *Principles of Exercise Testing and Interpretation* by Wasserman *et al*, 1987—this volume is no less essential reading than at the time of its original edition for those interested in clinical exercise evaluation. Apart from factual data Professor Jones has managed to incorporate a personal flavour—for example in his discussion of the assessment of exercise related symptoms and other talking points which are very familiar to those of us currently working in this area of research. For this reason the book is highly recommended to those respiratory physicians wishing to increase their understanding of exercise physiology.—CJC

Notices

Fleischner Society Symposium on Chest Disease

The Fleischner Society symposium on chest disease will take place on 28–30 April 1989 at the Grand Hyatt New York, New York City. The George Simon memorial fellowship award is presented annually by the Fleischner Society for the best original work relating to radiological or other imaging of the respiratory system. The winning author will receive a cash prize and an all expenses paid trip to the Fleischner Society meeting and course to present the award paper. Further details of the meeting and the award may be obtained from Nomi Feldman, conference coordinator, 3770 Tansy Street, San Diego, California 92121, USA.

Scandinavian Association for ECMO/ECLS

The Scandinavian Association for ECMO/ECLS (extracorporeal membrane oxygenation/life support) will hold the third SAFE congress on 25–27 May 1989 in Göteborg, Sweden. The topic will be clinical and experimental extracorporeal membrane oxygenation or extracorporeal life support and research in long time perfusion. Details from the SAFE Secretariat, Paediatric Surgical Clinic, Östra Sjukhuset, S-416 85 Göteborg, Sweden.

International meeting on pulmonary mechanics and chest physiotherapy

The third international meeting on pulmonary mechanics and chest physiotherapy, which will take place in Brussels, on 27 May 1989, will have as its theme chest physiotherapy in acute and chronic obstructive lung disease. Details from Mrs A Terlinck, Clinique de Pneumologie, Hôpital Universitaire Saint-Pierre, rue Haute 322, 1000 Bruxelles, Belgium.

Correction

Increased muscle enzyme activity and yoga breathing during an exacerbation of asthma

In the paper by FM Tamarin *et al* (Sept 1988; 43:731–2) in the second paragraph on p 732, penultimate line, ‘“ml” ’ should be followed by ref 1 (which should be deleted from line 13), and the first author of ref 5 should be Joseph S.