guidance on examination, range of diagnoses, investigation, and management required. The authors also point out likely missed or wrong diagnoses and possible errors in management. I particularly liked the section on elbow injuries—which can be difficult to identify anatomically.

The book is, inevitably, considerably weaker in areas where the authors have less direct expertise. The chapters on epidemiology and accident prevention, although giving a rounded approach, add little that did not seem self evident; perhaps I like to keep the numbers up! The chapter on medicolegal reports is very sketchy, for what is a whole subject in itself, and concentrates on child abuse reports. Since this is written for junior doctors, I would have liked to see a short paragraph on those instances where a doctor should decline to provide a report—especially to coroners and the police. Presently somewhat obese, the loss of the 71 pages that these chapters occupy would lead to a book that fits in the pocket of that new white coat, and thus make it much more likely to be carried by my SHOs.

In conclusion, this is an extremely readable, concise, and informative volume, strongest on the diagnosis and management of soft tissue and bony injury. Because the authors have tried to make it appeal to a very wide selection of medical specialties I feel that some of the

chapters detract from the central aim. Despite that, it is still be a very useful reference—and one with no obvious rivals—to have available for junior doctors in either general or paediatric A&E departments.

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Cambridge Textbook of Accident and Emergency Medicine.

Edited by David Skinner, Andrew Swain, Rodney Peyton, and Colin Robertson. (Pp 1271; £120.00.) Cambridge: Cambridge University Press, 1997. ISBN 0 521 43379 7 One of the potential problems with large textbooks is that they take so long to compile, and the information becomes out of date almost before the book reaches the printers. It is a great pleasure, therefore, to find that the *Cambridge Textbook of Accident and Emergency Medicine*, certainly a major work at 1271 pages, is very much up to date in its content. The scope of accident and emergency medicine, often poorly understood by colleagues in other specialties, is well defined by this book.

No book can be perfect, but my criticisms will be brief. On a technical note, the paper is somewhat thin and text, diagrams, and photographs can be seen through the pages, a feature which is particularly irritating in the

radiology and emergency imaging section. This is a great pity, since the quality of the graphics in this section is otherwise excellent.

It could be claimed that many sections are “written by experts,” but there are certain pitfalls in this. For example, the sections dealing with orthopaedic injuries are strong on classification and later management, but weak in their coverage of immediate assessment and modern methods of splintage and immobilisation. The chapter covering major incidents contains a good review of past disasters, but is relatively weak on background information, with old references and no discussion of national sources of guidance.

To come on to the positive features, this book certainly reflects the present state of the art in accident and emergency medicine. Discussions of high science, with few exceptions, keep practical applications in view. Discussions of patient management emphasise clinical methods rather than highly sophisticated investigations (which may not be accessible to all departments) and give a true reflection of British practice.

In view of rapid developments within specialty, the editors and contributors will be condemned to an endless cycle of updating for new editions, but the freshness of this first edition is a good boost.

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