

ion. Dr. Papaspyros is a very unusual person combining an unquenchable interest in clinical diabetes simultaneously with a great appreciation for the history of medicine. This volume demonstrates clearly that he has that unusual combination of discipline that allows him more than a single field of knowledge. He demonstrates most clearly what Wilder Penfield has called a Second Career.

The amount of labor and endless search that has gone into this publication can be appreciated only by one who has undertaken a similar endeavor. This edition brings up to date many of the interesting historical items concerning the development of some of the newer agents in the treatment of diabetes.

The format, paper stock and printing are of very first class but despite these admirable qualities this reviewer would be derelict in his responsibility if he did not point out that there are far too many spelling errors and this volume deserves a much more critical editing. It will be used for a long time as an excellent reference book by medical students, physicians, and other interested individuals and it can be recommended most highly for this reason.

MANUAL OF CLINICAL NUTRITION. By Robert S. Goodbart and Michael G. Wohl. \$5.50, 279 pp., Lea & Febiger, 1964.

The authors of this manual are two well-known people in the field of clinical nutrition. Any manual jointly authored by these physicians should command attention and respect as being an authoritative discussion of the subject. The authors point out in the preface that this is not a textbook on nutrition, but a manual designed to supplement the use of the expensive, detailed texts available.

The book is divided into two sections, the first of which is the estimation of nutritional status; the second is a discussion of nutrition in disease with special references to the principles of therapeutic dietetics.

In the first section on the estimation of nutritional status, the authors present a detailed compendium of the laboratory values of normal ranges for the concentrations of many of the nutrients and metabolic endproducts found in the circulating blood and in the urine. These tables of normal values will be of inestimable value to the physician as a daily reference.

The second part of the book, that is, the nutrition in disease, may be subject to some criticism. This is a matter of personal bias of this reader and his disagreement with the authors. However, this is not characteristic of this manual, but is characteristic of the field in general. The authors were extremely brave to undertake a pragmatic statement of many of the situations which are still somewhat subject to further elucidation. I find, however, that the authors' pragmatism is probably one of the major virtues of the book, much as I may disagree with some of the statements in detail. The general practitioner and the medical student should not be concerned with the theoretical disputes and problems in this general field. He should have available to him a definitive set of recommendations which have proven of value empirically, regardless of the theoretical background and origin. The authors have succeeded admirably in establishing this type of criteria. This book will serve as a desk reference for the general practitioner. To the medical student, it will undoubtedly

be used in the time prior to examination when he is attempting to fill the receptacles of his mind with specific, positive data.

NUTRITION IN HEALTH AND DISEASE. By Cooper, L. F., Barber, E. M., Mitchell, H. S., Rynbergen, H. J., and Greene, J. C. \$7.00, 615 pp., including 60 pages of tables, 14th Edition, 1963.

This volume is designed for use by dietitians, nutritionists, and instructors of nurses. It is deliberately not prepared for physicians or investigators. The book has long been considered a valuable and standard work in its field. This new fourteenth edition has been carefully brought up to date in many details. A fifth author has joined the group.

The data on food composition make use of the recently revised Agriculture Handbook No. 8, 1963. Points of view and emphases are comparably contemporary.

The typography, ninety-nine illustrations and arrangement of material are all acceptable and attractive. A glossary and numerous menus and recipes add to the utility of the work.

The volume can be recommended heartily for nurses and dietitians to use and for their training.

PROGRESS IN DIABETES RESEARCH, Proceedings of the First Symposium of the German Diabetes Committee (in German). Edited by Prof. K. Oberdisse and Prof. K. Jabnke. Georg Thieme Verlag, Stuttgart, West Germany, 1963. 176 pp.

In October 1962, the first symposium on diabetes took place in Düsseldorf, Germany, arranged by the German Diabetes Committee. There is no German Diabetes Association; this Committee is a subdivision of the German Society for Internal Medicine. Attendance was limited to fifty-three invited guests, mainly from Germany, but also from Switzerland (3), Belgium (1), England (1) and United States (1). The proceedings contain an abbreviated version of each of the invited papers, followed by a bibliography and discussion. Two papers are in English, and twenty-five are in German. This limits its usefulness for potentially interested non-German readers. The special topics discussed were: (1) Insulin in blood (eleven papers); (2) methods for determination of glucose in blood and urine (five papers); (3) organization of a diabetic outpatient department; (4) histology of the islets of Langerhans (six papers); and lastly, prediabetes and early detection of diabetes (four papers).

1. *Insulin in blood*

Renold and Steinke (Boston) present a summary of their work concerning measurement of serum insulin-like activity (ILA) employing the rat adipose tissue assay. Their data obtained with sera from early untreated and genetically selected prediabetic patients strongly suggests that in the early phase of diabetes a stage of relative, rather than absolute insulin deficiency exists. To explore the differential effectiveness of endogenous insulin on rat diaphragm and on rat adipose tissue, the authors present new data obtained in their laboratory by Rafaelsen who injected test doses of labeled glucose, with and without insulin intraperitoneally, and measured glucose incorporation into glycogen in diaphragm, heart, liver, epididymal and subscapular fat. Vallance-Owen (Newcastle-upon-Tyne) reviews insulin antagonists in general and the synalbumin factor in particular. Presence of this factor in the hereditary type of diabetes, but its absence