

contains the methodology: Diet selection, food values, menus, cookery and an extensive list of calorie counts. Separate small chapters are devoted to "heart saver" (low fat) and low sodium diets with numerous wise hints to make these often burdensome diets more tolerable.

The reviewer is impressed with the merit of this work. It is sound, scientifically accurate and factual. It offers no panaceas or fads but places reducing in its proper place as a prophylactic and therapeutic procedure. It does not appeal to the emotions but to reason, offering the reader a sound and intelligent fund of information which he may grasp easily and utilize sensibly. It may be studied with great benefit by the medical reader as well, certainly, by those interested in diabetes. Nothing like it is available to the serious reducer, and the physician can recommend it to him with all confidence.

CLINICAL PHYSIOLOGY. Edited by Arthur Grollman, M.D. \$12.50, pp. 854, McGraw-Hill Book Co., Inc., New York, 1956.

This book attempts to present the "basic physiologic principles of clinical medicine" without including general subjects of physiology or clinical medicine, available in current texts. The aim involves considerable selection of material, which is evidenced in the chapters by the twenty-six distinguished contributors. However, even the subject matter included requires compression in order to be treated within reasonable limits, a fact which has left the quality of a synopsis in significant segments of the book. In other chapters, a restricted area has been treated intensively with no attempt at complete coverage of the subject. Opinions may differ regarding the need and desirability of this varied approach, but it does provide an uneven character to the book as a whole. This is not intended as a criticism of the material, since all the chapters are written with authority and at a generally advanced level. An outstanding feature is the timely and valuable analysis of pulmonary function by Drs. Dickinson W. Richards and Andre Cournand. The factors which operate to produce impairment of pulmonary function are categorized, and provide a framework for proper evaluation of the patient with pulmonary disability. The erudition and perspective for which he is remembered are demonstrated in the discussions of carbohydrates, lipid, and protein metabolism by the late Dr. John P. Peters. These sections will prove worthwhile to the individual who desires to refresh his knowledge of the basic principles of metabolism.

The book is recommended reading for all physicians who regard continuing education in principles of human physiology as an important aspect of clinical instruction.

ACTUAL PROBLEMS IN DIABETES, *A symposium*. Edited by Prof. Dr. E. Bertram and Dr. J. Kuntze. \$1.35, pp. 80, Georg Thieme, Stuttgart, 1957.

This most valuable transcript of a Symposium on Problems of Diabetes, held in Hamburg in January 1957, contains contributions and discussions from a great number of authorities from Germany, Austria, Switzerland and Sweden.

Since the hypoglycemic sulfonylureas have been in use in Germany for a longer period of time than in the U.S.A., and since carbutamide as well as tolbutamide are employed, the experiences and problems discussed are of great interest. Both drugs appear to have continued to give generally satisfactory results in the management of the stable, maturity onset diabetes. Most speakers agreed that about 28 to 40 units of insulin per day are the upper limits which can be replaced by the oral drug. The importance of adherence to dietary restrictions was stressed. The hypoglycemic activity of carbutamide was found to be somewhat greater than that of tolbutamide in equal doses, but the toxicity of tolbutamide to be less. Some authors recommend use of the latter only, as in the U.S.A., but others would not like to miss carbutamide. The main discussion centered around the two problems of (1) mechanism of action, and (2) drug escape. The concept of α -cell or glucagon inhibition seems to be largely abandoned. β -cell stimulation with stimulation of insulin secretion is now generally accepted as the main or one of the main actions (v. Holt, Kracht, Baender), but no reference is made to Loubatières who first suggested it. The possibility of hepatic action and inhibition of glycogenolysis was discussed by Beringer. Heinsen reported that, in a number of patients, the oral drug lost its effect after an initial period of good control. He called this a tachyphylaxis-like reaction. Various speakers (Constam, Zurich; Brechmann, Hamburg; Stratmann, Stuttgart; Otto, Hamburg; and Pfeiffer, Frankfurt) confirmed this observation of drug escape. In some instances this was thought to be caused by overeating; in others, however, the question was raised of islet-cell exhaustion. Mylius, Hamburg, reported on fresh punctate hemorrhages in the fundi of patients under sulfonylurea treatment, but other clinicians did not corroborate his findings.