Dr Hans Loock, of Graaff-Reinet, writes:

With the passing of Dr Billy Hudson, the community of Graaff-Reinet has lost an outstanding citizen and a beloved and devoted doctor. In his humble and unassuming manner, he personified the finest qualities associated with the term 'family doctor'. His career was notable for the selfless way in which he served all sections of the community — rich and poor alike. Not only did he administer medicine, but he was a confidant and friend, ready to assist and advise. His buoyant optimism, evident even during his long and tragic illness, was always a source of encouragement to his patients.

Billy and his brother James followed in the footsteps of their father, Dr Hougham Hudson, who in the early pioneering days established his practice in Graaff-Reinet in 1891. Dr Billy's death brings to an end a long and distinguished period of service to medicine in the Graaff-Reinet region by the Hudson family — his magistrate grandfather served on the Graaff-Reinet Hospital Board as chairman from 1875.

Billy showed early promise as a scholar at Bishops College in Cape Town, and because of his all-round ability and popularity he was awarded a Rhodes Scholarship in 1919. News of this award reached him after he had completed a year's training with the Royal Flying Corps in England and was a 2nd-year medical student at the University of Cape Town. From UCT he proceeded to Brasenose College, Oxford, and qualified in 1926 with the degree B.M. B.Ch. After a further year of study at Cambridge University, he qualified in electrology and medical radiology. It was while serving his internship at St Bartholomew's Hospital in London that he met his future wife, Elsie Bunner. The young couple returned to Graaff-Reinet in 1927 and were married in November of that year, and 'Dr Billy' joined his father's practice, to which, apart from service in the Medical Corps during World War II, he dedicated himself for an unbroken spell of 36 years.

During his years in practice his work was of paramount importance to him, but when he finally decided to retire he continued to serve the community in a different way. He made himself available as a town councillor; as a demonstration of the confidence and respect he had earned, he was elected to the Council in 1966 with the highest number of votes in that election.

After his retirement, Billy interested himself in bowls, and because of his enthusiasm was elected president of the Graaff-Reinet Bowling Club. He was also elected chairman of the Graaff-Reinet Men's Club in 1975, its centenary year; this was a most fitting appointment, as his grandfather had been co-founder of the club 100 years earlier. Billy was a great lover of outdoor activities, particularly hunting and fishing. He went on several big game safari hunts, and in later years on fishing expeditions, often with men much younger than himself — and one still hears them speak of his wonderful sense of humour and fun.

I deem it an honour and a privilege to have partnered him in practice. Billy was 56 years old and I was 26 years old when I joined him, but he was young at heart and he had such a generous manner that we soon became good friends. From him I learnt not only general practice, but also many medical facts and techniques. He was a good doctor and surgeon, but above all he had real feeling for patients and their families. He was a man of great personal and professional integrity; his conduct towards patients and colleagues was always impeccable. His manner was gentle, yet he inspired great confidence. Our community and the medical profession have lost a true gentleman. We extend our deepest sympathy to his wife Elsie, his son John, who is a dentist in Salisbury, and his daughter Mrs Judy Herold.

Boekbesprekings : Book Reviews

GUIDE TO HOUSE SURGEONS


The new house surgeon is often under considerable stress because he finds himself asked to make decisions and to do things for which the textbooks have not prepared him. The present book started as a series of notes produced for house surgeons in a New Zealand teaching hospital, and has now become international, with 2 Australian authors and 1 British author. Since house surgeons are in much the same situation everywhere in the world, the book is of global value. It tells the house surgeon briefly and dogmatically all the things he will have to do, when and why to initiate investigations, and how to start therapy and deal with emergencies. The fact that the book has run into 6 editions speaks for itself. A most handy volume to have in your coat pocket.

ADVANCES IN HEART DISEASE


This second volume of Advances in Heart Disease is built around topics discussed at a recent Californian symposium, and most contributions come from the southern part of the USA. Most of the book consists of essays on recent advances in diagnosis, with sections on echocardiography, nuclear cardiology, ambulatory electrocardiography, exercise testing, and invasive evaluation of cardiac function. There are also useful sections on exercise training and cardiac rehabilitation, and on some recent advances in treatment, with such topical themes as vasodilators in congestive heart failure, the clinical pharmacology of disopyramide, and pacemakers. A couple of chapters containing specialized contributions on laboratory topics complete a book that should be of value to physicians with an interest in cardiology.
**BEYOND THE MAGIC BULLET**


Are medical research and practice pointed in the wrong direction? Bernard Dixon, microbiologist turned science writer, argues persuasively that in many respects they are. His arguments are far more rational than those of the well-known Mr Illich, and he does not select the evidence to suit his case, as the latter does. What he is saying is that the rise of microbiology and the pharmaceutical industry has led us astray into the belief that every disease has a specific aetiology. The search for causation has led to the neglect of the alternative view of disease in terms of bodily and social disharmonies created by unhealthy behaviour and lifestyles. Of course, the two views of disease are not really mutually exclusive. A specific cause may act only in the presence of certain circumstances, and Dixon points out that there will still be a need for the pharmaceutical industry, even in the Third World, where provision of drugs should be low on the list of health priorities. Certainly, in the developed world, most of the present scourges such as coronary heart disease and lung cancer are self-inflicted, and more emphasis on individual responsibility for health and less on drugs and surgery is called for, provided of course that we understand the background.

Occasionally the author falls into his own trap. His remarks about oesophageal cancer suggest that dimethyl nitrosamine may be the cause, whereas this is far from proven. He also quotes intensive health education in the Stanford Heart Disease Prevention Program as having produced 'significant results', a point which is still controversial, and suggests that better education about nutrition may have lowered coronary disease. However, in the Third World — again a doubtful post hoc ergo propter hoc inference.

He sees clearly, however, that health education in the democracies has achieved very little, as the figures for tobacco and alcohol sales and for road accidents, and the overfed appearance of so many adults, testify. He hints that a more authoritarian approach may be needed, although it is doubtful whether really punishing taxation of tobacco and alcohol will do much. A point he does not elaborate on is the total effect of intensive health education pervading all aspects of life on the mental health of individuals — a nation of eternally health-conscious cranks might live longer without enjoying life.

Although this book is not primarily addressed to doctors, they should read it; much of it we already know, but there are some fresh slants on the complex subject of health care.

**OBSTETRICS AND GYNAECOLOGY**


This book is not meant to be a textbook of obstetrics and gynaecology. As the authors state, the past decade has seen the introduction of complex techniques in obstetrics and gynaecology which have completed a process already advanced; that is, the move to intensive training in the practical aspects of both subjects at the postgraduate stage.

The authors have attempted to introduce the undergraduate clinical student to a new branch of medicine and thought without too much cumbersome theory and detail — for the latter, the standard reference textbooks should be consulted. They are also of the opinion that the undergraduate of today needs a compact, comprehensive book, which will give him an overall view of the subject based upon his understanding of anatomy and physiology, a book which can be read easily at an early stage in the course and which will enable him to gain maximum benefit from the teaching in clinical situations. Stress is also laid on the value of group tutorials, often based on everyday problems which present themselves in the wards, and the scrapping of formal detailed lectures. In this different but modern approach to teaching, the authors have succeeded admirably.

H. Glietenberg

**EUTHANASIA**


Euthanasia, the very topical and contentious issue, is the subject of this collection of papers presented at the recent international symposium on the subject held in Durban.

Approaches are channelled from diverse viewpoints — religious and secular, Western and Eastern, medical, psychological, criminological, nursing, scientific, and of course legal. The book is divided into 5 well-defined chapters, clearly indicating which of these aspects are dealt with and by whom. There are 31 distinguished contributors. In his brilliant paper, Professor C. N. Barnard commences with 'The inevitable death and dying' and then poses, at length, the question 'What do we mean by death?'

Dr H. A. Shapiro sums up in masterly fashion. While for instance 'active euthanasia' is condemned, by the religious fritenaries in particular, 'passive euthanasia' receives severe and almost unanimous approval under many given circumstances. These are eloquently summarized in Arthur Hugh Clough's couplet from The Latest Decalogue, which Dr Shapiro quotes, and which reads: 'Thou shalt not kill; but need'st not strive officiously to keep alive'.

A. Helfet
THE LUNG
This monograph from the International Academy of Pathology focuses on recent advances in clinicopathology of the lung. It is edited by Dr W. M. Thurlbeck (a South African medical graduate), and is dedicated to the memory of Professors Averill A. Liebow and Jethro Gough, two founders of modern pulmonary pathology, a subject which has made such an important contribution to the rapid advance of respiratory medicine over the last 2 decades. It is not a comprehensive textbook and covers only selected topics. The emphasis is on ultrastructure, advances in cell biology and biochemistry, structure-function considerations in relation to pulmonary oedema, the adult respiratory distress syndrome, airways obstruction (with specific reference to the small airways), pulmonary vascular diseases, and the pneumoconioses. There are also chapters on drug-induced lung disease, present trends in lung cancer, the sudden infant death syndrome, recent advances in neonatal respiratory medicine, the immunopathology of allergic lung diseases, and a clinicopathological approach to diffuse infiltrative lung disease. Each chapter is concise, well written and extensively referenced to the modern literature. The index is comprehensive, and the illustrations are well reproduced and of high quality.
This book will be of value to both clinicians and pathologists. It deserves a place in all medical libraries and will, I am sure, find its way onto many private bookshelves.
S. R. Benatar

BEAUTY ENCYCLOPAEDIA
Almost every woman employs some aids to beauty, and occasionally these aids present the doctor with a problem, accentuated because he has little idea of the nature or use of beauty products. However, Dorothy Farmer's Beauty Encyclopaedia is more likely to be consulted either by the doctor's family or his helpers. It can be regarded as a serious and well-written contribution to the subject by an experienced beauty practitioner (it even cites the SAMJ in its list of references), with a lot of sensible advice and much information about cosmetics, hair preparations, diet, suntan and other aids to beauty.

DEVELOPMENTAL DEFECTS AND SYNDROMES
The inability of a paediatrician or a medical practitioner to suggest a firm diagnosis in a neonate, infant or child of unusual appearance or abnormal development may lead to much uncertainty, frustration and despair on the part of the parents. Apart from a few common syndromes such as Down syndrome, the average practitioner is not likely to gain much expertise in or knowledge of the large number of recognized syndromes. His function, more often than not, is to recognize and identify specific morphological and other abnormalities, to consult textbooks, and if necessary to re-examine the patient in search of further supportive evidence to confirm a diagnosis.
There are few textbooks available that give a comprehensive and well-illustrated account of developmental defects and syndromes in neonates, infants and children. This publication will inevitably be measured against that stand-by of paediatricians, Recognizable Patterns of Human Malformation by David W. Smith. The two texts are, however, in many ways complementary to one another. In the reviewer's opinion, the presentation of the tables for individual anomalies, layout and classification in Smith's book is more helpful in guiding one to a possible diagnosis than the text under review. Having reached this stage, however, the latter proved in some ways more satisfying in providing information about particular conditions and confirming the diagnosis from the clear illustrations of the more of 200 syndromes described. The glossary of terms, charts of normal values for selected parameters, and the appendix on dermatoglyphic analysis further add to the usefulness of the text.
Dr Michael Salmon's book contains much information of value to the general paediatrician. It is recommended to medical libraries and to medical practitioners who deal with children.

H. de V. Heese

CONDUCT DISORDERS
This short book explains what is meant by conduct disorder. It is emphasized that there is an apparent male preponderance in these disorders, with a paucity of specific studies in females. The diagnosis and management of conduct disorders are well explained, and space is devoted to their possible prevention. Two patient profiles are commented on. The book is easy to read and is a useful guide to child psychiatrists.

FAMILY PRACTICE
The 2nd edition of this manual, which is dedicated to the family physician, is now available. It is what it sets out to be — a textbook of family practice. The contributors are legion; it is pleasing that so many of them are engaged in family practice or the teaching of it. A co-author system is used, viz. the pairing of an authority in the field with an experienced family physician. As the foreword states, treatment should be directed at the ‘whole patient’ and continuing and comprehensive care must be provided. The chapters on sexual counselling, family dynamics and behavioural problems are particularly good, and the keeping of medical records in the correct way is encouraged. There are 50 chapters, each of which deals with an important facet of family practice. For those who enjoy and have family practice at heart, this book should serve as a most useful text.

CARING FOR THE DYING
The recent remarkably popular visit to South Africa by Dr Cicely Saunders, medical director of St Christopher's Hospice, London, coincides with publication of a quite outstanding book by an American journalist who has worked as a volunteer at St Christopher's and is now associated with a similar institution in California. The book is beautifully written by a dedicated person, and is warmly recommended as reading for every medical student and every practitioner who is less than satisfied with the way we manage our terminally ill patients (and that ought to include every reader of this journal).
The hospice movement is spreading rapidly in Britain and North America. Its existence, rooted in religion, is a welcome reminder that there are religious people whose primary concern is for persons rather than political institutions. Even if you are an agnostic, you should read this book and then give it to a student in one of the health professions to study.

S. R. Benatar