Ancient Wound Care


Someday, medical practice circa 1975 will astound future generations by its naiveté, irrationality, and "cures that made matters worse," and 20th century thought will seem as obscure to our descendents as the practices of physicians in ancient Mesopotamia, Egypt, and Greece now seem to us.

If we are lucky, Dr Guido Majno will be reincarnated every thousand years to resurrect our dusty medical archives and clarify our medical ideas. Undoubtedly, he would display the same energy, wit, and enthusiasm evident in the present book. However, instead of tackling mummies, bones, hieroglyphics, excavations, and artwork, he would have to scrutinize miles of microfilm and millions of tons of journals, deciphering long-forgotten computer codes, laboratory results, and operative procedures.

With enormous curiosity and indepth knowledge of pathology, Dr Majno has analyzed the development of wound care, surgery, and anatomical knowledge between 3000 BC and AD 200. The major civilizations included in his study are Mesopotamia, Egypt, Arabia, Greece, Alexandria, Rome, India, and China. With vivid imagination he has reconstructed many short vignettes of medical practice, based on ancient case reports. Patients with wounds caused by snake bite, warfare, gladiator fights, and assorted accidents are escorted to the physician's office and treated according to the customs of the time.

Each civilization faced similar basic problems in wound care: stop the bleeding, cleanse the wounds, apply poultices, and cover with bandages. Except for the widespread use of animal dung on wounds, many treatments frowned upon by modern science were at least partially helpful. Washing wounds with hot vinegar, wine, or beer helped combat infection, as did the application of salves containing honey, myrrh, or copper pigments—convincingly demonstrated by Dr Majno to be moderately antiseptic when placed on bacterial cultures. Also beneficial was the use of tourquenets, opiates, and ephedrine.

Ancient wound care included certain basic steps which now seem to have no rationale: incantations to please the deities; purging to fight internal decay; and acupuncture, starvation dieting, and blood-letting to balance the basic body humors and opposing cosmic forces. Much of our knowledge of these treatments comes from the writings of Hippocrates, Celsus, and Galen, who collectively dominated medical thought for more than 2000 years.

This beautifully illustrated, thoroughly referenced book certainly deserves recognition as an outstanding contribution to the history of medicine. Hopefully, physicians and historians will take advantage of its enjoyable wisdom. Those who don't deserve to be "beaten to a papyrus."

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Neurologic Infections


Drs Bell and McCormick have managed a monumental task in very readable and informative format. Their book discusses agents of infection, clinical and laboratory diagnosis, and course and treatment for the bacterial, viral, fungal, parasitic, and rickettsial infections of the nervous system. Even as new therapeutic agents become available, the book will continue to be a valuable reference because of its thorough delineation of the clinical picture and careful discussions of differential diagnosis. There will be some disagreements on choice of drug therapies, management of subdural effusions, and repeated lumbar punctures to reduce intracranial pressure. Options are clearly stated and reflect the state of the art rather than basic discord.

Noteworthy is the section on focal suppurative infections of the nervous system. Written before wide application of computerized axial tomography, the other diagnostic modalities noted by the authors will lead to better utilization of this specialized technique. Part IV, cautiously entitled, "Neurological Conditions Related to Inflammatory or Infectious Disorders," provides excellent and succinct discussions of Reye, Guillain-Barré, Behçet, Vogt-Koyanagi-Harada and acute cerebellar ataxia syndromes. The inclusion of a chapter on "Febrile" seizures is a welcome surprise bonus. Drs Bell and McCormick are to be congratulated on putting forward a rational approach to a problem that all too frequently becomes highly charged emotionally and dogmatically presented.

Many useful tables and excellent illustrations, combined with the text itself, make this book equally useful for pediatricians and neurologists, be the latter pediatric or adult neurologists.

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Immunohematology


Immunohematology is such a bull market these days that everyone is trying to explain it to everyone else. These French authors, from the regional blood transfusion center in Lille, have attempted to "condense and compile the principal elements of immunohematology" for an audience consisting of "students, physicians, transfusion technicians, and obstetricians." It can't be done, especially by authors whose native language is not English.

There is excellent summary material in several areas, notably serum protein alloantigens, technical problems in blood grouping procedures, and bibliographic material empha- sizing European literature, but neither the neophyte nor the experienced worker will find the book fully satisfactory. Well over half the text and three quarters of the technical appendix discuss erythrocyte antigens and antibodies, but detailed attention has been bestowed capriciously. The superficial discussions of clinical topics like transfusion reactions and hemolytic disease of the newborn contrast with compressed but highly sophisticated accounts of antigenic composition.

Consideration of leukocyte, platelet, and organ immunology take up principles more than practice. A laboratory worker could not use this as a guide for testing, or even for planning, but he could achieve fair understanding of what workers trained in the field are trying to do. The intro-