POSITIONING IN RADIOGRAPHY. By K. C. CLARK, *M.B.E., F.S.R.*, Principal of the Department of Radiography and Medical Photography of Ilford Limited. Seventh edition. 12×9 in. Pp. 655, with 2,150 figures. Index. 1956. London: Ilford Limited. William Heinemann (Medical Books) Ltd. Price £5, 5s.

This handsome volume is likely to be found as a standard work of reference in most departments of radiodiagnosis. This new edition of a work already widely accepted as being of outstanding value comes appropriately to encompass the considerable advances in technique which have been made since the sixth edition appeared in 1951. It is noticeably larger than its predecessor, having expanded by 128 pages and no less than 682 illustrations. Its solid binding ensures that it will stand up to constant use.

The book covers the whole field of radiography, but those working in orthopaedic radiology departments can be grateful to Miss Clark for her detailed treatment of their special subject. The section on the cervical spine, for example, has been expanded and is entirely adequate. Shortcomings, however, can be found in the discussions on arthrography, where some illustrations would seem to be desirable and where the radiographer might be warned of the frequent adverse reactions in adults during such examinations of the shoulder. Some radiologists may disagree with the technique described for myelography.

As the work is stated to be concerned entirely with technique, and neither apparatus nor diagnosis, it is reasonable that such matters as high kilovoltage technique and high ratio grids should receive

FIG. 519

FIG. 519a

only passing references. But, though Miss Clark rightly considers that diagnosis is not the main concern of the radiographer, the reviewer has found that the good radiographer is indeed interested, and it seems a pity that only some of the excellent illustrations, which incidentally show pathological conditions, carry an accompanying diagnosis.

But these are minor criticisms. Practically all the procedures employed in orthopaedic radiography are well and adequately described. Reference is made to modern methods of true limb length measurement and to the examination of the spine in scoliosis. A new section is included on macroradiography, with an open assessment of its practical value. Enough is said of the new image intensifier and cineradiography to remind us that, in this equipment, we have a new tool for the examination of joint function and this may well prove a feature in the next edition. The increasing use of tomography for skeletal examination also attracts attention; and, in conjunction with this, it is wise to consider the word of warning about radiation exposure. This includes a nomogram for the calculation of radiation dosage, and it would be well for readers themselves to use this in order to appreciate the amount of radiation to which the patient is subjected in, for example, full examination with tomography of the lumbo-sacral region. While this dosage can be reduced by the use of suitable filters, high kilovoltage technique and, at a small sacrifice of detail, fast films and intensifying screens, the greatest single advance promises to be the use of multisection tomography. With this auxiliary apparatus the amount of radiation employed for two single ordinary tomograms will produce a

simultaneous series of five layer images. This is now true of most sections of the skeleton, but further elaboration will be required to make it satisfactory for the examination of the lumbo-sacral region in a heavy adult.

This book is almost essential for every department of diagnostic radiology.—R. O. MURRAY.

MEDICAL NEGLIGENCE. Being the Law of Negligence in Relation to the Medical Profession and Hospitals. By The Right Hon. Lord NATHAN, P.C., A solicitor of the Supreme Court; Chairman of the Board of Governors of Westminster Hospital; with the collaboration of Anthony R. BARROWCLOUGH, B.A., of the Inner Temple, Barrister-at-Law. 8½×6 in. Pp. xxxii+218. Index. 1957. London: Butterworth & Co. (Publishers) Ltd. Price 35s.

It is unquestionable that medical men feel more insecure than ever before in relation to their legal liabilities to their patients. Nevertheless, the medical man, disquieted by the spate of actions against hospitals and doctors in recent years, may take comfort from the fact that if he possesses "reasonable" skill and uses it with "reasonable" care, he will be immune from damages for negligence, although indeed he may not be immune from suit by a disgruntled patient. This concept of reasonableness is fundamental to our common law. "The standard of care which the law requires is not insurance against accidental slips. It is such a degree of care as a normally skilful member of the profession may reasonably be expected to exercise in the actual circumstances of the case in question. It is not every slip or mistake which imports negligence." (per SCOTT, L. J., in *Mahon v. Osborne* [1939].)

Lord Nathan in this excellent little work has collected together all the important decisions that bear on medical negligence and has sought to extract from them the principles that now govern the common law on this subject. The orthopaedic surgeon will there learn that he may be held blameless, if, after carrying out some radical operation for malignant disease on the strength of a frozen section, he subsequently finds that the patient was suffering from some innocent condition; if, having delegated some routine duty in after-treatment to a competent junior, that junior carries out his duty negligently; or if he fails to have carried out a pre-operative blood count and the patient dies of haemorrhage because of an unsuspected leukaemia. On the other hand, he may be held liable if he fails properly to instruct his deputy as to after-treatment when he goes on holiday; if he fails to warn the patient of any serious operative risk; or if he experiments on his patient with some novel treatment. He will find, too, that it is his duty to keep himself reasonably abreast of developments but he is not necessarily negligent if he fails to read a single article.

If the surgeon's appetite has been whetted by these examples he should buy this book and he will be well rewarded in reading it, written as it is in simple and non-technical language and amply illustrated by "tabloids" of leading cases.

In a book of such all-round excellence it would be churlish to make too much of a statement in the preface that is not entirely accurate. Lord Nathan says, "It is an odd phenomenon of social psychology that, as long as the hospitals were still voluntary and the medical staff honorary, an action brought against a hospital or a medical man was something quite out of the way, yet since the National Health Service Act became operative in July 1948 there has been a remarkable and in some ways alarming flood of cases; and that notwithstanding that the hospitals are the same hospitals as before, and the medical men are, so to speak, the same medical men." In fact, the reason for the rarity of actions against hospitals and their staff before the 1940s was that, since *Perionowsky v. Freeman* in 1866, it seemed hopeless to bring an action in negligence against a member of the medical staff of a voluntary hospital who gave his services voluntarily and, since *Hillyer v. St Bartholomew's Hospital* in 1908, there was little chance that the patient who sued a hospital in respect of the professional negligence of its doctors or nurses would succeed. It was not until 1942, in *Gold v. the Essex County Council*, that this state of affairs was remedied, and even in that case only on appeal, because the Judge in the court of first instance was bound by *Hillyer's case*. It was thus after 1942, long before the Health Service started, that the cases against hospitals and their medical staff really began; and indeed the Minister was obliged to take over with the advent of the Health Service in 1948 a number of pending claims against hospitals and staffs consequent upon the decision in *Gold's case*. The fact is that the public conscience had been outraged at the position of almost immunity which had been built up in favour of hospitals and their staff so that a patient with a just claim seemed to have no chance of securing justice. That position has now been remedied and for a time the pendulum seemed to have swung in the opposite direction against the hospitals and their staff. However, there are signs that a balance has now been reached and that the flood of cases against hospitals is now abating.

This minor criticism in no way detracts from the value of this admirable book which should find a place on the bookshelf of every medical man on a hospital staff and every hospital administrator.—W. M. LEVITT.