The practical problem in civil engineering, although less acute in the sense that pressures are not very high and work is in free air, is difficult to control because unskilled labourers working for whole shifts are involved rather than disciplined naval personnel diving often only for short periods. Men have been found to acclimatize temporarily to work in compressed air so that the chance of suffering an attack of 'bends' in standard conditions falls from 10-15% on the first day to 1-2% after 10 days. This clearly raises the question of whether decompression schedules should be framed for the new recruit, so wasting the time of the acclimatized, or whether they should be suited to the acclimatized at the expense of the recruit.

Despite gaps in fundamental knowledge of physico-chemical events, a rational foundation for the design of decompression schedule is emerging from studies of divers, and means for the prevention of bone necrosis are becoming clear from studies of populations of civil engineering workers.

R. A. N. HITCHENS

Medical Care: Readings in the Sociology of Medical Institutions. Edited by W. R. Scott and E. H. Volkart. (Pp. x + 595; 75s.) London and New York: John Wiley. 1966.

Medical sociology—an embryonic specialty in this country—is concerned with the application of sociological concepts and approaches to the broad field of medicine, drawing on the knowledge of anthropologists, psychologists, and physicians as well as of sociologists. This lengthy book, a collection of papers written mainly by eminent American social scientists, is a valuable addition to the stock of recent American books on the subject.

The choice of papers was influenced by the belief that sociology can make a relevant contribution to current problems in medical care. For example, the crisis in the Health Service (in so far as it is a crisis), is one of organization and delivery rather than of the quality of care. What is the proper function of the general practitioner in an era of increasing specialization? What are the implications for the quality of care of different methods of remunerating physicians? How are increasing standards of education affecting the relationship between lay and medical cultures? The sociological approach to medical institutions does not provide quick answers, but it helps us to realize that the practice of medicine is not simply a matter of diagnosis and therapy but also the focus of a social encounter between people with very different expectations of each other's functions.

The early papers are among the most informative, dealing with the socialization of the physician and his role in different cultural settings, under different systems of payment, and in different types of professional organizations. The second section deals with the lay system—how societies define illness, folk remedies, the decisions to seek care—and with the interaction between healer and patient. The third section looks at hospitals as social institutions and examines the roles of medical and administrative personnel, and the implications for patient care of certain features of the social structure of hospitals. 'Hospitals and the community' is the

subject of the last section, but the approach is more that of the economist than the sociologist, for it is centrally concerned with the allocation of scarce resources.

One striking omission is the lack of any reference to sickness and the physician's role in an industrial setting: for long a source of abundant material for the sociologist. Should the G.P. be concerned with sickness certification in a social security state? The editors must feel that there is meat enough for sociologists in this book and I suspect it is mainly they who will read it.

J. R. BUTLER

Prevalence of Osteoarthritis in Adults by Age, Sex, Race and Geographic Areas, United States, 1960-1962. U.S. Department of Health, Education and Welfare, Public Health Service. (Pp. 28; illustrated; \$0.25.) Available from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C.

This report is based on X-rays of the hands and feet taken on a sample of 7,710 persons aged 18-79 drawn from the population of the United States of whom 6,672 were examined. Evidence of osteo-arthritis was found in 37%, the rate increasing steadily with age till at 75 years of age 85% were affected. These prevalences closely resemble those found in similar surveys in the United Kingdom and show the same tendency to a greater prevalence of severe disease in women than in men after the age of 50. The prevalence among negro men reached the high level of middle age some 10 years earlier than in white men. A similar pattern was not found among negro women.

Unfortunately, the pattern of joint involvement is not given in detail nor is there any information on the effect of occupation.

J. S. LAWRENCE

Complete Russian Course for Scientists. By M. Beresford. (Pp. 227; 25s.) Oxford: Clarendon Press: Oxford University Press. 1966.

The advances of Russian science and technology will be disputed by no one. The need for knowledge of such advances in the West is agreed by all. The translation of this need into reality is offered in the book by Mr. Beresford.

For a number of years the author, a lecturer in Russian, has run courses for scientists on the staff at the University of Manchester. This experience becomes manifest as early as page 3, where the initial difficulty of the Russian alphabet is simplified by the explanation that, in addition to many of the letters being similar to the English, a number of the remainder come from the Greek familiar to scientists (chi, pi, fi, delta, and so on). The rest of the book is as practical, right through to a table of Last Letters (Russian is a declined language) in the Supplement.

The book is designed for class use or for self study. At the end of every chapter there are exercises and, after the later chapters, reading passages. These gradually familiarize the student with reading scientific Russian. Nowhere will the reader learn how to explain to the inn-keeper that his postillion has been struck by lightning,