date. Approximately 500 or more names of industrial chemicals, drugs, insecticides and other compounds are arranged alphabetically. Under each name all the essential data are listed under clear subheadings: synonyms, route of entry into the body, toxicity, treatment and recommended precautions.

Doctors and others in the field of occupational medicine and hygiene and those concerned with the treatment of possible intoxications, will find this a very useful reference book.

I find it difficult to understand the rationale behind the inclusion of ingestion as a route of entry for some compounds (liquids and even powders and flaky solids) and omitting this route for others. Systemic absorption from the stomach did not seem to be the sole reason. Nor is mention made of the hazard from aspiration of petroleum hydrocarbons (especially those of low viscosity) following ingestion, a hazard most occupational physicians agree is greater than any systemic effect following absorption from the stomach.

The treatment that is recommended following ingestion is gastric lavage. Many authorities would disagree that this is the only method of treatment for ingestion as the author implies. No mention is made of induction of emesis with ipecacuanha (especially in children), the length of time following ingestion, or even that aspiration of the stomach contents must be avoided.

These criticisms apart, the book serves, its purpose very well as a quick reference guide for all those concerned with occupational medicine who may be called on to give advice on the adverse effects of many industrial compounds.

R. C. LEMON

Industrial Audiology. By M. E. Bryan and W. Tempest. (Pp. 56; illustrated; £2.25) Published by the authors. 1976.

The Foreword opens with the tale of Joe Wilson who went deaf because of the negligence of his employer, and who successfully claimed damages in Common Law. This story might have been better told in a Trade Union paper. Much later on, the objectives of the booklet are stated as 'a practical guide for. . . anyone who may be involved in the conservation of hearing, or with the assessment of hearing damage due to noise. It is hoped it will also serve as a guide to those who have to make decisions. . . .' The former aspect has been covered quite well, but far less assistance is forthcoming for those who have to make decisions.

Topics such as the choice of hardware, calibration and maintenance of equipment, and the effects of background noise and other factors on accuracy have been dealt with thoroughly, but these facts are readily available from standard texts. Audiometric threshold data have been quoted relative to International Standard throughout, without mention of British Standard data for earphone types in common use in this country. The specimen pre-audiometric medical questionnaire is exhaustive, but some explanation of how the factors listed can affect the hearing might have engendered more enthusiasm in those who have the tedious job of asking the actual questions. Taking audiometric thresholds by the method of limits has been described in some detail, which should help to overcome some of the slipshod practices encountered all too often in industry. The instruction to take care 'to ensure there is no collapse of the ear canal' has been given, but how is this to be effected when the ear canal is not visible?

The detection of nonorganic hearing loss, including malingering, has been mentioned, but more detail would have been welcome as this problem will almost certainly become more widespread with the increasing scale of industrial injuries benefits and Common Law litigation.

Only median data have been given for the effects of presbycusis (hearing loss due to advancing age), whereas statistical spreads would have been more useful in deciding whether a given audiogram was within the normal range for a particular age. The occurrence between typical audiometric patterns produced by exposure to continuous or steady-state noise on the one hand and exposure to impact or impulse noise on the other has not been mentioned in the text, yet is apparent from certain figures. How should the already deafened person who requires to hear warning signals for the maintenance of safety be managed? With ear protection, the signals will not be audible, yet without protection the hearing loss will worsen. Discussion of this important question has been omitted.

Considering the relatively high price, the booklet is poorly presented and produced, and the standard of printing left much to be desired in the review copy. Several trade photographs have been used which have not reproduced well. Finally, the authors tend to confuse their role as members of the academic staff of a University with their private consulting interests.

W. I. ACTON


Four editions and one reprinting in 14 years is perhaps the best objective measure of the success of this book. In the current edition Admiral Miles has been joined by Captain Mackay, formerly Senior Medical Officer, Underwater Medicine Department, Institute of Naval Medicine, Alverstoke, Hants.

In the last decade there has been an unprecedented increase not only in the number of men involved in professional diving but also in both its depth and duration. This has been accompanied by a great expansion in the associated research fields with an accompanying outpouring of scientific papers particularly in the United States. One result of all this, activity has been an awareness among a large number of doctors who have been drawn into the fringes of the subject that they should acquire some basic knowledge of underwater medicine if only to satisfy their own curiosity.

As explained in the preface to the Fourth Edition, the book is not a reference textbook but rather a selection of aspects of the subject that seem to be firm and of use for future foundations.

It would be wrong to give the impression that the book is only about diving; it is about the underwater environment, understanding it, the hazards associated with it and how to come to terms with it. Chapters on drowning, water safety, submersion and marine accidents are included. On looking back at the first edition it is interesting to note that there was no mention of saturation diving or submersibles and habitats. Instead of the phrase 'life support equipment' the corresponding chapter was just called 'underwater equipment'.

It was my intention when I began to read this book to note points which I could criticise and discuss in detail when I finally came to write my review. At the end I had so few notes which in retrospect looked so trivial that I have decided to give this book what can only be its due: that is, sound praise as a splendid and interesting overview of underwater medicine. Its contents should be known to every general practitioner and it should be learnt and digested by every doctor who