

OXFORD TEXTBOOK OF MEDICINE

SECOND EDITION

Edited by

D. J. WEATHERALL

J. G. G. LEDINGHAM

D. A. WARRELL

VOLUME 2

Sections 13-28. Appendix, and Index

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Preface to the second edition

The four years that have passed since the first edition of the *Oxford Textbook of Medicine* was published has been a time of mixed fortunes for clinical medicine. A series of climatic catastrophes leading to years of drought and famine, together with our continued inability to control some of the major bacterial and parasitic illnesses which afflict many of the world's populations, have highlighted the intractable problems of medical care in the Third World. A time of economic recession together with the increasing costs and complexity of medical care, and the social problems that have resulted from an unpredicted increase in the size of the elderly population, have put an immense strain on the medical services of wealthier countries. Furthermore, most of the major causes of morbidity and mortality in western societies – rheumatism, the common cancers, and degenerative vascular disorders – continue to cause problems in management. Perhaps because of this, or for other reasons, there is a prevailing mood of disillusionment with conventional medical practice and a move towards 'alternative medicine'. Yet at the same time remarkable developments have occurred in the fields of cell and molecular biology that promise to make the next decade the most exciting period so far in the development of the medical sciences. The discovery of the causative agent of AIDS, a condition which was only just recognized as the first edition was going to press and which has since reached epidemic proportions, is just one example of the remarkable power of the application of the new techniques of the basic sciences to clinical practice.

Since a major objective of this *Textbook* is to provide a more global picture of disease than is usually given in books of this type many of the changes that appear in the second edition reflect these new problems in clinical practice, both in developed and underdeveloped countries. While we are convinced that the basic principles of a sound grasp of pathophysiology, communication, history taking, and clinical examination are applicable to all branches of clinical care, regardless of where and by whom it is carried out, we have added several new sections which examine the ethical and pastoral aspects of modern medicine and the problems of primary care, both in the developed and developing countries. Some of these topics are highly controversial. For example, we do not always agree with some of the conclusions about the relationships between the basic and clinical sciences or with some of the political aspects of Third World medicine which are presented in these sections. On the other hand we believe that these subjects are of such importance that debates of this kind constitute a vital part of the thinking and training of modern-day students and physicians. In an attempt to further broaden our rather narrow north European view of clinical practice we have added to many of the major sections of the book a series of essays by practitioners in different parts of the world describing the importance

and peculiarities of the relevant diseases in their populations. We are particularly grateful to our many colleagues around the world for helping us in this way and for being so patient in the face of editorial foibles.

Though the reviewers of the first edition were remarkably kind, we are well aware of its deficiencies. Many sections have been completely rewritten and expanded and careful note has been taken of the numerous omissions ranging from AIDS to the management of hiccup. We are grateful to many of our readers who took the time and trouble to write to us to point out the errors of our ways. No textbook of this type can ever be all-embracing but we hope that this new edition will provide both students and practitioners with a reasonable account of most of the disorders that they will meet in day-to-day practice and an entrée to the rarer conditions together with a guide as to where more information can be found.

We are particularly sad to record the deaths of four of our authors, W. C. Marshall, Sister Mary Aquinas, M. Rachmilewitz, and E. G. Lee. Manny Lee was a particularly close colleague and friend, and his death at the peak of his surgical career has been a personal loss to each of us and a major tragedy for the Oxford Clinical School.

The Editors are grateful to the following persons who acted as sectional editors or advisers: Dr Roger Smith (Sections 8, 9, and 17), Dr Chris Redman (Section 11), Dr Derek Jewell (Section 12), Professor Derek Gibson (Section 13), Dr Ron Bradley (Section 14), Dr Don Lane (Section 15), Dr Terence Ryan (Section 20), Professor David Marsden (Section 21), Sir John Walton (Section 22), Mr David Spalton (Section 23), and Professor Michael Gelder (Section 25). Oxford University Press has shown its faith in this project by providing us with a full-time editor for this edition; we should like to record our thanks to the Press, and to Mairwen Lloyd-Williams for taking on this immense task and for her patience and forbearance with three increasingly irascible editors. As before, we are also particularly grateful to our secretaries Janet Watt, Judith Last, Eunice Berry, and Patchari Prakongpan for their excellent work in compiling this edition and in chasing many errant authors. The first Nuffield Professor of Clinical Medicine at Oxford, Leslie Witts, wrote that textbooks are usually written by those who have unsatisfactory marriages. We are happy to record that the marriages of the three editors have survived another edition; we are particularly grateful to our wives for their extreme forbearance and for proving that even Oxford professors are sometimes wrong.

Oxford, August 1986

D. J. WEATHERALL
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Preface to the first edition

The *Oxford Textbook of Medicine* is the reincarnation of 'Price' which, after 60 years as the major British postgraduate textbook of medicine, has been laid to rest by the Oxford University Press. The first edition of a *Textbook of the Practice of Medicine (including Sections on Diseases of the Skin and Psychological Medicine)* edited by Frederick Price was published in 1922. There were 26 contributors, all from London teaching hospitals. The book was updated roughly every four years up to the ninth edition (1957); for the tenth edition (1966) Sir Ronald Bodley Scott took over as editor. The last (twelfth) edition was published in 1978. Sir Ronald did much to modernize and expand the book during his time as editor and it is sad to record that his tragic death in an accident in 1982 prevented his seeing its successor.

When Sir Ronald Bodley Scott retired as editor of 'Price' in 1978, Oxford University Press approached us with the idea of producing a completely new textbook to replace it. This was a daunting proposal. There were several excellent American postgraduate textbooks of medicine already available and the undergraduate was well served on both sides of the Atlantic. Furthermore, although many of the reviewers of the twelfth edition of 'Price' were quite complimentary, others raised doubts about whether there was a place in the 1980s for a general textbook of medicine of its size and scope. Among the most critical reviews was a characteristically acerbic piece by J. R. A. Mitchell. After weighing the book he reminded us that dinosaurs became extinct because of their sheer bulk. 'Price' would suffer the same fate; it could not be lifted and therefore it could not be read! In addition, Professor Mitchell and other reviewers voiced the often-heard criticism that big textbooks are out of date before they are published, and suggested that smaller paperback textbooks, together with occasional forays into specialist monographs, provide the most economical and accessible guidance for students and general practitioners, while postgraduates are best served by specialist monographs and up-to-date review journals.

After considering these arguments very carefully we came to the conclusion that there is still an important role for a larger textbook of medicine. Certainly, the basic and clinical sciences are moving so fast that no textbook of medicine can hope to be absolutely up to date. However, relatively few of the advances in these fields lead to major changes in patient-care, and those that do require several years of critical evaluation before they become an integral part of routine clinical practice. Although we agree that the specialist monograph is often the best source of information in any particular area of medicine, the very breadth of the subject and the tendency to overspecialization means that few students and practitioners have immediate access to monographs on every branch of the subject, and even when they are available they are not always written by clinicians who are used to evaluating their patients in a general medical setting. Another reason for retaining at least a few broadly based textbooks of medicine is that medical practice varies very much in different parts of the world. Although it is important for students and practitioners to appreciate these differences as part of their general education, there is a more pragmatic reason for stressing this aspect of modern medicine. With increasing international travel and massive movement of refugee populations no practitioner can be sure that he will not be expected to deal with diseases with which he is unfamiliar and

which may present in a variety of unexpected ways. The steadily rising number of deaths from malaria in the United Kingdom in the last few years is just one example of this new phenomenon.

Thus we believe that the rapid expansion of knowledge, increasing specialization, and the blossoming of narrow specialist monographs have, if anything, strengthened the case for the general reference book. Therefore we have attempted to produce a reference book of internal medicine which we hope will reflect current British practice, but which also includes the views of an international group of authors. We have also tried to present some of the problems of clinical practice in the developing countries and to describe how the pattern of disease varies in different parts of the world. We have included some background chapters describing how some of the important basic clinical sciences such as microbiology, genetics, immunology, epidemiology, and oncology are contributing to an understanding of the pathogenesis of the diseases which are described in the book. With Professor Mitchell's criticisms of 'Price' in mind, we have remembered the frail and divided the book into two volumes.

For whom is this book intended? The short answer is anyone who is studying or practising clinical medicine. Our overall aim has been to provide a bird's eye view of the subject; the book is designed primarily for general practitioners and specialists as a first reference source. In addition, we hope that it will provide medical students and postgraduates with an adequate guide to the more important clinical disorders and point them in the right direction when looking up the rarities. It is an impossible task to produce a balanced reference book of general medicine first time round and we are only too aware of the shortcomings of our first effort. However, we hope that we have laid a basis on which future editions can develop a more mature and balanced view of this increasingly complicated field.

We cannot acknowledge everyone who has helped us in this enterprise. Several of the major sections were planned with a sub-editor. These are: Nutrition: Dr Roger Smith; Reproductive medicine: Dr C. W. G. Redman; Gastroenterology: Dr D. P. Jewell; Cardiology: Dr D. G. Gibson; Respiratory disease: Dr D. J. Lane; Neurology: Professor W. B. Matthews; Psychiatry: Professor M. G. Gelder. We were cajoled into this impossible task by Richard Charkin of Oxford University Press. His colleagues at the Press, particularly Alison Langton, Nicholas Dunton, and Christopher Riches have managed to see it to a conclusion despite innumerable difficulties caused by errant authors and a typesetting process which, in the best traditions of an ancient University, persisted in producing sections of the book in ancient Greek. On a more personal note we take particular pleasure in acknowledging the help of our secretaries, Janet Watt, Jenny Stephens, Jeanne Packer, Sheila Hatton, Judith Last, Jacqueline Teodorczyk, Eunice Berry, and Patchari Prakongpan. Finally, we are happy to record that the marriages of the three editors have survived the production of this book; the forbearance of our wives during its difficult gestation is the major reason for its ever seeing the light of day.

Oxford, August 1982

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Contents

List of Contributors	xvii		
SECTION 1. On textbooks of medicine			
<i>A. M. Cooke</i>			
SECTION 2. On modern scientific medicine			
Scientific medicine – success or failure? <i>D. F. Horrobin</i>	2.1		
Medical ethics <i>D. A. K. Black</i>	2.4		
SECTION 3. The spectrum of disease and clinical practice			
Medicine in an unjust world <i>M. H. King</i>	3.1		
Health and sickness in the community <i>M. J. Goldacre and M. P. Vessey</i>	3.10		
Primary health care <i>G. H. Fowler</i>	3.17		
Primary health care in a developing country <i>P. Wasi</i>	3.23		
SECTION 4. Genetics, immunology, and neoplasia			
Genetic factors in disease <i>M. E. Pembrey</i>	4.1		
Molecular biology and clinical medicine <i>D. J. Weatherall</i>	4.40		
Immune mechanisms in health and disease			
Principles of immunology <i>A. J. McMichael</i>	4.47		
Abnormalities of the immune response <i>H. M. Chapel</i>	4.60		
Immune deficiency <i>A. D. B. Webster</i>	4.75		
Principles of transplantation immunology <i>P. J. Morris</i>	4.83		
Neoplasia			
General characteristics of neoplasia <i>H. Harris</i>	4.88		
Epidemiology of cancer <i>R. Doll and R. Peto</i>	4.95		
Prevention of cancer <i>R. Doll and R. Peto</i>	4.123		
Medical aspects of neoplasia <i>D. A. G. Galton</i>	4.125		
SECTION 5. Infections			
The host's response to infection <i>B. M. Greenwood</i>	5.1		
Epidemiology and public health <i>A. B. Christie</i>	5.13		
Physiological changes in infected patients <i>P. A. Murphy</i>	5.20		
The biology and classification of pathogenic viruses, bacteria, fungi, and parasites <i>D. A. J. Tyrrell</i>	5.26		
Antimicrobial chemotherapy <i>M. P. E. Slack</i>	5.35		
Viruses			
Respiratory viruses <i>J. Nagington and D. Rubenstein</i>	5.53		
The herpesviruses <i>B. E. Juel-Jensen</i>	5.59		
Varicella–zoster virus infections: chicken pox and zoster <i>B. E. Juel-Jensen</i>	5.67		
Infectious mononucleosis: Epstein–Barr virus disease <i>B. E. Juel-Jensen</i>	5.72		
Infections caused by simian herpesviruses <i>B. E. Juel-Jensen</i>	5.75		
Cytomegalovirus infection <i>J. O'H. Tobin</i>		5.76	
Poxviruses <i>K. R. Dumbell</i>		5.80	
Orf <i>B. E. Juel-Jensen</i>		5.83	
Molluscum contagiosum <i>B. E. Juel-Jensen</i>		5.84	
Paramyxoviruses			
Mumps: epidemic parotitis <i>A. B. Christie</i>		5.85	
Measles <i>H. C. Whittle and W. C. Marshall</i>		5.89	
Enteroviruses <i>N. R. Grist</i>		5.93	
Viruses, diarrhoea, and vomiting <i>C. R. Madeley</i>		5.102	
Rhabdoviruses: rabies and rabies-related viruses <i>D. A. Warrell</i>		5.105	
Orbiviruses: Colorado tick fever <i>D. A. Warrell</i>		5.114	
Togaviridae			
Alphaviruses <i>D. I. H. Simpson</i>		5.114	
Rubella <i>J. O'H. Tobin</i>		5.117	
Flaviviruses <i>D. I. H. Simpson</i>		5.120	
Dengue haemorrhagic fever <i>S. Nimmanitya</i>		5.124	
Bunyaviridae <i>J. S. Porterfield</i>		5.125	
Arenaviruses <i>D. I. H. Simpson and E. T. W. Bowen</i>		5.134	
Hepatitis viruses <i>A. J. Zuckerman</i>		5.139	
Tumour viruses <i>R. A. Weiss</i>		5.146	
Retroviruses in human disease <i>R. A. Weiss and A. G. Dalgleish</i>		5.151	
Marburg and Ebola fevers <i>E. T. W. Bowen and D. I. H. Simpson</i>		5.155	
Transmissible slow virus encephalopathies (kuru) <i>M. P. Alpers</i>		5.158	
Papovaviruses <i>S. D. Gardner</i>		5.160	
Parvoviruses <i>M. J. Anderson and J. R. Pattison</i>		5.162	
Bacteria			
Diphtheria <i>A. B. Christie</i>		5.164	
Pathogenic streptococci <i>M. T. Parker</i>		5.168	
Pneumococcal infection <i>B. M. Greenwood</i>		5.182	
Staphylococci <i>I. Phillips and S. J. Eykyn</i>		5.191	
Meningococcal infection <i>B. M. Greenwood</i>		5.199	
Enterobacteria and miscellaneous enteropathogenic and food-poisoning bacteria <i>M. B. Skirrow</i>		5.208	
Typhoid and paratyphoid fevers <i>E. B. Adams</i>		5.218	
Anaerobic bacteria <i>S. J. Eykyn and I. Phillips</i>		5.224	
Cholera <i>C. C. J. Carpenter</i>		5.231	
Haemophilus <i>D. C. Turk</i>		5.234	
Bordetella <i>C. C. Linnemann Jr</i>		5.239	
Tularaemia, glanders, and melioidosis <i>R. G. Mitchell</i>		5.242	
Plague <i>A. B. Christie</i>		5.246	
Yersiniosis and Pasteurellosis <i>N. S. Mair</i>		5.251	
Anthrax <i>A. B. Christie</i>		5.255	
Brucellosis <i>E. Williams</i>		5.259	
Tetanus <i>E. B. Adams</i>		5.265	
Botulism, gas gangrene, and Clostridial gastrointestinal infections <i>H. E. Larson</i>		5.270	
Tuberculosis <i>K. M. Citron and D. J. Girling</i>		5.278	
Particular problems of tuberculosis in developing countries <i>M. Aquinas and D. Todd</i>		5.299	
Diseases caused by non-tuberculous mycobacteria <i>K. M. Citron and D. J. Girling</i>		5.303	
Leprosy (Hansen's disease. Hanseniasis) <i>M. F. R. Waters</i>		5.305	
Mycobacterium ulcerans infection <i>M. F. R. Waters</i>		5.314	

Actinomycosis <i>R. G. Mitchell</i>	5.315	Toxocara and visceral larva migrans <i>D. R. Bell and M. J. Clarkson</i>	5.553
Nocardiosis <i>R. G. Mitchell</i>	5.317	Angiostrongyliasis <i>S. Punyagupta</i>	5.555
Spirochaetes		Gnathostomiasis <i>P. Suntharasamai</i>	5.558
Rat bite fevers <i>D. A. Warrell</i>	5.319	Cestodes	
Borrelia infections <i>D. A. Warrell</i>	5.320	Hydatid disease <i>A. J. Radford</i>	5.561
Lyme disease <i>W. Burgdorfer</i>	5.324	Gut cestodes <i>V. Zaman</i>	5.566
Leptospirosis <i>V. Sitprija</i>	5.327	Diphyllobothriasis and sparganosis <i>S. Y. Cho</i>	5.569
Non-venereal treponemes: yaws, endemic syphilis, and pinta <i>P. L. Perine</i>	5.331	Trematodes	
Listeria <i>R. Hurley</i>	5.335	Schistosomiasis <i>K. S. Warren</i>	5.571
Legionnaires' disease <i>J. O'H. Tobin</i>	5.337	Liver fluke diseases of humans <i>T. Harinasuta and D. Bunnag</i>	5.577
Rickettsial diseases <i>T. E. Woodward</i>	5.341	Lung flukes (paragonimiasis) <i>T. Harinasuta, D. Bunnag, and D. A. Warrell</i>	5.586
Scrub typhus fever and sennetsu rickettsiosis <i>Kyaw Win</i>	5.353	Intestinal trematodiasis <i>T. Harinasuta and D. Bunnag</i>	5.589
Chlamydial infections <i>S. Darougar, M. A. Monnickendam, and J. D. Trehanne</i>	5.355	Lesser known nematodes causing infection in humans	
Mycoplasmas <i>D. Taylor-Robinson</i>	5.366	<i>V. Zaman</i>	5.592
Bartonellosis <i>E. A. Llanos-Cuentas and D. A. Warrell</i>	5.373	Non-venomous arthropods <i>A. J. Radford</i>	5.595
'Newer' and lesser known bacteria causing infection in humans <i>R. G. Mitchell</i>	5.376	Pentastomiasis (porocephalosis) <i>D. A. Warrell</i>	5.603
Sexually transmitted infections		Infectious disease syndromes	
Syphilis <i>G. W. Csonka</i>	5.386	Pyrexia of uncertain origin <i>P. B. Beeson</i>	5.605
Granuloma inguinale (donovanosis) <i>P. L. Perine</i>	5.403	Septicaemia <i>P. A. Murphy</i>	5.608
Chancroid <i>P. L. Perine</i>	5.405	Infection in the compromised host <i>C. Bunch</i>	5.614
Lymphogranuloma venereum <i>P. L. Perine</i>	5.407	Possible infectious diseases	
Gonorrhoea <i>G. W. Csonka</i>	5.409	Sarcoidosis <i>J. G. Scadding</i>	5.623
Genital candidiasis <i>G. W. Csonka</i>	5.415	Whipple's disease <i>H. J. F. Hodgson</i>	5.636
Genital warts <i>G. W. Csonka</i>	5.417	Cat scratch disease <i>C. M. P. Bradstreet and D. A. Warrell</i>	5.637
Clinical approach to non-gonococcal urethritis <i>G. W. Csonka</i>	5.419	Benign myalgic encephalomyelitis <i>W. B. Matthews</i>	5.639
Clinical approach to pelvic inflammatory disease <i>G. W. Csonka</i>	5.422		
Venereologists' approach to Reiter's disease <i>G. W. Csonka</i>	5.426		
Venereologists' approach to herpes simplex infection <i>G. W. Csonka</i>	5.432		
Epididymitis <i>G. W. Csonka</i>	5.434		
Infections in homosexual men <i>W. E. Stamm and A. Rompalo</i>	5.435		
Bacterial vaginosis (<i>Gardnerella vaginalis</i> vaginitis) <i>G. W. Csonka</i>	5.445		
Fungal infections (Mycoses) <i>R. J. Hay and D. W. R. MacKenzie</i>	5.447		
Protozoa			
Amoebic infections <i>R. Knight</i>	5.466		
Malaria <i>D. J. Bradley, C. I. Newbold, and D. A. Warrell</i>	5.474		
Babesia <i>T. K. Ruebush II</i>	5.502		
<i>Pneumocystis carinii</i> <i>W. T. Hughes</i>	5.504		
Toxoplasmosis <i>W. Kwantes</i>	5.506		
Cryptosporidiosis, sarcocystosis, isosporiasis, and rare protozoal infections <i>V. Zaman</i>	5.509		
Giardiasis and balantidiasis <i>S. G. Wright</i>	5.512		
<i>Blastocystis hominis</i> <i>D. A. Warrell</i>	5.514		
African trypanosomiasis <i>B. M. Greenwood</i>	5.515		
American trypanosomiasis			
Chagas' disease <i>P. D. Marsden</i>	5.520		
Trypanosoma rangeli <i>P. D. Marsden</i>	5.524		
Leishmaniasis <i>A. D. M. Bryceson</i>	5.524		
Trichomoniasis <i>G. W. Csonka</i>	5.532		
Nematodes			
Filarial infections and diseases <i>B. O. L. Duke</i>	5.533		
Guinea worm disease (dracunculiasis or dracontiasis) <i>B. O. L. Duke</i>	5.543		
Hookworm and strongyloides <i>P. A. J. Ball</i>	5.544		
Pathogenic, free-living nematodes (order Rhabditida) <i>D. A. Warrell</i>	5.548		
Other gut nematodes <i>V. Zaman</i>	5.548		
		SECTION 6. Chemical and physical injuries, climatic and occupational diseases	
		Poisoning with drugs and chemical substances	
		Introduction and epidemiology <i>R. Goulding, J. A. Vale, and T. J. Meredith</i>	6.1
		General principles in the management of acute poisoning <i>G. N. Volans and A. T. Proudfoot</i>	6.2
		The role of the laboratory in acute poisoning <i>G. N. Volans and B. Widdop</i>	6.8
		Poisoning from chemicals <i>R. Goulding</i>	6.9
		Poisoning from metals <i>G. Kazantzis</i>	6.14
		Poisoning from household products <i>R. Goulding</i>	6.16
		Poisoning caused by analgesic drugs <i>T. J. Meredith, J. A. Vale, and A. T. Proudfoot</i>	6.18
		Poisoning from antidepressants, hypnotics, antihistamines, and anticonvulsants <i>A. T. Proudfoot, T. J. Meredith, and J. A. Vale</i>	6.24
		Poisoning from cardiovascular drugs <i>T. J. Meredith, J. A. Vale, and A. T. Proudfoot</i>	6.31
		Poisoning caused by respiratory drugs <i>J. A. Vale, T. J. Meredith, and A. T. Proudfoot</i>	6.36
		Poisoning caused by drugs acting on the gastrointestinal system <i>J. A. Vale, T. J. Meredith, and A. T. Proudfoot</i>	6.37
		Poisoning by haematinics <i>A. T. Proudfoot and J. A. Vale</i>	6.38
		Poisoning from miscellaneous drugs <i>T. J. Meredith and J. A. Vale</i>	6.39
		Poisoning by alcohols and glycols <i>J. A. Vale, T. J. Meredith, and A. T. Proudfoot</i>	6.41
		Poisoning from hydrocarbons <i>J. A. Vale, T. J. Meredith, and A. T. Proudfoot</i>	6.44
		Poisoning caused by inhalation agents <i>T. J. Meredith, J. A. Vale, and A. T. Proudfoot</i>	6.53
		Poisoning in conflict <i>F. W. Beswick and R. L. Maynard</i>	6.59

Venoms and toxins of animals and plants

- Injuries, envenoming, poisoning, and allergic reactions caused by animals *D. A. Warrell* 6.66
 Poisonous plants and fungi *L. G. Goodwin* 6.85

Environmental extremes

- Heat *W. R. Keatinge* 6.92
 Drug-induced increases of body temperature *W. I. Cranston* 6.93
 Cold and drowning *W. R. Keatinge* 6.94
 Diseases of high terrestrial altitudes *D. Rennie* 6.99
 Aerospace medicine *F. S. Preston* and *D. M. Denison* 6.106
 Diving medicine *D. M. Denison* 6.120
 Lightning and electric shock *B. A. Pruitt* and *A. D. Mason* 6.126
 Radiation *R. J. Berry* 6.130
 Noise *D. H. Glaister* 6.135
 Air pollution *P. J. Lawther* 6.137

Occupational health

- Occupational diseases *G. Kazantzis* 6.143
 Accident prevention *R. T. Booth* 6.161
 Podoconiosis (non-filarial endemic elephantiasis of the lower legs) *E. W. Price* 6.165

SECTION 7. Principles of pharmacology and therapeutics

- A. M. Breckenridge* and *M. L'E. Orme* 7.1

SECTION 8. Nutrition

- Introduction *R. Smith* and *W. P. T. James* 8.1
 Biochemical background *R. Smith* and *D. H. Williamson* 8.4
 Severe malnutrition *A. A. Jackson* and *M. H. N. Golden* 8.12
 Anorexia nervosa *G. F. M. Russell* 8.29
 Metabolic effects of anorexia *J. G. G. Ledingham* 8.33
 Obesity *W. P. T. James* 8.35
 Special nutritional problems *R. Smith* 8.51
 Diseases of overnourished societies and the need for dietary change *J. I. Mann* 8.58

SECTION 9. Metabolic disorders

- Inborn errors of metabolism: general aspects *R. W. E. Watts* 9.1
 Inborn errors of carbohydrate metabolism *R. W. E. Watts* 9.4
 Inborn errors of fructose metabolism *H. F. Woods* 9.9
 Inborn errors of amino acid and organic acid metabolism *R. W. E. Watts* 9.11
 Amino acid transport defects *R. W. E. Watts* 9.27
 Lysosomal storage diseases *R. W. E. Watts* 9.31
 Primary hyperoxaluria *R. W. E. Watts* 9.41
 Acatlasia *R. W. E. Watts* 9.43
 α_1 -Antitrypsin deficiency *R. W. Carrell* 9.44
 Wilson's disease (hepatolenticular degeneration) *J. M. Walshe* 9.47
 Diabetes mellitus *T. D. R. Hockaday* and *K. G. M. M. Alberti* 9.51
 Hypoglycaemia *R. C. Turner* 9.102
 Disorders of lipid transport *B. Lewis* 9.108
 Disorders of purine metabolism *G. Nuki* 9.123
 Porphyrin metabolism and the porphyrias *A. Goldberg*, *M. R. Moore*, *K. E. L. McColl*, and *M. J. Brodie* 9.136
 Amyloidosis *M. B. Pepys* 9.145

The acute phase response and C-reactive protein

- M. B. Pepys* 9.157

Disturbances of acid-base homeostasis

- R. Cohen* and *H. F. Woods* 9.164

Metabolism and exercise

- E. A. Newsholme* 9.175

Metabolic effects of accidental injury and surgery

- R. Smith* 9.180

SECTION 10. Endocrine disorders

- Introduction *P. C. B. MacKinnon* 10.1
 Pituitary and hypothalamic disorders *R. Hall* 10.7
 Thyroid disorders *R. Hoffenberg* 10.30
 Thyroid disorders in the Far East *R. T. T. Young* and *K. S. L. Lam* 10.48
 Disorders of calcium metabolism *J. A. Kanis* 10.51
 Adrenocortical diseases *C. W. Burke* 10.69
 Disorders of the reproductive systems
 The female *D. R. London* 10.84
 The male *D. R. London* 10.95
 Intersex *D. R. London* 10.105
 Puberty *D. R. London* 10.106
 The breast *D. R. London* 10.108
 Endogenous opioid peptides *T. A. Howlett* and *L. H. Rees* 10.111
 Endocrine manifestations of non-endocrine disease *R. I. S. Bayliss* 10.117

SECTION 11. Reproductive medicine

- Benefits and risks of oral contraceptives *M. P. Vessey* 11.1
 Hypertension in pregnancy *C. W. G. Redman* 11.4
 Renal disease in pregnancy *G. W. G. Redman* and *J. G. G. Ledingham* 11.9
 Systemic lupus erythematosus and related disorders in pregnancy *C. W. G. Redman* and *M. Byron* 11.10
 Heart disease in pregnancy *C. W. G. Redman* and *P. Sleight* 11.12
 Thromboembolism in pregnancy *M. de Swiet* 11.14
 Endocrine disorders in pregnancy *C. W. G. Redman* and *R. Hall* 11.17
 Diabetes in pregnancy *C. W. G. Redman* and *T. D. R. Hockaday* 11.21
 Chest diseases in pregnancy *M. de Swiet* 11.27
 Blood disorders in pregnancy *E. A. Letsky* and *C. W. G. Redman* 11.31
 Neurological disorders and pregnancy *C. M. Wiles* and *C. W. G. Redman* 11.35
 Nutrition in pregnancy *D. M. Campbell* and *F. E. Hytten* 11.40
 Infection in pregnancy *R. Hurley* 11.44
 Prescribing in pregnancy *N. J. White* 11.51

SECTION 12. Gastroenterology

- Introduction *D. P. Jewell* 12.1
 Methods for investigation of gastrointestinal diseases
 Endoscopy *D. P. Jewell* 12.1
 Radiology *D. J. Nolan* and *E. W. Fletcher* 12.2
 Computerized tomography *R. Dick* 12.7

Liver biopsy <i>R. Wright</i>	12.9	SECTION 13. Cardiovascular disease	
Pancreatic function tests <i>J. M. Braganza</i>	12.12	Physiological considerations	
Symptomatology of gastrointestinal disease		Biochemistry and cellular physiology of heart muscle and membranes <i>P. A. Poole-Wilson</i>	13.1
Introduction <i>D. P. Jewell</i>	12.15	Clinical physiology of the normal heart <i>D. E. L. Wilcken</i>	13.7
Disorders of swallowing <i>D. P. Jewell</i>	12.15	Clinical assessment of cardiac function	
Vomiting <i>D. P. Jewell</i>	12.16	The chest X-ray in heart disease <i>R. S. O. Rees</i>	13.16
Abdominal pain <i>D. P. Jewell</i>	12.17	The electrocardiogram <i>D. J. Rowlands</i>	13.21
Diarrhoea <i>L. A. Turnberg</i>	12.18	Echocardiography <i>D. G. Gibson</i>	13.34
Constipation <i>D. P. Jewell</i>	12.20	Nuclear techniques <i>D. J. Rowlands</i>	13.41
Gastrointestinal bleeding <i>D. P. Jewell</i>	12.21	Magnetic resonance imaging and spectroscopy <i>B. Rajagopalan</i>	13.47
The mouth and salivary glands <i>T. Lehner</i>	12.23	Cardiac catheterization <i>G. A. H. Miller</i>	13.49
Disorders of motility <i>D. L. Wingate</i>	12.37	Phonocardiography and mechanocardiography <i>H. Kesteloot</i>	13.53
Hormones and the gastrointestinal tract <i>S. R. Bloom, R. G. Long and J. M. Polak</i>	12.52	Computerized tomographic scanning of the heart <i>M. J. Lipton</i>	13.60
The regulation of gastric secretion in humans <i>E. L. Blair</i>	12.61	Symptoms of heart disease	
Peptic ulcer <i>J. J. Misiewicz and R. E. Pounder</i>	12.64	Dyspnoea <i>A. Guz</i>	13.74
Gastritis <i>K. B. Taylor</i>	12.77	Chest pain <i>W. Somerville</i>	13.76
Immune disorders A: <i>D. B. Webster</i>	12.87	Oedema <i>J. G. G. Ledingham</i>	13.81
Mechanisms of absorption <i>D. S. Parsons</i>	12.92	Heart failure	
Malabsorption <i>M. S. Losowsky</i>	12.98	Heart failure: ventricular disease <i>D. G. Gibson</i>	13.84
Postinfective malabsorption (including 'tropical sprue') <i>G. C. Cook</i>	12.115	Treatment	
Crohn's disease <i>D. P. Jewell</i>	12.121	Diuretics <i>J. G. G. Ledingham</i>	13.98
Ulcerative colitis <i>S. C. Truelove</i>	12.126	Digitalis <i>J. K. Aronson</i>	13.101
Diverticular disease <i>M. A. Eastwood</i>	12.133	Vasolidators <i>K. Chatterjee</i>	13.105
Congenital abnormalities of the gastrointestinal tract <i>V. M. Wright and J. A. Walker-Smith</i>	12.137	Catecholamines and their derivatives <i>P. Foëx and A. Fisher</i>	13.111
Tumours of the gastrointestinal tract <i>M. L. Clark, A. B. Price, and C. B. Williams</i>	12.146	Cardiac transplantation <i>T. A. H. English</i>	13.115
Vascular and collagen disorders <i>G. Neale</i>	12.158	Cardiac arrhythmias <i>D. H. Bennett</i>	13.117
Infections of the gastrointestinal tract <i>A. M. Tomkins</i>	12.164	Antiarrhythmic drugs <i>D. H. Bennett</i>	13.132
The appendix, peritoneum, and omentum <i>E. C. G. Lee</i>	12.178	Pacemakers <i>R. Sutton</i>	13.136
Diseases of the pancreas <i>K. G. Wormsley</i>	12.183	Atheroma: vessel wall and thrombosis <i>C. N. Chesterman</i>	13.138
Diseases of the gall bladder and biliary tree <i>J. A. Summerfield</i>	12.198	Ischaemic heart disease	
Jaundice <i>E. Elias</i>	12.206	Epidemiology of ischaemic heart disease <i>J. I. Mann and M. G. Marmot</i>	13.143
Acute hepatitis and fulminant hepatic failure <i>A. L. W. F. Eddleston</i>	12.213	Pathology of ischaemic heart disease <i>M. J. Davies</i>	13.154
Chronic hepatitis <i>H. C. Thomas</i>	12.221	Detection of ischaemic heart disease <i>R. Balcon</i>	13.156
Cirrhosis of the liver <i>R. Wright</i>	12.227	Myocardial infarction <i>B. L. Pentecost</i>	13.167
Primary biliary cirrhosis <i>R. Wright</i>	12.233	Peripheral arterial disease <i>P. J. Morris</i>	13.182
Portal systemic encephalopathy <i>R. Wright</i>	12.235	Takayasu's disease <i>K. Ishikawa</i>	13.193
Ascites and portal hypertension <i>N. McIntyre</i>	12.236	Specific heart muscle disorders <i>C. M. Oakley</i>	13.196
Alcoholic liver disease <i>R. Wright</i>	12.245	The cardiomyopathies <i>C. M. Oakley</i>	13.209
Drugs and liver damage <i>M. Davis</i>	12.248	Chagas' heart disease <i>D. S. Amorim</i>	13.230
Hepatic granulomas <i>P. R. Mills and R. I. Russell</i>	12.253	Congenital heart disease	
Liver tumours <i>I. M. Murray-Lyon</i>	12.256	The anatomy of congenital heart disease <i>R. H. Anderson and E. A. Shinebourne</i>	13.233
Infections of the liver <i>S. G. Wright</i>	12.260	Congenital heart disease in adults <i>J. Somerville</i>	13.246
Liver disorders in infancy and childhood <i>A. P. Mowat</i>	12.263	Rheumatic fever <i>J. M. Neutze</i>	13.277
Liver transplantation <i>R. Williams</i>	12.268	Valve disease <i>D. G. Gibson</i>	13.281
Miscellaneous disorders of the gastrointestinal tract and liver <i>D. P. Jewell</i>	12.271	Pericardial disease <i>D. G. Gibson</i>	13.304
Geographical variation in gastrointestinal disease		Left atrial myxoma <i>T. A. Traill</i>	13.312
Hepatitis B virus and primary cancer of the liver <i>B. S. Blumberg</i>	12.276	Infective endocarditis <i>B. Gribbin</i>	13.314
India <i>V. I. Mathan</i>	12.278	Cardiovascular syphilis <i>B. Gribbin</i>	13.325
Southeast Asia <i>V. Viranuvatti</i>	12.279	The pulmonary circulation	
Africa <i>G. Cook</i>	12.281	In health and disease <i>J. S. Prichard and G. de J. Lee</i>	13.326
		Pulmonary oedema <i>J. S. Prichard and G. de J. Lee</i>	13.334
		Pulmonary hypertension <i>G. de J. Lee</i>	13.342
		Cor pulmonale <i>J. S. Prichard</i>	13.350
		Pulmonary embolism <i>G. A. H. Miller</i>	13.355