Manual of Clinical Methods. P. S. Shankar. Oxford and India Book House, 66, Janpath, New Delhi 110 001. Third edition. 1992. 275 pp. Price: Rs 165.

"Oh! another book in clinical methods." A medical teacher is likely to exclaim when he is shown this book. He would rather welcome a treatise on an exotic topic. The reason is, many consider fundamentals of clinical methods to be a subject firmly entrenched and unchangeable, so that new manuals, they think, are redundant. To them, the advancing frontiers of medicine consist only of pathogenetic mechanisms, investigative techniques, therapeutic modalities and epidemiology. They forget that it is far more difficult to produce an attractive and authentic manual of clinical methods than a monograph on a specialized subject. It is in this context that the efforts of P. S. Shankar have to be evaluated.

How does one evaluate a manual of clinical methods? What criteria should it fulfil to be judged a useful one? It should provide step by step instructions with respect to the correct procedures in history taking and eliciting physical signs while drawing attention to the precautions to be taken. The detailed practical instructions must be of help to the user, be a student or a consultant, to examine a patient and record his observations. Since 90% of bedside skills are to be acquired by self-learning, the need for a hand book for ready reference is easily understandable. It is expected that the manual provide theoretical

basis of the tests employed in clinical examination, so that the student knows why he is carrying out a particular test and does not merely carry out a 'ritual'. An attempt at vertical 'integration' correlating anatomy, physiology and biochemistry would help students, fresh from the preclinical class, to comprehend the significance of various physical methods used in examining the patient. Similarly, brief sketches of diseases are to be given in the manual to help the student to easily interpret abnormal physical findings. A good manual would discuss disease conditions according to the order of commonness and also contain clear diagrams, explanatory flow charts, simple tables, as well as appealing and well reproduced clinical photographs. Authors of clinical manuals would do well to avoid controversial topics and to provide only clear concepts. Welcome additions are extra information like eponyms, historical anecdotes and brief descriptions of obsolete signs which represent favourite topics of some examiners. Above all, an ideal manual should motivate and inspire a medical student.

I have no hesitation to state that Shankar's manual fulfils all these criteria. A few examples deserve special mention. Seventy-five good clinical photographs of both common and rare clinical entities are included in the book. Elicitation of pupillary reflexes, testing of different muscles, testing joint sense, eliciting fluid thrill, examining for lymph node enlargement and Rinne's and Weber's tests are all well illustrated through line drawings and diagrams.

Clear instructions are given for common procedures like measurement of blood pressure, palpation of abdomen, elicitation of reflexes and examination of jugular venous pressure. Theoretical basis of physical signs such as loss of abdominal reflexes in pyramidal lesions, Austin Flint murmur and crepitations are explained well. Effective vertical integration is provided while discussing respiratory and gastrointestinal systems.

There are topics which are not often discussed in clinical manuals. These include quantification of clubbing, measurement of the position of umbilicus for diagnostic help, specifications for a sphygmomanometer, measurement of blood pressure in lower limbs, and blood pressure in arrhythmias, an original addition is to the '5 Fs' as causes for abdominal distention. Shankar has added 'fatal growth' to 'foetus', 'fat', 'fluid', 'flatus' and 'faeces'.

William Osler said: 'Medicine is to be learned only by experience and is not an inheritance. It cannot be revealed. Learn to see, learn to hear, learn to feel, learn to smell and to know that by practice alone can you become an expert.' The manual by Shankar is a ready reckoner and would foster learning by Oslerian ways. The book would be an asset and a welcome addition to the currently available family of manuals of clinical methods.

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