

The tone of the book is conversational. I found Jones' first-person, casual writing style thoroughly entertaining as well as educational. He presents the scientific material in an easily understandable manner and appears to have researched the topic thoroughly as one might expect of a competent, respected journalist. The pertinent facts are delivered to the reader in a forthright, complete presentation, always with candor and frequently with humor.

The author deals with the North American temperance mentality, which has historically impeded the dissemination of the medicinal effects of red wine. He speaks about the "entrenched opposition to alcohol in any form" in the United States and the reluctance of the FDA (and the medical community) to recognize any benefit from the substance.

Throughout the book the author addresses numerous issues relating to heart disease. In lay terminology, he describes the indicators of potential heart disease, pointing out the causes, incidence, and risk factors for disease development. Readers are logically led from the causes for heart disease into an outline of preventative measures that might be employed to avoid disease development. Along with the standard medical practice recommendations, including elimination of smoking, reducing cholesterol and hypertension by adopting a low fat diet, and increasing exercise levels, Jones also adds the suggestion for improving the diet by adding moderate consumption of red wine.

Contained within the first three chapters is the history behind the premise that wine is beneficial. The general properties of alcohol that produce a desirable therapeutic effect are enumerated in chapter four, in which components peculiar to red wine's medicinal effects are dissected and detailed. He describes the beneficial antioxidants—polyphenols, resveratrol, and quercetin—and how the flavonoids contained in the red grape skin are preserved in the alcohol then released to produce their positive effects when ingested. I was particularly pleased to note that the author expanded his topic to include a chapter on the potential benefits of wine as a preventative substance for other diseases including cancer, stroke, and hypertension.

From my insider's knowledge of the wine industry, I found the chapter dealing with identifying the "Wines that help most" to be for the most part accurate.

Another worthwhile section of this work is presented in the last two chapters, which discuss how to reasonably make use of this pleasurable form of medicine. It's a sensible approach to wine drinking "in moderation" that could well have been omitted or buried under an overly positive view of the substance, but Jones addresses the subject candidly with good sense.

Finally, the author concludes his work by unabashedly addressing all the most commonly raised questions and objections to this treatment method by devoting an entire chapter to resolving these questions. All the cards are on the table when he raises the question whether physicians *have a duty to advise* their patients of the potential benefits of taking a drink or two each day.

I believe a real benefit that can be derived from this work is that it will likely lure potential patients into reading it to justify and endorse one's love for wine consumption,

but it will also serve as a catalyst for educating patients in all aspects of cardiovascular disease.

This work is long overdue. It should be "required reading" for all physicians and all potential cardiovascular patients (all of us) who have a sincere interest in learning the best measures to promote heart health through moderate nutritional wine drinking. I highly recommend it.

*Thomas Fogarty, MD
Portola Valley, Calif.*

Band of brothers: Creators of modern vascular surgery
W. Andrew Dale; 1996; 511 pages.

I first met Andrew Dale in 1959 when I was a second-year resident in General Surgery. He came to Seattle to speak to the Seattle Surgical Society as a guest of J. Thomas Payne, who was then Chief of Surgery at the Veterans Administration Hospital. I had a discussion with him about the emerging field of "Vascular Surgery." I was very impressed with his obvious enthusiasm for this type of surgery. It was apparent to me that he was a disciple of detail and the need to do things right. In 1970 he held one of the first multidisciplinary meetings on arterial occlusive disease that I was privileged to attend. It is ironic that he was among the first in my view to invite an outsider such as Charles Dotter to talk about his new procedure. Perhaps he saw something that many others missed. Dr. Dale was an elegant spokesman for Vascular Surgery and remained one of the leaders in this field up until the end of his life.

He was truly a Southern gentleman. He like many in his book was in the right place at the right time. He worked hard at his profession and he was very successful. Why then would someone in the twilight of their surgical career, and in his case his life, undertake such a unique effort? The title of the book says a lot about why he decided to do this. The title comes from Shakespeare's *Henry V*. In that play, the English king speaking before the Battle of Agincourt proclaims, "We few, we happy few, we band of brothers; For he today who sheds his blood with me Shall be my brother." As Dr. Dale noted, Admiral Horatio Nelson also used the term "Band of Brothers" to refer to those captains who fought with him in the Battle of the Nile. Ernest K. Gann, the famed pilot and author, also used the words to describe the group of diverse characters who were joined together by common aspirations and goals.

Dr. Dale chose to interview some of the outstanding surgeons of the day who made major contributions to the field of Vascular Surgery. The choices were his, and he admitted to leaving some people out of the narration who others might think should have been included. This fact is acknowledged by both Dr. Dale and Drs. George Johnson and James DeWeese, who completed the task after Dr. Dale's death from leukemia in 1990. The names of those interviewed are well known to all of us. Their status as leaders in this field is not in doubt. However, it must be remembered that this is not a history of Vascular Surgery. It is a fascinating compilation of what went into molding the lives and careers of many of our leaders in vascular surgery. His Band of Brothers consisted of 37 surgeons.

For every book review and reviewer it is necessary to point out the strengths, as well as the weaknesses of such an

effort. In dealing with the latter first, this is not a historical treatise, such as John Fulton's *Life of Harvey Cushing*, which is a classic medical history of someone who made monumental contributions to the field of Neurosurgery. Reading this book will not provide the reader with such treatment. It is a series of self-portraits, with all the problems that such dialogue provides.

It is also important to realize that this work will be of little interest to those who do not know the surgeons who were interviewed. What then is the value of this effort? For me and I am sure for all who knew these surgeons, either up close or at a distance, will be fascinated by their tales and how and why they ended up where they did and some still are. The tales are full of examples (we used to call heroes) of individuals who helped these surgeons along their way. All who were interviewed were generous, in my view, in giving credit where credit was due. In some cases the views expressed were not particularly kind to some individuals. However, I was impressed by the candor of some of the interviewees.

Where will an effort such as this pay off? One of the missing elements in medicine today is a lack of interest in our historical record. My first chief, Dr. Henry Harkins, made sure that both the students and the residents appreciated those who preceded us. If we are fortunate enough to have someone, at some time, want to write a definitive history of this era, there is a lot of useful biographical information here to call on.

D. Eugene Strandness, Jr., MD
University of Washington
Seattle, Wash.

Glenn's thoracic and cardiovascular surgery

Arthur Baue, Alexander Geha, Graeme Hammond, Hillel Laks, and Keith Naunheim; Stamford, Conn.; 1996; Appleton & Lange; 2325 pages; \$325.

This is a well-established and classic surgical text that comes in a two volume set. The first volume deals with problems in general thoracic surgery, the second with congenital and adult cardiac diseases. With the explosive growth that has occurred in cardiac and thoracic surgery,

the five editors have selected section editors, who of course have special interest in their areas of expertise (i.e., thoracic, congenital, or acquired heart disease). This approach adds strength to this book as an outstanding reference text.

Volume 1, which covers general thoracic surgery, has all the standard chapters written by leaders in their field. This volume covers benign and malignant conditions of the lung and the esophagus as well as the usual fungal diseases. There is an excellent chapter dealing with Barrett's esophagus. Hiatal hernia repairs are covered, as well as the choices of operation for carcinoma of the esophagus. The edition has been expanded greatly on thoracoscopy and the use of thoracoscopic procedures for diagnosis and treatment of pulmonary and esophageal disease. Although there is a chapter covering bullous disease, it did not conclude any discussion concerning the current state of lung reduction surgery for pulmonary emphysema. Thoracic trauma is well covered. The illustrations are clear and are helpful.

The second volume covers congenital heart disease as well as surgery for acquired heart disease. Again, the editors have obtained contributions from leaders in their specific fields. All the cardiovascular diseases are well covered, along with the special sections updating valve reconstruction. The diseases of thoracic aorta are especially well presented. Once again, this volume has excellent illustrations that highlight the various techniques used to treat and correct congenital heart as well as acquired heart diseases.

It appears from the information furnished to this reviewer, the price of the two volume set is \$325. It is, I believe, worth the price. This is a book that I feel is mandatory for residents in cardiothoracic surgery, as well as practicing surgeons. It would serve more as a reference book for medical students. Thankfully, with more than 200 authors one is bound to have an author as a mentor, and therefore perhaps his student will be able to borrow his or her complimentary copy.

Walter Wolfe, MD
Duke University Medical Center
Durham, N.C.

BOOKS RECEIVED

The receipt of the books listed below is acknowledged. This listing is regarded as appropriate return for the courtesy of the sender. The books that are of particular interest will be reviewed and the review published as space permits.

Primer on cerebrovascular diseases

K. M. A. Welch, Louis Caplan, Donald Reis, Bo Siesjo, Bryce Weir; San Diego; 1997; Academic Press; 823 pages.

Long-term results of arterial interventions

Alain Branchereau, Michael Jacobs; Armonk, N.Y.; 1997; Futura; 328 pages; \$95.

Vascular diseases in neonates, infants, and children

Pierre Lasjaunias; Berlin; 1997; Springer-Verlag; 707 pages; \$239.

Phlebography and sonography of the veins

W. Hach, V. Hach-Wunderle; Berlin; 1997; Springer-Verlag; 268 pages; \$225.

Biomedical research: How to plan, publish, and present it

William Whimster; London; 1997; Springer-Verlag; 246 pages; \$24.95.

The internet for physicians

Roger Smith, Margaret Edwards; New York; 1997; Springer-Verlag; 145 pages; \$24.95.

The antiphospholipid syndrome

Asherton, Cervera, Piette, Shoenfeld; Boca Raton, Fla.; 1996; CRC Press; 339 pages.