

Too many notes

re medical students expected to read too many books? Or are their complaints as legitimate as those of the emperors who thought that the *Marriage of Figaro* had "too many notes"?

Some years ago an educator looked into the matter. He found that if students were indeed to read everything they were told to they would have no time left for even eating, sleeping, or washing. To avoid such an unsanitary disaster, the editor of the journal publishing these findings recommended cutting down on the length of prescribed reading lists, instructing students to do computer searches (which for this computer generation is like preaching to the choir), and getting them quite early on to scan regularly the pages of a general medical journal—though modesty or

haps concerns about a perceived conflict interest prevented him from suggesting which particular one.

There is of course no end of making books. Spending too much time with them may well be indicative of "sloth" or of "a weariness of the flesh." Whether fungus growing on their mouldering pages may induce hallucinations remains to be proved. But as long as 150 years

ago Peter Mere Latham suggested that doctors were too easily seduced by books, that true knowledge could be gathered only at the bedside, and that he had found most medical books puzzling, needlessly complex, often bad, and sometimes dishonest.

Other highly respected clinicians have also periodically suggested that practising doctors could waste much time reading about the unproved and the esoteric in medical journals, and would keep up to date better by reading a standard textbook from cover to cover every two years.

Some have suggested that you should not read too widely, but "read one book many times rather than many books once." "Beware of the man of one book," says an old Latin proverb. Unfortunately, many modern text-books are still, as in Latham's time, "needlessly complex." Some books expound greatly on pathogenesis and physiology but are thin on practical diagnosis and treatment. Some are written by relatively junior people, who sometimes are dogmatic but lack the experience of years. Others, written by academicians, perhaps bear out the paradox that those who see patients are too busy

to write and those who write much are too busy to see patients.

Furthermore, the recommendations made in books sometimes diverge from the realities of medical practice, where experienced doctors take shortcuts that might be looked at askance



in academia. Some books are out of date by the time they come out in print, contain much stuff copied from earlier sources, and are written by a multitude of contributors, lacking in unity and containing much repetitious material. Then there are others that are generally well written, contain some admirable chapters, are beautifully bound, but are huge, heavy, and hard to read. Such books indeed have too many notes.—GEORGE DUNEA, attending physician, Cook County Hospital, Chicago, USA