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Reading binges

Nicholas E Davies

If there is nothing to read in heaven, I am not sure I want to go.

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In my practice of internal medicine in Atlanta, Georgia, I hear the problems and concerns of many people. Over the past 30 years they seem to have about them a remarkable sameness. A child is doing poorly in school, or worse, she is both single and pregnant, or worse yet, he is experimenting with drugs; a husband or a wife is drinking too much; an elderly parent living alone is causing great guilt in the daughter; a job is boring; a spouse is boring; life is boring. The problems are endless, the problems are ageless.

Should I visit my internist and should she ask me about which of my problems consumed the greatest amount of thought, I would be too embarrassed to answer. Indeed, I would probably lie. Yet the truth is that I spend an inordinate amount of time thinking about what I shall read during my summer vacation. It is a major concern. This immediately says several things. Firstly, it says that I do not have many serious problems, which is true. Secondly, it says that I must put great stock in reading, also true. Thirdly, it says that I must be some sort of reading nut, a bibliomaniac of sorts—a debatable topic in my family.

In an address to the Medical Library Association in Belfast in 1909, William Osler quoted Aristotle: "In the case of our habits we are only masters of the beginning, their growth by gradual stages being imperceptible, like the growth of a disease." Osler then added, "And so it is with the habit of reading, of which you are only master at the beginning—once acquired, you are its slave." It has come to pass during the past 19 years that I have developed the wonderful habit of annual reading binges. Despite being an avid reader all my life, there are literally hundreds, perhaps thousands of books that I want to read but never seem to get around to. Therefore, each summer I reserve a week to acknowledge my bondage to reading and to indulge myself in the pleasure of becoming immersed in the world's great literature.

My affliction, if it can be called that, doubtlessly began in utero with the passage of some sort of neurotransmitter across the placenta into my brain's reading centre. The binges themselves began in childhood. My mother, a woman of unquestionable probity, swears that she read *Lindberg the Lone Eagle* to me over a thousand times. Reading was indelibly impressed on the DNA in my reading centre during my ninth year, when I had osteomyelitis and was bedridden for several months. Single books were not enough. My parents turned to series—*Tom Swift*, *The Rover Boys*, *The Little Colonel*, the Zane Gray books, and many others.

A marvellous English teacher in the eighth grade (my 13th year) abetted my love of reading. She added one point to her students' final grade for each book they read and reviewed for her above the required 10. When I had read 29 she declined to give me more than 99 (out of a possible 100). "No one is perfect," she noted acerbically. She approached it.

The reading required in college considerably blunted my reading sprees, yet I do recall having a few during summer holidays. One notable binge occurred at the age of 16, when I read *War and Peace* in three days, not bad for a slow reader. But I remember that particular binge not so much for reading a wonderful novel as for realising for the first time how much better it is to read a complex book in its entirety, at one sitting, rather than reading it spread out over several weeks.

Another well remembered binge occurred at the age of 19, just at the end of the second world war, on a liberty ship loaded with wheat sailing from Portland, Oregon, to Rouen. I was the purser/pharmacist mate on the SS *Eli Whitney*, going to sea (shipping out, as we said) for the first time. Except for opening the ship's store for an hour each day, I had little to do at sea but treat minor injuries as they occurred in our 42 man crew. Because I was reared in the mountains of Virginia my first week aboard ship was spent exploring the vessel and enjoying the beautiful Pacific Ocean. After passing through the Panama Canal we docked at Colón on the Atlantic side. Whereas now I would probably seek out an English language bookstore, I then joined my shipmates in a nearby bar and drank rum and cola to near oblivion, leaving me with a monumental hangover that I still remember. With little to do for the next two weeks en route to France, I read day and night, taking time out only to eat and to open the ship's store. By the 10th day I had devoured most of the ship's small collection of books. I especially remember *The Scarlet Letter*, Hawthorne's "somber romance of conscience, sin and concealed guilt" that was set in seventeenth century New England and Charles Reade's *The Cloister and the Hearth*, a convoluted novel about life in the late fifteenth century that contains within it the apocryphal story of Erasmus's parentage. Unfortunately, my absence on deck prompted our Queeg-like captain, a former skipper of a garbage scow from San Francisco who had been pressed into sea duty during wartime, to inquire if I had fallen overboard. When told that I had spent my time reading in my cabin he called me to the bridge and in front of the mate and coxswain yelled in my face, "Goddamn it, purser, I want to see your goddamn ass on deck three times a goddamn day. Sailors don't spend their goddamn time reading goddamn books." Thus ended a notable binge.

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Reading Woman with Parasol by Henri Matisse

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As in college, the reading requirements in medical school and residency training put an end to pleasure-reading binges and substituted science-reading binges. Much of the science reading was pleasurable, of course, but it was mandatory. Typically, these binges came before examinations and were self limiting. One that seemed to my wife and family never to end began nine months before I was scheduled to take the certifying examinations of the American Board of Internal Medicine. During that time I tried to read all the issues for the past five years of *Annals of Internal Medicine*, *New England Journal of Medicine*, and *American Journal of Medicine*. I do not recall if I was successful in reading them all, but I passed the tests and managed also to escape a divorce.

My modern reading binges began only after I had reared my three children through puberty, established a successful practice so that I could take short vacations each summer, usually at a beach, and lost that compulsion to know more internal medicine than any other doctor in Atlanta. This happened almost 20 years ago. I had forgotten how to read for pleasure until a neighbour at the beach on Hilton Head Island, South Carolina, lent me *A Passage to India*. The Marabar Caves first entranced, then engulfed me. It was my passage back to pleasure reading. And, though I kept the *New England Journal* and *BMJ* at my bedside, they gradually piled higher and higher until my wife called a halt. I soon learned to scan journals then throw them away and use the journals in my hospital library for definitive reference.

Unquestionably, my most emotional reading binge happened in Abidjan, Ivory Coast, in 1975. My wife and I had visited Nigeria and Zaire for three weeks and were on our way home, resting and relaxing for a few days on west Africa's riviera. She became ill with gastroenteritis and I was nursing her in the magnificent Intercontinental Hotel. Fortunately, I had brought along a number of books. As she suffered through three days of nausea and diarrhoea, I ploughed through my books, coming at last to Paton's *Cry, the Beloved Country*. It was almost too much for me emotionally. Having just seen the abject hunger and poverty, the masses of uneducated humanity, and the miserable conditions in which many of the people lived in central and west Africa, reading about the miseries of an elderly, lovable black preacher in South Africa was almost more than I could bear. So I would read until tears made the words unreadable then go swimming in the hotel's enormous pool, have a cold west African beer (arguably the best in the world), and return to my nursing and reading. We left the Ivory Coast neither rested nor relaxed.

The reading binges have now become rather stereotyped. Our family goes to a beach most summers and each year I ask myself, "With only a week, what shall I read?" This question gained considerable importance while having dinner one evening in Atlanta with Stephen Lock, editor of this journal. We were talking about reading for pleasure and I said that I usually stayed with the classics or with books that seemed likely to become classics. He agreed with this plan and said something to this effect, "Yes, Nicholas, you might have five hundred more books that you can read in your lifetime. Stick with the best." I have followed that disquietingly pragmatic advice ever since.

Last year's binge never really developed because we spent our week at the beach with our grandchildren. With four children under 6 years old in the house my wife and I decided we should take up golf in self defence. There are still a few things more important than reading, preserving one's sanity being one of them.

How about this year's binge? Alas, as I write this my family leaves for the beach without me. I have had to postpone my vacation to stay with a patient who is near death. Last night he had ventricular fibrillation after a colostomy earlier in the day. His arrhythmia has been corrected, but he now lies mute, terrified, an endotracheal tube in place. I cannot leave just yet. But when I join my family with me will go Wilford's *The Mapmakers* on the recommendation of my mother and brother, Dawkin's *The Blind Watchmaker*, which I have read about in this journal, the *Complete Essays of Montaigne* as translated by Frame, and Dickens's *Our Mutual Friend*. That should about do it. And with these will go the unabridged *Random House Dictionary of the English Language*, *The Reader's Encyclopedia* by William Rose Benét, a large beach umbrella, and a six pack of very cold lager. I can hardly wait.

ANY QUESTIONS

What evidence is there to support the standard advice on datasheets that a history of deep venous thrombosis with or without embolism is an absolute contraindication to postmenopausal hormone replacement treatment?

Oestrogens have several effects on the clotting mechanism. In particular they increase coagulation factors VII, IX, and X complex and reduce the anticoagulant factors antithrombin III and anti Xa. Reduction of antithrombin III in particular is known to increase the risk of thromboembolism. There is no doubt that oral contraceptives increase the risk of venous thromboembolism and that this depends on the dose

of oestrogen. Epidemiological studies, however, have not shown a convincing association between postmenopausal oestrogen replacement and thromboembolism. It seems likely that the risk of venous thromboembolism with postmenopausal oestrogens is small in normal women but it may be increased in those with other predisposing factors such as a history of deep vein thrombosis.—LINDA BEELEY, consultant clinical pharmacologist, Birmingham

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