care are also considered in detail, dealt with from an American perspective.

This book is recommended to the aspirant intensivist, providing useful, and at times, controversial views on current paediatric management.

IAN MACONCHIE
Research fellow

Childhood and Adolescent Diabetes. Edited by Christopher Kelnar. (Pp 633; £85 hardback.) Chapman and Hall Medical, 1995. ISBN 0-412-48610-5.

A new comprehensive textbook on childhood and adolescent diabetes has been long overdue and Dr Chris Kelnar and his many coauthors have produced what must approach the definitive text for 1995.

The text and clinical approach is predominantly British with 35 of the 46 chapters written by UK authors. The contributor list is impressive and lengthy, totalling 70 different contributors, 46 UK based and 24 prominent investigators and clinicians from the United States, Australia, Denmark, and Israel. Contributions come not only from scientists and clinicians but also from the ranks of highly experienced specialist nurses, dietitians, and those involved in the general welfare of the child with diabetes.

Diabetes has for a long time been the Cinderella of paediatric endocrinology, looked upon by the endocrine scientists as too clinically based to be interesting. This book serves to redress the balance and puts paediatric diabetes on a firm scientific base. It achieves a good balance between the hard endocrine 'science' (the deranged metabolism of diabetes, the immunogenetic aetiopathogenesis, and the pharmacology) and the 'art' of diabetes management (the family/child/clinician interaction, the psychology, the practical aspects of care and support).

The book is divided into six sessions though each is without a clear subheading. The first covers the basics of energy homeostasis and important chapters on normal physical and psychological growth and development through childhood and adolescence and their relation and interaction with diabetes. The second section outlines the history and current knowledge of the aetiopathogenesis of diabetes. The third section, which is perhaps the most conventional section, brings to the reader a wealth of clinical knowledge and experience on the management of diabetes from a wide variety of experienced clinical practitioners and contains important sections on eating disorders and other psychological aspects. Clear guidelines on many management aspects are given without being too didactic and allowances made for the debate between various management options. Part four details the interaction of the child with diabetes and its family and surroundings. Parts five and six provide fascinating chapters on current knowledge on screening, prevention, complications and their avoidance, and also new strategies for future treatment and management. The book finishes with two appendices of the St Vincent and ISPAD declarations.

It is an essential read for all those involved in childhood diabetes management. With such a large number of contributors, overlap is inevitable but has been kept to a very acceptable minimum by the editor. The style is impressively uniform, easy to read, and

very well referenced. Progress in the immunogenetic aspects of this disease is rapid and inevitably it will date quickly. I trust the authors are already working on the next edition.

IAN G JEFFERSON
Consultant paediatrician

Intestinal Immunology and Food Allergy. Nestle Nutrition Workshop Series. Vol 34. Edited by Alain L de Weck and Hugh A Sampson. (Pp 306; \$75 hardback.) Raven Press, 1995. ISBN 0-7817-0250-X.

In the preface to this volume Hugh Sampson anticipates that the reader will gain an appreciation of those '...views and recommendations which are based on substantial scientific information, and [of those] which remain highly speculative'. It is soon evident (if we didn't already know) that despite advances in immunology and numerous clinical studies, speculation in the field of 'food allergy' is rife.

The first chapters provide succinct overviews of two subjects fundamental to any understanding of the pathogenesis of food allergy – the ontogeny of mucosal immunity, and the mucosal uptake of macromolecules. Then follows a review of *in vitro* studies of neural/immune interactions. This is narrow in its focus, and leads only to a conclusion that '...under some circumstances stimulation of nerves can ... promote the equivalent of allergic manifestations ...'. The next chapter is in more rational sequence, being intended as a discussion of the characteristics of food allergens. Unfortunately, this largely focuses on observations related to cross reactivity between allergens. We are told of cross reactions between birch, pear, and peach allergens, but the clinical correlates of such observations, if any, are not mentioned.

A chapter on intestinal hypersensitivity makes clear our limited understanding of the immunopathology of coeliac disease, let alone even more poorly characterised gut disorders. The double blind placebo controlled food challenge (DBPCFC) is central to the investigation of food allergy, and a chapter on this subject provides clear and practical advice. The essential point is made that just a few foods (nuts, milk, egg, wheat soy, fish, and shellfish) are responsible for the vast majority of DBPCFC confirmed reactions. Hugh Sampson reviews the non-intestinal manifestations of food hypersensitivity in some detail, and emphasises the high incidence and variety of allergic reactions in patients with atopic eczema. Then follows a somewhat difficult and confusing chapter on the controversial role of food allergy in infant 'colic'. Here, the problems of defining the clinical entity, let alone identifying an allergic aetiology, are all too obvious.

The second half of the book focuses on efforts at prevention and treatment. There are excellent discussions of the phenomenon of 'oral tolerance' – the induction of systemic antigen specific non-responsiveness by enteral administration of proteins. Finally, a series of chapters addresses the complex area of clinical trials aimed at preventing allergic disease in childhood. Attempts have been made to reduce allergen exposure by maternal dietary restriction during pregnancy and lactation, breast feeding, the use of protein hydrolysates, and the delayed induction of solids. In contrast, some studies have attempted to induce oral tolerance by early exposure to potential allergens. Although a consensus was not

apparent, the general view to emerge was that breast feeding, and possibly maternal/infant dietary restrictions, may delay or prevent food allergy. Given the unsatisfactory design of many clinical studies, controversy will certainly continue in this area. The absence of objective clinical and immunological endpoints is a particular problem.

Inevitably this is a difficult book, bringing into sharp focus the fundamentally different challenges which face laboratory and clinical investigators. In his concluding remarks, Alain de Weck makes the telling comment that he has never attended a meeting about allergy '...so peaceful, so polite, so nice!' This is not a textbook for the busy clinician seeking a succinct overview of 'the facts'.

M STEPHEN MURPHY
Senior lecturer in paediatrics and child health and consultant paediatric gastroenterologist

How to Keep a Clinical Confidence. A Summary of Law and Guidance on Maintaining the Patient's Privacy. By Bryden Darley, Antony Griew, Kathryn McLoughlin, John Williams. (Pp 103; £9.95 paperback.) HMSO, 1994. ISBN 0-11-701832-5.

One assumes a book on keeping a clinical confidence could be aimed at health professionals. The objective could be to enable them to develop their skills in professional practice within the framework of the law. The introduction describes for whom the book is intended but I found the description of the intended reader less than helpful, and if it is aimed at health professionals it is deficient in achieving its aim.

What is very useful is the gathering together of a number of sources, from statute, guidance and case law, dealing with the issue of confidentiality in a wide variety of circumstances. These range through issues such as AIDS, suspicion that a crime has been committed, child confidentiality, and mental incapacity. It also supplies a helpful bibliography. However, the book does little else than gather information. There is no comprehensive discussion of any difficult issues arising out of the various sources. Specifically, in dealing with some important issues arising out of case law, description is so brief it is difficult to discern what the case decided. In dealing with the issue of child confidentiality the summary is so brief as to be positively misleading. Discussing the extremely important decision of the House of Lords in *Gillick v Norfolk and Wisbech Area Health Authority*, the authors rightly state that the actual decision was concerned with the giving of contraceptive advice. However, despite it being widely accepted that the remit of the decision is not confined to this single issue, the book subheads the discussion: 'People Under 16 and Contraception', and gives the impression that the *Gillick* decision has this narrow application. Furthermore, it does not even go on to consider the question of refusal of treatment by a minor.

The 'guidance' is often so vague as to leave the reader entirely unclear as to what is being said. For example, in discussing sharing information among colleagues this advice is proffered: 'Where it is necessary to share information between members of a health care team, it is again up to the individual clinician to make a decision as to what information he is willing to disclose'. Even more bafflingly, when discussing the keeping of medical records and sharing information in a

health care team the book states: 'The different members of the team (eg, a social worker, or a home help) may have different loyalties, and a doctor should exercise some caution when asked to participate in case conferences'. This worrying statement implies, to me, that a doctor should not necessarily reveal child abuse when attending a case conference.

The appendices set out in greater detail some of the issues referred to in the main text. Unhelpfully the text does not tell you this. On disclosure of information to the police you are told in the text that generally it is not an offence not to reveal information to the police about a crime, but there are certain statutes which require a doctor to answer questions even though he believes the information to be confidential. This leaves the reader up in the air wondering when this is the case. There is no indication that further advice is to be found later on. In fact, in appendix B, some additional, useful information is given. The book is priced at £9.95. This seems too much for what is simply an overview of source material.

CATHERINE WILLIAMS
Lecturer in family law

Bailliere's Clinical Paediatrics: The New Genetics. Guest Editor I D Young. (Pp 605; £27.50 hardback.) Harcourt Brace, 1993. ISBN 0-7020-1746-9.

Progressive technical advances, major funding and macro-organisation of research mean that the phrase 'the new genetics' has not lost its lustre 15 years after it was first coined. During this time there has been an exponential increase in molecular genetic information on diseases with a hereditary component. 'New' genes are discovered weekly and with the progress of the human genome project, the prospect of identifying the entire genetic component of any disease becomes a reality. There is therefore a huge potential for a widening gap between research and practitioner knowledge of a disease. *Clinical Paediatrics: The New Genetics* is a well organised book which has effectively sought to bridge this gap.

The book is organised into 11 chapters. The first three cover basic concepts and technical approaches to analysing DNA, molecular aspects of chromosomal abnormalities, and morphogenesis. These chapters should equip even those with no formal training in molecular genetics to comprehend the next five chapters which cover particular diseases in detail. Retinoblastoma, cystic fibrosis, Duchenne muscular dystrophy, fragile X, and haemoglobinopathies are examples used in elaborating how molecular genetics has led to the understanding of precise disease mechanisms. These examples have particular reference to paediatrics and the chapters are illustrated with both technical and clinical examples. The next two chapters are related to the application of this knowledge to a population, in particular, screening of populations, prenatal diagnoses of diseases and the uses of population genetic registers. Finally, there is an important chapter addressing some of the ethical issues that arise from the acquisition of all this genetic information. One of the problems with the rapidly expanding state of scientific knowledge is that it may outstrip understanding of the impact of such testing on individuals and it is important that ethical

issues are considered together with technical advances.

Although there is, inevitably, some overlap of subject material between chapters, and the most recent references are already somewhat dated (1992), this does not detract from the overall aim of the book, which is to provide a picture of how molecular genetics has changed the knowledge of diseases, not only in paediatrics, but in almost every clinical specialty.

ANNEKE LUCASSEN
Senior registrar in clinical genetics

Bailliere's Clinical Paediatrics: Epilepsy. Edited by E M Ross and R C Woody. (Pp 609; £27.50 hardback.) Harcourt Brace, 1994. ISBN 0-7020-1862-7.

Given the prevalence of the condition and the scarcity of paediatric neurologists, most paediatricians will spend a considerable amount of time caring for children with epilepsy. Developments in imaging, neurophysiology, and the delineation of electroclinical syndromes (as well as the much publicised advent of new drugs) have markedly affected epilepsy management over the last decade. In his preface, Euan Ross identifies the challenge of keeping abreast of such developments for those who are neither producers nor consumers of the multiauthor textbook or the major monograph. This book aims to provide a distillate of current thinking with a clinical emphasis.

Chapters by O'Donohue and the Camfields on paediatric electroclinical syndromes and febrile convulsions respectively are models of clarity and concision. Frank Besag provides a salutary discussion of the various relationships between epilepsy and cognitive function and the important distinctions between permanent cognitive impairment and the potentially remediable impairment caused by non-convulsive status, drug toxicity, and persistent postictal confusion due to frequent seizures.

A chapter on genetics usefully addresses recurrence risks and contains a section on the fetal risks of antiepileptic medication. Neurophysiology is helpfully explained from first principles with sections on the evolution of the normal paediatric EEG and the electrophysiological characteristics of the different epilepsies of infancy and childhood. There are pertinent comments on the role of video-telemetry and ambulatory recording and valuable caveats on the pitfalls of misconstruing findings if unfamiliar with the spectrum of normal age related EEG variants in childhood.

While a useful chapter covers non-pharmacological treatments, including a balanced discussion of dietary therapies, there is nothing on the principles of drug treatment and the place of the newer antiepileptic drugs in the therapeutic armamentarium. Neurosurgery is oddly placed next to aromatherapy and might have merited a chapter on its own with more discussion of the criteria for referral to an epilepsy surgery team.

This volume is intended to be '... the written equivalent of a symposium ...' for paediatricians who care for children with epilepsy. As such it contains 'updates' written by a group of experts which are largely relevant and well written. It is a good, brief, and instructive read.

MICHAEL PIKE
Consultant paediatric neurologist

Deafness, Children and the Family. A Guide to Professional Practice. By Jennifer Densham. (Pp 210; £32.50 hardback.) Arena (Ashgate Publishing Ltd), 1995. ISBN 1-85742-221-X.

The growing concern for the quality of life of deaf and partially hearing children and their families is one of the major issues tackled by this book. 'Quality of life' encompasses a variety of different concepts, not least of which are self identity and self esteem, as well as emotional health and good social relationships. Through her consideration of the communication process and its central role in establishing successful interactions both within the family and outside, Jennifer Densham stresses the need for professionals at all levels to be more aware of the consequences of their advice and practices.

The book is aimed at doctors, educationalists, health visitors, and social workers who come into contact with the children and their families. The author highlights the responsibilities of those professionals towards them, in terms of how and when diagnoses are made, the amount of information made available after diagnosis, and an appreciation of the depth and range of emotions experienced by the parents. Interviews illustrate that while professionals may feel they provide an adequate service, many parents feel left out of the consultation process, suffer from a lack of information, or even misinformation, and may feel abandoned. The author highlights the need for greater systematic counselling of parents after diagnosis, an area of need which at present is largely unmet. She stresses that sensitive handling and appropriate counselling may have a direct effect upon the parents' reactions to their child. This, in turn, may affect the child's own self esteem and emotional development.

In the area of communication, the author highlights the need for greater acceptance and acknowledgment by the hearing population of the role of sign language for deaf children. The use of signing as a first language does not preclude the later use of speech and for many deaf children may prove to be their only hope of adequate communication. Its success as a communication system depends on the willingness of the hearing population to accept it as a valid language and to take steps to learn it, if only at the most basic level. For the deaf child, acceptance of signing as an alternative language by the professionals with whom they are involved, together with the opportunity for families to learn sign language, may be an enormous step away from the frustrations and confusion they face with spoken language. Signing will also provide access to the deaf community through which they may establish a greater sense of identity.

Overall the book provides a very good overview of problems experienced by deaf children and their families. A broad set of references for follow up reading were provided throughout the book. (However, some of the audiological references could be updated to include, in particular, Bamford and Saunders and McCormick.^{1 2}) Criticism is not aimed directly at any one professional group. But by providing us with valuable feedback from those at the receiving end of services, the author raises our level of awareness of the flaws in those services, and in so doing attempts to protect us from our own complacency.

ADRIAN DAVIS
Senior scientist
SHIRLEY GRIMSHAW
Research student