Diphtheria: are we ready for it?


Non-steroidal anti-inflammatory drugs may predispose to invasive group A streptococcal infections


Updating Common Symptoms of Disease in Children by R S Lillingworth, this book follows a symptomatic as opposed to a system approach. For each of the 185 symptom (sign) headings a list of causes is followed by a tint, giving a brief account of the conditions listed.

In an attempt to be thorough, many of the lists are lengthy and daunting not only to the medical student but also to the experienced paediatrician. Some attempt has been made to subdivide the causes but further subdivision would have supported the problem solv-
authorship and new chapters on the pathology of AIDS and bone marrow pathology. The text is well set out and the illustrations generally of good quality.

However, the most significant alteration since the first edition is a cumulative one. The modification of chapter titles together with a gradual expansion of some chapter lengths, not necessarily extensive, has led to a text that will be a better resource to general and specialist pathologists needing an introduction to less familiar areas. It may be premature to look forward to the fourth edition, but I hope this trend towards expansion continues.

STEVEN GOULD
Consultant paediatric pathologist


Over the years successive editions of Gellis and Kagan’s classic work, just like Topsy, have ‘grown and grew’. Thirty years on and now in its 15th edition, this magnum opus has four editors and 435 contributors. It seemed a little incongruous (and more than a little overwhelming) for a single reader to comment on such a body of scholarship and, in an attempt to redress the numerical imbalance, I enlisted a handful of willing colleagues to help me undertake the task! These included a couple of general paediatricians, one with an interest in rheumatology, a paediatric oncologist, and a senior registrar. We each chose relevant sections of the book to read. I then collected comments, allowed them to simmer for several weeks and finally tried to prepare a distillate which was representative of our views.

Firstly, the design characteristics of the book were appreciated; printing was clear, subheadings stood out, tables were easily assimilated, and key references were appended after each author’s contribution. Inevitably the style of the text was a little uneven with such a huge authorship but it was easy to find one’s way around the volume. The book is truly comprehensive with sections on fetal and adolescent medicine, behavioural and social medicine, and balanced consideration is given to emergency management of acute disorders as well as long term management of chronic conditions. I failed to find guidance on one topic only—pain relief in the dying child.

The consensus view is that Gellis and Kagan is a good reference book for providing the historic perspective on treatment as well as current concepts, although precise practical advice on challenging problems is sometimes lacking.

It should be noted that despite our reservations, my willing helpers have extracted a promise that the copy of this book that we are allowed to keep as a reward for our labours is generally available!

GAYNOR F COLE
Consultant paediatric neurologist

Correction

Byler-like familial cholestasis in an extended kindred

An error unfortunately occurred in this paper by Bourke et al (1996;75:223-7). A vertical line indicating descent of the father of the larger sibship and his sister, the mother of the smaller affected sibship, from the consanguineous grandparental marriage was inadvertently omitted from figure 1. The correct depiction of the figure is shown below.

Figure 1 Pedigree of Irish Byler kindred illustrating high degree of intermarriage.
Symptoms of Disease in Childhood

Carolyn J Adcock

Arch Dis Child 1996 75: 547-548
doi: 10.1136/adc.75.6.547-c

Updated information and services can be found at:
http://adc.bmj.com/content/75/6/547.4.citation

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