many parents are preoccupied with other things and, worst of all, have received no instruction in the arts of parenting. Surely this should now become a priority in education, and Tim Chambers' comment² on this subject in the same issue is highly apposite. Until we produce a generation (from which will come tomorrow's leaders) who respect and understand the needs of children we are unlikely to make much progress.

References

- ¹ Smithells RW. . . . And children first? *Arch Dis Child* 1985;60:781-2.
- ² Chambers TL. Children's doctors and children's teachers share a common cause. *Arch Dis Child* 1985;60:780.

DESMOND CREERY
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Professor Smithells comments:

You, Sir, asked me to consider using 'British' rather than 'English' as a matter of editorial policy, and Dr Creery asks

for another reason. I was anxious not to generalise beyond personal experience. I also have a sneaking suspicion that in some respects at least, such as an appreciation of education, the Scots (perhaps the Welsh, too) may be less culpable than the English. Our hearts bleed for the children of Northern Ireland, but their cycle of violence is attributable, not to their parents, but to terrorists, most of whom appear too young to be able to think a generation ahead.

The NSPCC/RSPCA comparison is an old favourite, but not to be pressed too far. The NSPCC obtained its Royal Charter from Queen Victoria in 1895 (admittedly 70 years later than the RSPCA) and enjoys royal presidency and patronage. Its Scottish counterpart was granted a Royal Charter in 1922 and has been the RSSPCC ever since.

The most important point in Dr Creery's letter is in his opening sentence: 'some years ago' he 'gave up the somewhat unequal struggle of supporting children . . .' Alone he cannot make progress; nor can I; nor, individually, can the many kind people from whom I have received messages of agreement. It is paediatricians *collectively*, through a strong national organisation and in concert with other professional and voluntary bodies that care about children, who must be joint advocates for the next generation.

Book reviews

Ultrasound of the Infant Brain. Clinics in Developmental Medicine no 92. By M I Levene, J L Williams, C-L Fawer. Pp 148: £12.50 hardback. SIMP/Blackwell Scientific, 1985.

The diagnosis of intraventricular haemorrhage in the newborn no longer depends on the finding of blood in the lumbar CSF and the arguments about whether it was a 'bloody tap'. We now have ultrasound and no major special care baby unit worth its salt would be without its scanner. Many of us using the technique are self taught, and with the increasing proliferation of machines and interest in this field a neonatal brain scanner's handbook has become an urgent need. This book admirably fulfils that need. In 13 chapters the authors cover the whole field of neonatal cerebral ultrasound scanning, including a chapter on the spine. Following a simple lesson in physics there is an important chapter on scanning techniques and normal anatomy. There are separate chapters on intracranial haemorrhage, periventricular haemorrhage, and its sequelae which relates to the development of ventricular dilatation and porencephaly rather than neurological handicap, which is beyond the intended

scope of the book. Intracranial cysts, non-cystic malformations, miscellaneous anomalies such as cerebral oedema, calcification, tumours, atrophy, and hydrocephalus are all discussed. There is a chapter on ultrasound appearances in the congenital TORCH infections and in acute meningitis. Finally, a comparison of ultrasound with computed tomography and nuclear magnetic resonance. The text is succinct and directed to the ultrasound appearances and interpretations of the disorders mentioned rather than to their aetiology, pathology, or management. There are over 200 scan pictures with explanatory diagrams and autopsy specimens. Each chapter has a comprehensive list of references.

I would recommend this book to all neonatal scanners to be kept near the machine as a reference atlas. My only caveat is the usual problem of the way x rays and scan pictures look so clear on the screen but are so disappointing when produced in books. All the scan pictures in this book are interpretable and some come out well, but many are rather dark and need close scrutiny. Nevertheless, well worth the money.

BRIAN SPEIDEL

The Epilepsies. Edited by R J Porter and P L Morselli. Pp 396: £36.00 hardback. Butterworths, 1985.

This book consists of 17 scholarly, well referenced chapters dealing with scientific and practical aspects of epilepsy, directed at neurologists and 'those in related fields'. It is one of the Butterworths International Medical Reviews in Neurology (the successor to Modern Trends) in which the series editors Marsden and Asbury aim to emphasise how basic research may change clinical practice. In this it succeeds and must therefore be seriously considered by the many readers of the *Archives* who are concerned with the problems of seizures.

The authors, mostly from the United States, some from continental Europe, are predominantly neurologists or neuroscientists without a specific interest in childhood, but there is much to interest paediatricians. Basic biochemical (neurotransmitter) and neurophysiological chapters are welcome, although these fields rapidly advance. The mechanism of action of antiepileptic drugs is discussed in considerable detail, but the reader should question whether the various proposed

effects would actually occur at the drug concentrations achieved in normal treatment. There are good discussions on epidemiology, classification (of seizures and of epilepsies), 'intensive monitoring', the EEG, management of particular seizure types (including Aicardi on neonatal seizures, infantile spasms, and febrile convulsions), stopping drugs, neurosurgery—including the 'work-up', and psychiatric (but not psychological) treatment of biofeedback, and psychosocial aspects. An appendix lists national epilepsy organisations.

I have found it helpful to have access to the book, but it leaves one, albeit better at choosing potential candidates for surgery, groping still for new solutions to the malignant epilepsies and epileptic encephalopathies of childhood. Libraries which can afford it should get it.

J B P STEPHENSON

Cleft Palate Speech. by B J McWilliams, H L Morris, R L Shelton. Pp 368: £31.00 hardback. C V Mosby (Blackwell Scientific), 1984.

This book is written by three speech pathologists with a special interest in cleft palates and is directed towards speech therapists and surgeons treating these congenital deformities.

The first half of the book therefore describes the incidence, treatment, and problems with cleft palate surgery and will be familiar to surgeons; the second half is perhaps more directed towards the speech therapist.

The book is very well researched and nicely written and I found it a pleasure to read. The first half provides the speech therapist with an overview of the treatment of the deformity and is well described, but perhaps a few omissions might be worth including. No mention is made of the immediate postnatal insertion of a plate in the wide palatal cleft to exclude the tongue from the nasal cavity. Provided this plate is inserted within the first few days of life it is well tolerated and permits the potential growth in the palatal shelves to proceed unobstructed, consequently making the repair at six months to one year very much easier and safer. Pierre Robin deformity with a very wide cleft of the palate and therefore a much greater chance of speech pathology is particularly helped by this technique. Perhaps also a mention should be made of the pharyngoplasties that do not invade the soft palate and produce further fibrosis and stiffness, particularly the orticochea and Jackson's modification;

also no mention is made of the Hynes procedure.

The speech pathologist/therapist's place in the cleft palate team relates very much to decisions on the timing and value of pharyngoplasty, and a good working knowledge of these procedures and how they attempt to close the velopharyngeal space would be an advantage.

Although mentioned, nasendoscopy either with a rigid or fibroscope is perhaps the most trusted method for examining the anatomy of velopharyngeal incompetence, certainly in the United Kingdom, and it is supported by lateral video fluoroscopy and Skolnick views. Speech therapists attending these examinations commonly find it helpful in correlating with their speech assessments.

The authors have perhaps sought to cover areas that are somewhat unnecessary such as craniofacial deformities, but there is much of interest for speech therapists and surgeons alike and those involved in the treatment of cleft palate will find this book a valuable addition to their library.

DOUGLAS HARRISON

Community Paediatrics. Edited by L Polnay and D Hull. Pp 353: £20.00 paperback: Churchill Livingstone, 1985.

Like its predecessors *Essential Paediatrics* and *Hospital Paediatrics*, *Community Paediatrics* is based on teaching material used for the Nottingham Community Paediatric course. In its stated aim to appeal to doctors involved in community paediatrics, whether in general practice, hospital, or community, as well as to health visitors and school nurses, it succeeds admirably.

The book begins appropriately with a chapter on 'Services', emphasising from the start the need for the various professionals involved in child health care to understand one another's work and co-ordinate their efforts. The following chapters on 'Information', 'Screening', and 'Families and homes' provide a brief introduction to epidemiological method and its practical applications. The chapter on 'Growth and development' gives useful practical guidelines for developmental milestones and emphasises the need for the community paediatrician to be an expert in 'normality' and the wide range of individual variations which it embraces. The chapters on 'Genetics', 'Nutrition', 'Hazards', and 'Infections' (including immunisation procedures and programmes) contain a wealth of concisely presented information. Two

middle chapters of the book on 'Problems' (0-5 and 5-15) cover the range of physical and emotional problems likely to be encountered by the community paediatrician, including in many cases indications for referral (for example, in cases of headache and short stature). The remainder of the book covers the subjects of 'Long-standing illness', 'Physical and mental handicap', and 'Disorders of vision, hearing and speech', (including screening techniques and programmes). The chapter on 'Health and learning' gives an up to date view on the school doctor's role in identification and multidisciplinary assessment of the child with special educational needs. Emotional and behavioural disturbances in childhood are considered under a chapter entitled 'Behaviour'. The final chapter on 'Protection of children' provides a brief historical background followed by an account of the current legislation with regard to special educational needs, children in care, fostering and adoption, and child abuse.

As an introduction to community paediatrics for a newcomer to the field, or as a reference book plus a source of further reading matter for those professionals already in it, this text book is highly recommended.

JANET CHAPMAN

Health at School. Caring for the Whole Child. By W Nash, M Thurston, M E Bag. Pp 303: £12.95 paperback. Heinemann Medical, 1985.

Health at School is written for school nurses. The book starts by considering the history and structure of services. It goes on to describe professional approaches and attitudes and then deals with the conduct of individual sessions, health education, children with special needs, specific physical disorders, and socially related problems.

The book is written by experienced school nurses. The text is very clearly laid out and organised and where appropriate is supplemented by line diagrams and illustrations. This is a very thoughtful work which will not only inform at a factual level but will also lead the reader to consider very carefully her professional role, her relationships with others, and the approach which she takes to her various tasks. The arguments in spite of their complexity come over with great clarity and in places with humour. This is a very good book which both new and experienced school nurses will find useful. It would perform an excellent text for the new courses in school nursing that are being set up around the country.

LEON POLNAY