Book reviews

Programmes to Promote Breastfeeding. Edited by D B Jelliffe and E F Patrice Jelliffe. Pp 490: £30 paperback. Oxford University Press, 1988. ISBN 0-19-261457-6.

Is the pendulum swinging back towards professional backing for breast feeding? I write this in the week before the vaccine for measles, mumps, and rubella erupts and have the feeling that paediatricians are fully behind this campaign. Our enthusiasm for breast feeding seems to have been less thunderous and perhaps this is one reason why fewer mothers are breast feeding.¹ The Jelliffes' latest book, together with the forthcoming national campaign in the United Kingdom, may spur us to better things.

The editors have gathered a galaxy of 85 international experts on breast feeding and therefore there is a degree of overkill. The book looks at small scale and national programmes, the role of support groups, international agencies and professional associations (Canada, the United States, and Scandinavia are the stars—poor marks for the United Kingdom), at the role of the health service and the market, and at training and 'policy issues' (including the state of the WHO Code in each country). It is almost inevitable that when so many authors are writing on a subject close to their heart that there will be much rhetoric and repetition. Had the essence of the successful programmes been distilled into 100 pages I believe we would have a best seller. A major defect is the lack of differentiation between campaigns in developed and developing countries. Though we can learn from the latter, the dangers of bottle feeding are far less in industrialised countries hence the thrust of the argument must be more on allowing informed choice than on the public's health. What then are the keys to successful promotion? I can only pick out a few, noting with interest that measures targetted at health care workers, hospital practices, and the legislative field worked better than programmes aimed at teaching mothers.

In the Phillipines, Dr Clavano revolutionised hospital practice and reduced infections by phasing out milk formula and bottle feeding completely in postnatal wards. In Finland, babies were put to the

breast after birth and supplementary feeding was abandoned: in 1983, over 90% of babies breast fed for over three months. Canadian paediatricians organised a national information service for physicians and hospital staff. Photographs of staff breast feeding their babies were posted in an antenatal clinic in Mexico. The best example of successful legislation to control bottle feeding is Papua New Guinea, which put feeding bottles on prescription only in 1977, with dramatic reduction in malnutrition and gastroenteritis.

Can we learn from this book? It should certainly be to hand in all maternity and neonatal units. More important perhaps is to use it as an incentive for the BPA's soon to come breast feeding campaign?

Reference

- 1 DHSS. *Present day practice in infant feeding*. 3rd Report. London: HMSO, 1988.

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Clinical Nutrition in Paediatric Disorders. By D Bentley and M Lawson. Pp 332: £42.50 hardback. Baillière Tindall, 1988. ISBN 0-7020-1245-9.

'Including digestion without tears for jobbing paediatricians' might have been a suitable subtitle, as it describes the authors' intentions. A collaboration between a paediatrician and dietician, the result is an interesting hybrid. The first 197 pages are devoted to pathophysiology, clinical aspects, and management. The appendices run to 107 pages, possibly meriting an entry in the *Guinness Book of Records* for a work of this length. Clearly the aim is to present the relevant dietetic data without rendering the main text indigestible. In this it succeeds admirably.

The first clinical section deals with normal nutritional needs, dehydration, parenteral and enteral nutrition, and malnutrition. It also contains sections on nutrition in cancer, burns, and trauma. The second section is a conventional ramble through gastrointestinal and hepatic

disorders, and the third deals with non-enteric disorders requiring modified diets for cardiac and renal disease, diabetes mellitus, obesity, and anorexia.

Each topic is introduced by a mini review of current trends, suitably laced with up to date references. A description of the pathophysiology, a list of major features and investigations precede diagnosis and treatment. One criticism: research and esoteric investigations, although of interest to the paediatrician, are lumped together with the more established and proved tests, without at times giving clues as to relative usefulness, reliability, or practicality.

The text is replete with tables, figures, and diagrams that seek to break down the barriers to understanding the intricacies of digestion.

The appendices are to be used as companions to the text, and marshal together a great deal of information from national and international recommended dietary intakes and manufacturers' data. More worked examples would have helped my understanding. Overall, worth a read as a more practical approach than the standard text, with a user friendly, not entirely 'cook-book', approach. I am sure it will find a place in many paediatric departments.

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Pathogenesis and Immunity in Pertussis. Edited by A C Wardlaw and R Parton. Pp 482: £55 hardback. John Wiley, 1988.

This must be the most definitive work on this subject available at the present time. It is not a book for the shelves of most general paediatricians but more a reference book that is likely to be seen on the shelves of microbiologists.

This book brings the combined knowledge of 31 authors, from six countries, together in 21 chapters. It is written predominantly by microbiologists, and covers all aspects of the organism and the disease. The early chapters cover the growth and virulence and the mechanism of action of each of the toxins. Further chapters consider the clinical aspects of pertussis,

serological responses, and the host parasite relationship. The final chapters review the efficacy and reactions to both whole cell and acellular vaccines and their impact on the epidemiology of the disease.

I found the book remarkably easy to read for a non-microbiologist and this is largely due to the concise editing and clear format particularly of the content pages. It is both well indexed and referenced.

It makes interesting reading but it is more a reference book and with this in mind I will be donating this review copy to the local postgraduate library.

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Management recommendations reflect the pattern of services in the United States—no references to district handicap teams but, thankfully, the verb 'to state-ment' has not yet crossed the Atlantic. Inevitably, a book on developmental disorders must be written in the context of the services, professional structures, and economy in which its readers work. Although there are some good sections, this book will not find a ready market in Britain.

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recent papers. The concluding chapters cover ventilation, including descriptions of high frequency ventilation, extra corporeal membrane oxygenation, and other new modes of gas exchange. Finally an appendix brings together a huge amount of normative data from multiple sources.

Despite its comprehensive coverage of the subject, this book will be most useful to the paediatrician in the United Kingdom for the reference value of its outer chapters and appendices. It joins a fiercely competitive group of texts dealing with neonatal respiratory illness.

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The Practical Assessment and Management of Children with Disorders of Development and Learning. By Mark L Wolraich. Pp 471: £30.50 paperback. Wolfe Medical Publications, 1988.

This book has been written for American primary care physicians, consequently it is difficult to suggest an audience in Britain whose needs it would meet. Too detailed for the general practitioner, it gives both too little and too much information on some topics for the paediatrician. The title is misleading; the emphasis throughout is theoretical and the reader looking for 'how to do it' guidance will be disappointed. The preface defines the scope of the text as 'behavioural pediatrics' and there is a confusing inclusion of topics that could be considered the province of child psychiatry, at the expense of more detailed discussion of developmental disorders and handicapping conditions.

The book follows a common format, the first section dealing with techniques of assessment and management and the second covering specific disorders. This inevitably results in discussion of some complex disabilities in insufficient detail for the paediatrician. There are some good general chapters and I appreciated the emphasis on the need for a family centred approach. The detailed chapters on methods of assessment, however, were less useful in their extensive consideration of tests not in general usage in the United Kingdom. The chapters on speech and language disorders are disappointing and important omissions are chapters on neurological examination, genetic counselling, and clinical tests of vision and hearing.

Neonatal Respiratory Care. Edited by W Carlo and R Chatburn. Pp 474: £22.50 hardback. Year Book Medical Publishers, 1988. ISBN 0-8154-5636-7.

This deceptively small volume is the second edition of a book originally produced in the late 1970s, with an authorship mainly from Cleveland, Ohio. It presents the reader with a holistic approach that covers most aspects of neonatal intensive care and the embryological development of the respiratory system. This reflects the sick newborn's multisystem disease from which it is difficult to separate one organ system.

The first quarter of the book concerns development, structure, and physiology of the respiratory system, which in the main is comprehensively executed. Many of the illustrations will be familiar to readers from standard texts. The second quarter deals with clinical aspects, ranging from delivery room management and nursing care to pharmacology and care of the parents. In many ways this section is the least satisfactory. Although it covers important areas of neonatal care, one sometimes feels that the relevance to respiratory care is lost in more general discussions. It is also rather repetitive, for example there are three descriptions, in separate chapters, of how to pass an endotracheal tube, including two different guides to endotracheal tube size. Much of this is further covered in the chapter on nursing care, which again is not specifically respiratory care.

Because of the space devoted to clinical aspects the chapters covering respiratory diseases, radiology, and complications are relatively brief. Despite many recent references, these rarely stray from the North American literature and ignore important

Recent Advances in Epilepsy. Edited by Timothy A Pedley and Brian S Meldrum. Pp 266: hardback £45. Churchill Livingstone, 1988.

Epilepsy is the commonest chronic neurological disorder of childhood. Advances in the understanding of underlying mechanisms, investigation, and treatment are the remit of general as well as specialist paediatricians.

In this, the fourth of their series, the editors have maintained the very high standard previously achieved. All those who request electroencephalography should read the chapter on the role of the electroencephalogram in the diagnosis and management of epilepsy. There are discussions on how to obtain the maximum information from the record, where it may be helpful in the choice of therapy, and its roles in long term follow up and withdrawal of treatment. For those who follow their patients into adolescence, and for the neonatologists, teratogenic aspects of anti-epileptic drugs are considered in detail. Epilepsy presenting as a symptom of parasitosis may not be very common, but the coverage of the neurological complications of parasitic infestations is wide and gives access to much literature published in languages other than English. Prospects for improvement in seizure control by the introduction of new drugs are considered with admirable clarity. There is a detailed analysis of the place of corpus callosotomy for intractable secondary generalised seizures. The contributions on kindling; initiation and neuroanatomical spread of seizure activity; and, amino acid abnormalities in plasma, cerebrospinal fluid, and