book. The lasting impression, however, is of how little we know at present about the factors controlling, modifying, or altering brain development in utero. The majority of the work reviewed is at a research stage and its clinical relevance is unclear or uncertain.

The 13 chapters are divided up into three sections—antepartum fetal assessment, intrapartum fetal assessment, and major specific fetal conditions. Because much of the presentations are controversial and the author(s) may have a biased viewpoint the practice of editorial commentary on each chapter is valuable and puts the subject into perspective, though they could have been more critical.

The major criticism is the excessive concentration on fetal hypoxia. Six chapters were concerned with this subject in one aspect or another (and contained information that has been regularly reviewed in other books and journals) and yet only one chapter dealt with fetal behaviour.

Another clear message from the book is that fetal neurobehavioural development will only be properly understood when the observations of various fetal neurological parameters are related to developmental outcome in infancy and childhood.

It may well be that the second edition of the book will be of more widespread clinical relevance and interest.

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been a problem. That will speed up. The difficult part will be programming the interpretation which depends on evidence for effective treatment of particular abnormalities of motion, electromyography, and force.

Some clinicians may find that the book offers more than they want to know about gait. There are 87 figures, 13 tables, and five pages of recording charts. One figure includes 24 graphs. In the middle of the book there are 80 pages of continuous figures. The complexity of the data is illustrated by the six pages explaining their mathematical treatment. The formulae underlying their 'bootstrap' technique are beyond the comprehension of a reviewer more familiar with shoestrapping methods.

Their anthropometric data are easily assimilated and helpful. The gait analysis system used four motion picture cameras, a force plate, and electromyography linked to a minicomputer. As a scientific study this monograph is a landmark. Departments of bioengineering, gait laboratories, physiotherapy teaching schools, and academic departments of orthopaedic surgery and paediatric neurology will find it a classic source of reference. If the next 10 years bring the data justifying its cost effectiveness, this approach will have been vindicated.

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summary covers definitions, age of onset, presenting symptoms, clinical signs, and associated features. The usual course and prognosis is described. Investigations, biopsy findings, genetics, and principles of management are outlined. These summaries provide a quick *aide memoire*, which will be useful for those studying for postgraduate examinations and those involved in teaching.

The case histories themselves are succinct and useful in that many describe the 'not-so-typical' presentations common in everyday practice, the multitude of children depicted in the super clinical photographs reflecting the wealth of experience of the author. There are good illustrations of surgical appliances—braces, calipers, etc—which would be helpful for parents to see—all the children are smiling! The well reproduced biopsy pictures are well integrated into the text and therefore much more digestible than a separate section just on biopsy appearances.

The section on investigations only describes needle muscle biopsy. The section on ultrasound is limited to only a short description. I would have preferred more detail with more photographs of ultrasound appearances of common disorders as this is an area unfamiliar to many paediatricians. The bibliography consists of only 10 references; a more comprehensive one would have been helpful.

The Atlas will appeal to general paediatricians as well as those with an interest in neurology and also to community paediatricians with responsibility for disabled children. It will also be of interest to other disciplines working with such children.

When this book arrived I immediately found myself searching through it for a description of the condition the name of which I had just seen that day for the first time on the biopsy result of a little patient of mine—I was not to be disappointed!

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The Development of Mature Walking. By D Sutherland, R Olshen, E Biden, and M Wyatt. Pp 227: £24 hardback. Blackwell Scientific Publications/MacKeith Press, 1989. ISBN 0-632-01902-6.

Sophisticated study of the gait of 309 normal children in 10 age groups from 1-7 years makes a formidable story. Altogether 449 recordings were made on the volunteered subjects, over 90% of whom were white. The data and graphics presented may well become the basis for a future 'expert' system for gait analysis in children. This would be a 'black box' capable of collecting, processing, and interpreting the data on which clinical decisions can be made. Though the San Diego laboratory is among the most advanced in the world, their computer has had to deal with so much data that the turnaround time has

A Colour Atlas of Muscle Disorders in Childhood. By V Dubowitz. Pp 182: £40 hardback. Wolfe Medical, 1988. ISBN 0-7234-0811-4.

This is not so much a textbook more a glossary of cases from Victor Dubowitz's wide clinical experience. However, I suspect that there are many other paediatricians who like myself find the good presentation of a clinical case, demonstrating the features of a particular condition, a far more meaningful way to learn than a dry description of the condition itself.

The book, well titled as an atlas, covers all the major muscle disorders of childhood, the common and the uncommon, in its 182 pages, 80% of which are pictures. The layout is excellent. Each section starts with a short summary of the disease in note form in blue, easy to locate, tables. The

Pregnancy and Risk. By D James and G Stirrat. Pp 209: £18 paperback. Wiley, 1988. ISBN 0 471 91188 7.

Media and public obsession with the minutiae of medical wizardry, coupled with the occasional or frequent medical success

in a seemingly hopeless situation, has reinforced the myth of human immortality. This is most marked during the perinatal period, where the possibility of an outcome other than happy is dismissed or subjugated. This tome discusses in a dispassionate and well argued fashion the risks attached to successful procreation.

Medical audit presently enjoys a profile as high as that of the environment on the political agenda and we are introduced to the necessary concepts in a lucid and understandable form, despite considerable statistical content. Thereafter, the various stages of procreation are discussed in a temporal progression until medical audit is discussed from a practical viewpoint as the final offering. Clinical geneticists are still a rare breed, the genetics chapter is well written and contains sufficient data for clinicians to embark on genetic counselling with substantiated facts easily accessible.

Condensing a large topic into a handbook renders the authors open to sins of commission as well as omission.

Two chapters: 'Risk at the booking visit' and 'Risk and the neonate' were uncomfortable—couldn't decide whether to be a textbook or not and included considerable but incomplete data—which leaves the reader insecure at taking advice from these chapters. The list of prescribing in pregnancy is incomplete, so loses authority and becomes useless as a basis for prescribing.

The chapter on labour separates overall risks into component parts, which affords a worthwhile basis for targetting resources in attempts to reduce mortality in areas where this is feasible. Interestingly the reference discussing neonatal intensive care and mental retardation is far later than the seminal work of Brimblecombe *et al* from Exeter. Apgar scores and cardiocographs, forming part of the obstetric/paediatric interface, have their merits and demerits well ventilated. The controversy of caesarean section and preterm labour, however, is dismissed with references, while prolonged labour is blessed with a largely historical treatise. The problems of the neonate are potentially legion and the salient areas should be chosen with care. Inclusion of simplistic and somewhat worthless information is an ill afforded luxury in this book and the chapter failed to impress.

The book attempts, mostly successfully, to encompass the multifaceted problem of pregnancy and will be useful to obstetrician and paediatrician alike. It is easily read, enjoyable, but factual without tedium or verbosity.

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Edmond Went Far Away. By Martin Bax, illustrated by Michael Foreman. Pp 40: £8.95 hardback. Walker Books, 1988. ISBN 0-7445-1060-0.

The perfect bedtime story is one that keeps parents awake and sends children to sleep. This story is written by a paediatrician and is about Edmond who lives in a farm house. He says goodbye to all his animal friends and goes on a long walk. First he goes through a copse patting the trees goodbye, then down a muddy path, and finally he climbs up a long hill. This took him a long time and on the way he imagines that all his animal friends are with him.

When he got to the top of the hill he looked down at the new world on the other side and began to panic slightly because he wasn't sure whether to go home or not. A familiar figure caught his eye and he was pleased to see that it was his father who had followed him. They explored the new world together, rowing round a lake, building a fire of driftwood, eating baked beans, and spending the night in sleeping bags. The next day when Edmond returned home from his adventure his animal friends were very pleased to see him and I suppose his mother was too.

When I first looked at the book the part that stood out most were the wonderful illustrations which made the story come to life. Although they weren't greatly detailed they were colourful and very effective. This is an ideal bedtime story book, read by either parents or children. It is suitable for 5-7 year olds, although younger ones might have difficulty with some of the words. The good thing is that there is no moral to the story. Children don't want morals at bed-

time and this story is far more enjoyable without one.

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Video review

Screening and Surveillance for Hearing Impairment in Young Children. Nottingham Health Authority, 1987. Video Training Package, £98.50.

The detection of hearing impairment in young children over the country as a whole is poorly carried out, and this is confirmed by the late ages of diagnosis of many of the deaf children. This screening package is an excellent aid for local authorities who are trying to improve the outcome of their screening programmes and will be a useful supplement to pre-existing training.

The package consists of two parts: a trainers' manual that sets out the essential activities that have to be taught on the programme and the recommended time for the training modules, including a full day of practical training. The second part of the package is the video, which illustrates clearly the points raised in the training manual and is excellent teaching material, although insufficient for use on its own. The video and manual cover all aspects of the distraction test, including potential problems, in a concise manner and if the recommendations are followed I am sure that there will be a marked improvement in the detection of hearing loss.

There are some sections that need to be expanded but this can be carried out by the trainer during the various activity sessions. The manual stresses the fact that the trainer should be appropriately trained and experienced in hearing screening techniques and this needs to be emphasised if local authorities are to implement this training package. Given this prerequisite, however, I would highly recommend this as an aid to training health visitors and other professionals involved in screening children's hearing.

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