The index is unhelpful and some of the illustrations, although well chosen, are of poor quality. For the book to fulfill its promise, one would expect some discussion of the problems that may coexist with cerebral palsy. There is no mention of epilepsy, and vision and hearing are inadequately dealt with and out of date.

The book's strength is the discussion of physical management. The chapters on normal and abnormal development, assessment, management, and treatment are comprehensive, but require some cross referencing between the chapters. Some of the descriptions can be hard to follow. One constantly wished to be able to see the movements that are being described—how long will it be before books such as this come accompanied by a video? The limitations of historical approaches to cerebral palsy, with excessive reliance on splinting and orthopaedic surgery are acknowledged, but I was disappointed that there is no discussion of the contribution of modern orthopaedics. There is a very helpful discussion on feeding but nothing on the assessment of nutritional status, the role of the speech therapist and dietitian, or of complicating factors such as gastro-oesophageal reflux.

The final chapter is indicative of the need, even in the most affluent Western societies, to demonstrate the effectiveness of treatment when there is 'a polarization between the advocate and the nonbelievers'; the issues are outlined well.

S J ILETT
Consultant community paediatrician

Textbook of Paediatric Practice. Edited by Y H Thong. (Pp 723; £96 hardback.) Butterworth Scientific Ltd, 1989. ISBN 0-409-49299-X.

Not another textbook of paediatrics! This time it is an Australian one. Or is this an export special that reaches the parts the others haven't already reached? With over 700 pages and a cast of mainly Australian and Chinese contributors this formidable book aims to fill a perceived space in the market, intermediate between the small introduction to paediatrics and the large reference volume.

In parts the approach is disease orientated, describing gastroenteritis and meningitis, whereas other sections have a problem orientated approach with such headings as 'common respiratory symptoms' or 'headache'. A special feature is the series of contributions on subspecialty disciplines impinging on paediatrics. These are mostly surgical areas, but by including radiology, dermatology, and anaesthesia, the book covers most aspects of child health care. The text is thick with information. It has many useful tables and lists, but few line drawings and fewer black and white photographs. Each of the 156 sections has a small number of key references up to 1987. The short section on the telephone interview is a real pearl for anyone who consults by phone, which must be all of us.

There is a marked unevenness in content and approach between sections, even for a multiauthor book. The Glasgow Coma scale appears twice, but with slightly differing nomenclature and numbers of items in the score. Though the index points the reader inquiring after neonatal jaundice to the gastroenterology chapter, this subject is also covered in a rather different manner in the neonatal section. The list of causes of a raised sweat sodium concentration is the most complete I

have ever seen, whereas less than half a page is devoted to recurrent abdominal pain. The section on the acutely paralysed child is full of sound practical advice, but the account of child abuse gives no guidance of that sort.

Who is the book for? Its introduction claims a remarkably wide potential readership of students, recent graduates in medicine, nursing and allied health professions, and general practitioners. My student found it rather too large to digest during his eight weeks' paediatrics and claimed it gave him a poor idea of the relative importance of the various conditions. My houseman would find some sections of immense practical help but there are other books which would fit better into his or her pocket. Other texts would be needed for postgraduate diplomas. Aspects of community child health and child abuse would need modification for UK readers and few of us face problems with the blue ringed octopus!

Though this is a magnificent book for quick access to much information it gives the impression of an uneasy compromise aiming for too wide a range of readership. I would pay more and buy the *Textbook of Paediatrics* by Forfar and Arneil for our departmental library.

GERALD MCENERY
Consultant paediatrician

Migraine in Childhood. Edited by Judith M Hockaday. (Pp 148; £27.50 hardback.) Butterworth Scientific Ltd, 1988. ISBN 0-407-01590-6.

I recently attended a paediatric meeting during which one of the speakers predicted that more than half of the doctors in the audience would be migraine sufferers. A show of hands quickly confirmed his prediction and simultaneously strengthened one of my prejudices—that doctors are not very accurate in diagnosing migraine. One of my other prejudices is that doctors are not very good at treating migraine. Dr Hockaday's book gives us the opportunity to transform our prejudices about migraine into sensible opinions.

In 'a personal view' at the beginning of the book Dr John Wilson points out that migraine in children is different from migraine in adults. In the first chapter Dr Hockaday expands this theme with a detailed description of the nature of the migraine attack in children. She also discusses the problems of defining migraine. Epidemiologists list criteria which are necessary for the diagnosis of migraine but this 'criterion diagnosis' is unsatisfactory for clinical practice. Dr Hockaday makes two particularly important points for clinicians—firstly the diagnosis of migraine should be by exclusion (that is, think about the differential diagnosis), secondly it should be longitudinal (that is, allow enough time for a recognisable pattern of symptoms to emerge).

Dr Hockaday's first chapter sets the tone for the rest of the book. She writes clearly and logically displaying an extensive knowledge of the literature. The next chapter by Ziegler deals with epidemiology and inheritance—headache is a very common symptom in children whereas migraine, if narrowly defined, is less common but still affects perhaps 3–5% of the population. The difficulty of defining migraine narrowly is shown by reading Gwilym Hosking's chapter on the variants of migraine in childhood. He has the task of explaining such terms as 'complicated migraine' and 'migraine accompagnée or associée' and I'm relieved to report that he

enlightens rather than confuses. If you want to know about hemiplegic migraine, basilar artery migraine, ophthalmoplegic migraine or the 'Alice in Wonderland syndrome' then this is the chapter for you. In the next chapter Dr Hockaday returns to define 'migraine equivalent', to talk about migraine without headache, and to discuss the validity of the diagnosis of abdominal migraine in children.

The book continues with sensible sections on the management of childhood migraine, a description of paroxysmal disorders which may be confused with migraine (do you know about alternating hemiplegia of childhood?), and a guide to those difficult areas where migraine and epilepsy apparently overlap. Finally there is an excellent review of the literature on the pathophysiology and precipitants of migraine—everything from 'the spreading depression of Leão' to oligo-antigenic diets and the distress about stress.

This is not just a book for paediatric neurologists. I recommend it to all paediatricians and to general practitioners. It is well written by people who understand the subject and who are constructively critical of the literature. It is not too long and for those who are really interested in further reading there are 21 pages of references. It is slightly repetitive but this seems inevitable if each of the chapters is to stand on its own. I was so convinced of the book's merits that I had already purchased it by the time I was sent a copy to review—what better recommendation than that?

C M VERITY
Consultant paediatric neurologist

Treatment of Infants, Children and Adolescents. Edited by Fredric D Burg, Robert E Merril, Robert J Winter, Deborah H Schaible. (Pp 406; £15.50 paperback.) Harcourt Brace Jovanovich Ltd, 1990. ISBN 0-7216-2139-2.

This is the first book review I have undertaken and in the accompanying letter the editor requests a sparkling first paragraph. This I find difficult as this is a very factual book, being extremely lucid and concise. It is wider than the title suggests, covering the aetiology, signs, symptoms, as well as management of many conditions. There is also a neonatal chapter.

The book is divided into three sections; the first considering the differential diagnosis of presenting symptoms and signs with advice regarding management. This is very well tabulated with a column for discriminating features and brief notes on treatment and key points. The middle and largest section covers diseases affecting the childhood and adolescent population, which overall is set out extremely well and has 20 sections covering the usual systems. I found the sections on cardiovascular and dermatological disorders particularly useful. The section on mental and emotional disorders was interesting, dealing with a wide range of topics including areas of disturbed adolescent behaviour such as suicide, smoking, drug use, and alcoholism, of which paediatricians in this country generally have limited experience.

The final section is a drug formulary and details dosage, routes of administration, side effects, and interactions. The authors state that they hope to update this regularly and this section will require revision at least every two years.

There are four editors and 55 contributors to this book and all practise in the United

States. Despite the many authors the sections all have a remarkable uniformity. Parts of the section on pulmonary disorders are more verbose than the rest of the book and more lists here would be helpful. This book is aimed at junior paediatric staff, I think, and perhaps sections on innocent murmurs and sudden infant death syndrome would be helpful when the text is updated. This book will also be of significant value to consultants in this country as the information is very up to date, although the small print is a disadvantage with the advancing hypermetropia of age.

Overall there is a great deal of valuable information in this book which is easy to extract and each section has pertinent and recent references. The price is inexpensive and I would recommend this book to both junior and senior medical staff practising paediatrics in any part of the developed world.

D S K BROOKFIELD
Consultant paediatrician

Teaching Genetics to Medical Students. A Survey and Recommendations. Report of a Working Party of the Committee on Clinical Genetics. (Pp 32; £7 paperback.) The Royal College of Physicians of London, April 1990. ISBN 0-090096-96-1.

A working party of the Committee on Clinical Genetics of the Royal College of Physicians has produced a well researched and revealing report on the existing teaching of genetics in UK medical schools and drawn up recommendations for the future. It is now fairly clear why many doctors, however newly qualified, have difficulty interpreting pedigree risks or understanding chromosome reports: genetic teaching at present is often inadequate and should be improved. The report has found marked variation between schools and found that on average there is only 5.57 hours of timetabled genetics teaching in the clinical course and 17.35 hours in the preclinical course (when two exceptional centres with 66 and 50 hours respectively are excluded).

The report has drawn up guidelines for a balanced genetics syllabus. This is based on a questionnaire sent out to 429 clinicians and medical teachers from all specialties. They were asked for their opinion on essential genetic topics and basic genetic skills to be achieved by qualification. Response was high and interestingly there was significant agreement among responders irrespective of specialty.

The report recommends that clinical geneticists should play a larger part in coordinating genetic teaching throughout the five year training of undergraduates. This would prevent unnecessary repetition and help emphasise the clinical relevance of the subject. It acknowledges that more clinical geneticists will be necessary to implement their proposals but the Working Party hopes to help by setting up a Genetic Education Task Group. This could coordinate teaching at a national level and provide teaching aids, access to professional teachers, and workshops for clinicians involved.

The findings of the report provide strong support for more and improved teaching of genetics to medical students and highlight the need for medical schools to match the revolution in clinical genetics which is taking place at the moment.

KAREN TEMPLE
Consultant in clinical genetics

Paediatric Pathology. 2nd Ed. Edited by Colin L Berry. (Pp 830; DM 380 hardback.) Springer-Verlag, 1989. ISBN 3-540-19536-X.

Diseases specific to the paediatric period are intimately related to the processes of growth and development and thus tend to be expressed at the time when development progresses most rapidly in fetal and early neonatal life. Scientific and diagnostic advances have moved inexorably towards the point of inception of disorders such as structural and biochemical anomalies in the embryo and immature fetus. To many non-medical and some medical people the terms perinatal pathology and paediatric pathology have become virtually synonymous. There is thus an almost insurmountable problem in presenting an overview of a subject which is so heavily weighted towards the fetal end but contains important conditions that present only in infancy or childhood.

This task is one that is now attempted only by Professor Berry, whose book thus occupies a unique position. How has Professor Berry faced up to the advances in fetal and perinatal pathology in producing a second edition? The new edition is as well produced and illustrated as the original and is clearly written throughout with an increase in length by some 130 pages. The book has not changed in overall emphasis, perhaps because neither editor nor many of the contributors are practising paediatric pathologists.

In the first chapter, on examination of the fetus, there is a new section on the neonatal necropsy and a few additional tables to aid in determining fetal maturation. The chapter on the placenta has been excluded in favour of a new chapter by RO Kaschula on infectious diseases. The rest of the book has been updated to varying levels by the original authors. Although some chapters, such as those on the respiratory system and sudden unexpected death, are replete with recent references, others contain relatively few references to work published within the last 10 years. Surprisingly, the new chapter on infectious diseases, while dealing at length with congenital syphilis, contains no mention of AIDS, although the topic is touched on briefly elsewhere in the book.

Many of the chapters in this text are good introductory reviews of the subject and some are extremely useful for reference purposes. The work as a whole remains in that indeterminate position as neither an everyday bench book for the practising pathologist nor a comprehensive academic reference book on paediatric pathology. It is a work for the departmental or hospital library rather than individual purchase.

J S WIGGLESWORTH
Professor of perinatal pathology

Principles and Practice of Endocrinology and Metabolism. Edited by Kenneth L Becker *et al* (Pp 1944; \$125 hardback.) JB Lippincott Company, 1990. ISBN 0-397-50759-3.

With nine editors, 305 (largely American) authors and nearly 2000 closely typed pages one would be disappointed if this book did not prove to be the comprehensive source text intended by Professor Becker and his colleagues! The only practical approach to a review of such a tome for this journal was to see if it fulfilled such a remit for a paediatrician with an interest in endocrinology.

The work is laid out in a disease oriented format with specific chapters on anatomy, physiology, and pathology within the affected system. Each section includes a chapter on the paediatric aspects of each condition where appropriate. This design means that it is often necessary to look in several places to gain the desired information, but the index is extremely comprehensive. There is little historical information and the references are very topical.

Although references are provided at the end of each section, paediatric endocrinologists will find the coverage of their interest rather skimpy and lacking in discussion of the more current controversies and research. For instance, there is very little concerning non-conventional indications for growth hormone treatment or the surgical approaches to short stature in skeletal dysplasias. The therapeutic options for juvenile thyrotoxicosis are mentioned but not assessed critically. For a clinician used to focusing on the impact of an endocrinopathy on the rate of growth the section on auxology is also disappointing. Many of the named drugs are given as their American equivalents and SI unit conversion factors are only given in an appendix. The doses for children are often stated baldly, without allowance for body size or individual variation.

The book succeeds best as a reference for those seeking information outside their usual field of interest and those needing an up to date account of the physiological and metabolic basis for a disease process. There is also entertaining coverage of some extremely rare conditions (such as 'hamburger thyrotoxicosis' secondary to the ingestion of thyroid gland included in mincemeat from one abattoir) and some high quality black and white illustration.

At only \$125, which puts the cost of many comparable recent British editions to shame, this reference text should find its way on to the shelves of our libraries as a source book for a wide range of clinicians and scientists. A paediatrician wishing to own a definitive textbook specifically relating to endocrinology in childhood might find the second edition of Brook's *Clinical Paediatric Endocrinology* a more appropriate choice.

J K H WALES
Honorary senior lecturer

Operative Paediatric Urology. Edited by J D Frank, J H Johnston. (Pp 256; £80 hardback.) Churchill Livingstone, 1990. ISBN 0-443-034788.

Operative Paediatric Urology raises the technical manual to the level of an art form. David Frank and Herbert Johnston have produced a beautiful account of the open operations of the specialty. The text is concise, the layout stimulating and the illustrations, to the surgical eye at least, visually pleasing. The illustrator, Philip Wilson, should be credited for his contribution to the success that this book will undoubtedly enjoy. Paediatric urology is breaking new ground. The editors have endeavoured to reflect this in their choice of subjects and authors. The powerful influence of Liverpool upon the specialty is clearly evident. Mr Johnston has contributed a number of chapters himself and his successor at Liverpool has written an excellent chapter on urinary diversion. There are also excellent contributions from some of the many distinguished Americans who spent time as visiting fellows there.