SPRING BOOKS

Book reviews: some personal experience from the receiving end

Some years ago I wrote an invited annotation on book reviewing,¹ asking a question 'Who should be asked to review a book?' Should a general practitioner or nurse review a book by a consultant? Should a consultant review a book by a general practitioner or nurse? I was unable to answer my own questions.

There is a striking dearth of articles on reviewing books—and there have been only a few on an allied subject, the refereeing of papers. An excellent article on book reviews was that of the late Dr Irving Wolman, when editor of *Clinical Pediatrics*.²

An author's ego may be boosted (perhaps undesirably) by a laudatory review, or punctured by a derogatory one. The author is helped by positive criticisms, which can be attended to in a further edition, but is not helped by vague expressions of distaste for a book with no specific criticisms, which enable the author to form his own conclusions as to the extent of the reviewer's knowledge, the thoroughness or otherwise with which he has read the book, or its reviewer's personality. It is annoying to be criticised, as I often have, for statements that one has never made and would not dream of making. A reviewer of my book *Common Symptoms of Disease in Children* clearly thought that the title of my book was 'Symptoms of Common Diseases in Children' and attacked it accordingly. A British journal, publishing a review of one of my books, even misspelt my name; and two other British journals got the title of my book wrong.

Over the years I have amassed experience of many different reviews of my books, and I felt that some of this experience would be of interest to others—and raise the question of who should be asked to review a book.

ABC of Clinical Genetics. By Helen M Kingston. (Pp 62; £10.95 paperback.) British Medical Association, 1989. ISBN 0-7279-0263-6.

Many readers of the *Archives* will already be aware of this series of articles from the *British Medical Journal*. They have now been published together in a slim volume, which guides the reader from mendelian to molecular genetics and beyond, outlining the principles involved and showing how these relate to clinical practice.

In the first chapter Helen Kingston summarises the organisation of clinical genetics services. The need for liaison between geneticists and other professionals in hospitals and community is emphasised. Optimal management of genetic disease, for patients and their families, involves integration of many disparate skills and until those providing these skills can speak one language the geneticists' task will remain a difficult one. In the succeeding chapters many of the more commonly encountered genetic conditions are used to illustrate the approach of the clinical geneticist to chromosomal, single gene, and polygenic disease.

Several chapters deal with areas where

Many reviewers pick out three or four of what they consider to be glaring, important, or typical faults. Below are some examples from reviews of my books—recorded without comment—knowing that readers may or may not agree with the criticisms. I was criticised for giving the following advice or opinions:

(1) (In the days of smallpox vaccination) that mothers should not be vaccinated in pregnancy.

(2) (In a book for non-medical readers) that for certain (named) countries abroad, children should be immunised against cholera, even though it is not 100% effective.

(3) that children should be immunised against tetanus (along with diphtheria and pertussis).

(4) that the word 'measles' was derived from a Latin word meaning 'miserable'.

(5) that ear pain due to acute otitis media should lead to prompt antibiotic treatment.

(6) (After a discussion on indications for circumcision) that the decision as to operation should depend only on the interests of the child, and not on the wishes of the parents.

(7) that a diabetic child should always carry a lump of sugar or sweets in case of hypoglycaemic symptoms. The reviewer disagreed, saying that the child should always carry glucagon.

(8) (After a 12 page discussion on the difficulties of diagnosing the cause of acute abdominal pain in children) I said that 'it follows that there should be no hesitation in calling in expert advice when one is faced with the problem of a child with acute abdominal pain'.

(9) that a child with a significant delay in speech development should be assessed by an expert.

common investigative approaches naturally link groups of conditions. One on genetics and cancer illustrates the ways in which DNA investigation both aids management of familial cancers and is shedding light on tumour aetiology and evolution. Another suggests a framework for approaching the patient with dysmorphogenesis. The importance of appropriate investigation of the malformed fetus and stillborn child is emphasised. A further chapter describes techniques used in prenatal diagnosis. Ethical issues are mentioned, but only briefly and perhaps warranted a chapter themselves.

The final chapters focus on molecular genetics and its application to clinical medicine. The techniques that have enabled recent and rapid progress at the scientific-clinical interface are summarised. The fact that some of the information on these pages is already out of date highlights the rate of this progress and the need for all clinicians to have access to a geneticist working at this interface.

This little book is worthy of a few hours of any health care worker's time and it will be widely read. The appendix includes addresses of many of the lay support organisations involved with specific genetic diseases. Those who familiarise themselves with the preceding pages will also be in a position to know what

(10) that 'it is worthwhile to refer the clumsy child to an expert, for the diagnosis can be difficult'.

(11) that a deep congenital dermal sinus, persisting to the age of 2, should be referred to a surgeon because of the risk of infection.

(12) that postnatal discharge in, or after, a cold, may make a toddler cough when he lies down at night (on his back).

A reviewer wrote that the milestones of development given by me (largely based on the quoted work of Arnold Gesell, Albrecht Peiper, TB Brazelton, French workers, and numerous other experts) were wrong, and should be altered.

Reviewers drew attention to my faults of omission, on the grounds that:

(1) In a discussion on the treatment of nappy rashes, I should have recommended the sprinkling of boric acid crystals into the nappy.

(2) In a chapter on variations in babies' development, I failed to draw the line between normal and abnormal.

(3) In my book for school teachers, I failed to devote a section to the Spitz-Holter valve.

(4) In a discussion of teething, I should have written that the mother should be advised to give extra fluids.

(5) In a discussion on insufficiency of breast milk, I should have written that it should be managed by telling the mother to increase her energy intake.

These reviewers' criticisms draw attention to the difficult task facing the editors of journals in choosing someone to review books—and even in deciding whether the reviews should be published. Should book reviews be checked by referees—and how would the referees be chosen? I have no answer to the editors' problems.

R S ILLINGWORTH

1 Illingworth RS. Some reflections on book reviews. *J R Soc Med* 1977;70:119-21.

2 Wolman I. What makes a good medical book review? *Clin Pediatr (Phila)* 1962;1:29-32.

help they can expect from their regional genetics service.

J R SAMPSON
Senior registrar

Textbook of Pediatric Dermatology. Edited by Ramon Ruiz-Maldonado, Lawrence Charles Parish, J Martin Beare. (Pp 863; £114.00, hardback.) Grune and Stratton (Harcourt Brace Jovanovich), 1989. ISBN 0-8089-1863-X.

I finished my paediatric clinic, drove home, and opened the parcel to reveal a large cream new *Textbook of Pediatric Dermatology*. I perused the index for lichen sclerosus et atrophicus having just told doctors at the clinic to avoid misdiagnosing the condition as sexual abuse. However, to my disappointment, it was not mentioned and under the heading sexual abuse, only sexually transmitted diseases were considered. I then opened the book at the beginning and things began to improve.

This is a well produced book with 70 chapters contributed by 80 authors from many countries. One problem for editors with so many and scattered authors is getting all manuscripts returned quickly and failure to achieve this results in delay in production of the book and the danger of a dated content. However, I did

find the book to be well referenced with references up to 1988 appearing in many chapters.

Most topics in paediatric dermatology are considered, and these include genodermatoses, blistering disorders, infections and infestations, tumours, hair and nails, atopic dermatitis, psoriasis, and cutaneous manifestations of paediatric disease.

Some minor criticisms. I would have expected more on neonatal cold injury, mention of actinic prurigo, hydroa vacciniforme, and tetracycline staining of teeth. Who still uses resorcinol in acne? The importance of clinical differentiation of the benign Buschke-Ollen-dorff syndrome from pseudoxanthoma elasti-cum should have been emphasised and recent work by Pope *et al* on Ehlers-Danlos syn-drome type IV merited mention. I would not agree that Crohn's disease is rare in adolescence or that involvement of the dorsum of the toes is a characteristic of juvenile plantar dermatosis. The editors could have been more thorough at reducing some repetition of the same disorders by different authors.

The index is good and comprehensive and I found no spelling errors in it. Illustrations are all monochrome and a minority which have reproduced poorly should have been omitted. I assume that colour illustrations would have resulted in a more prohibitive cost.

In 1988 a larger two volume *Paediatric Dermatology* text appeared (Schachner and Hansen) which has been well received. I think this one volume tome at half the cost bears favourable comparison.

I recommend that dermatology and paediatric departments purchase this very readable reference book. Unfortunately the price is too high for many individual doctors to buy a copy for themselves.

J VERBOV
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dermatologist

Dewhurst's Practical Paediatric and Adolescent Gynaecology. Second Edition. By D Keith Edmonds. (Pp 148; £40.00, hardback.) Butterworth Scientific Limited, 1989. ISBN 0-407-01520-5.

Sir John Dewhurst established a unique understanding and experience in the very specialised field of paediatric and adolescent gynaecology which is nationally and internationally renowned. This is acknowledged in the altered title of this second edition of his classic book, which has been revised and updated by his 'apprentice' Keith Edmonds.

The adjective 'practical' is justifiably chosen, and the book provides a complete catalogue of detailed and thorough advice on the clinical features, aetiology, investigation, and treatment of all gynaecological problems of childhood, from ambiguous genitalia at birth to pregnancies in adolescents. Each chapter includes a careful list of references to relevant detailed studies and reviews.

This book provides an essential reference work for first line management of what are such important and yet uncommon conditions in the experience of most gynaecologists, and where erroneous initial treatment can have such unfortunate long term results. The advice on appropriate emotional care and understanding of the young patient and her parents is particularly helpful.

The book is written from the gynaecological point of view and essentially concentrates on the gynaecological aspects of these problems. Nevertheless it must be essential reading for paediatricians, and an important reference work for general practitioners.

The one disappointment is the surprisingly brief treatment of the problems of suspected or actual child sexual abuse. The author describes the conditions of vaginal discharge and vulvitis as being 'probably the only gynaecological disorders of childhood which may be thought of as common', but those of sexual abuse are becoming almost equally so (although the referral pattern may well be, rightly or wrongly, biased by the gender of the doctor!).

S TUCK
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Yearbook of Pediatrics 1989. By Oski Stockman. (Pp 683; £40.00, hardback.) Wolfe Medical Publications Ltd, 1989. ISBN 0-8151-6561-7.

Another year must have passed. I'm a year older (a bad thing) and another edition of the Yearbook has arrived (a good thing). We have both put on weight. The Yearbook has expanded from 550 to 670 pages and I've (well that's a secret).

It's hard to say anything new about the Yearbook, which is an old friend, and this edition maintains the high standard of previous years. The whole range of paediatrics is covered by original articles, and most are followed by fairly long editorial comment, always erudite and humane, and often funny. The usual helpful list of review articles is included.

How could the Yearbook be improved? Some years ago the American Academy of Pediatrics published a review of the Doman-Delacato programme, and pointed out that there was no objective evidence at all that this very expensive and arduous treatment benefited handicapped children. I wonder if the editors would consider commissioning occasional similar special articles on controversial subjects which would then have the authority of the Yearbook behind them? Subjects that could be considered include subclinical copper deficiency as a cause of fractures, hair analysis as a diagnostic test, the role of oxygen in the retinopathy of prematurity, and so on.

I do have one criticism. Very few papers from outside the United States are mentioned. Of 49 papers on oncology, haematology, and urinary tract, 36 are from America and none from the United Kingdom. Is no research carried out in this country, or should the editors widen their horizon?

The Yearbook is essential reading for any paediatricians who want to keep up to date, and I strongly recommend it.

M MONCRIEFF
Consultant paediatrician

Molecular Medicine: Cystic Fibrosis. By Peter Goodfellow. (Pp 96; £15 paperback.) Oxford University Press, 1989. ISBN 0-19-261835-0.

When I was invited to review this book I seriously considered declining as molecular medicine is not one of the strings of my bow. However, I thought, as this was the case at least if I read the book I might learn something. Few clinicians who have left medical school for longer than 10 years have more than a basic understanding of cellular chemistry let alone molecular biology. Most paediatricians, however, have some understanding of the clinical disorder of cystic fibrosis. One of the purposes of this review was to discover if this book would enlighten we clinicians who are so sadly ignorant about the basic sciences on the recent advances in the understanding of the

cellular defects in subjects with cystic fibrosis and the identification and location of the cystic fibrosis gene.

There are five chapters. Three cover the natural history, management, and prenatal diagnosis of cystic fibrosis and present a well written synopsis of the subject, accessible not only to non-medical research workers but also to lay readers. The other two describe the defects in epithelial ion transport and molecular genetics of cystic fibrosis. For the average clinician these chapters are undoubtedly difficult. However, those working in the subject at the interface of clinical and laboratory science will find them comprehensive, up to date and well referenced. It is for this latter group that I think this book will be most useful.

Sir Peter Medawar, in answer to criticism that too much scientific specialisation meant that scientists could no longer communicate with each other, said that 'scientists are getting less specialised not more'—physicists and chemists have entered the world of biology—and 'the reason [they] seem so seldom to communicate with each other is that they do not really want to . . . they want above all to be left to cultivate their gardens'. Certainly this book illustrates very well how the varied contributions of chemists, molecular biologists, clinical scientists, and others make for the understanding of 'that shapely whole' and while each may not understand how the other cultivates his garden at least we may all obtain a concept of how growth is proceeding.

S MCKENZIE
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Handbook of Neurological Investigations in Children. By John B P Stephenson and Mary D King. (Pp 244; £25 paperback.) Butterworth Scientific Ltd, 1989. ISBN 0-7236-1295-1.

What a welcome book to the slightly dull world of paediatric neurology. The authors have tackled their subject with enthusiasm and have produced a very readable and thought provoking book. The very individual approach adopted towards investigation of children with neurological disorders has made the subject very tangible for general paediatricians.

The first section of the book is devoted to each individual test and every chapter ends with well illustrated case histories. A step wise approach to investigation is supported and shopping lists are definitely out! The philosophy of investigations, their benefits, and harmful effects are discussed sensibly. We are provided with an up to date account of the most appropriate investigations available in the late 1980s. The chapters on electroencephalography and diagnostic imaging are particularly good. Although the chapter on biochemistry looks daunting, it is very readable and gives a succinct account of the variety of tests available. The linking of biochemical tests to clinical information enables easier digestion of the information.

The second half of the book is devoted to a problem orientated approach to investigation. This works very well and compliments the first half of the book well. The authors cover a wide range of common topics—some rather too briefly.

Each chapter is well referenced and the 10 page index is comprehensive.

This book is essential reading for all paediatricians, especially those in training, and the odd paediatric neurologist might consult it. These authors are a successful team