This will be a useful book to general paediatric departments whose workload includes a substantial proportion of the very young. Despite its bias to the most formative years of life, it will provide a most satisfactory choice as a single large text for any student of paediatric cardiology, and its price not out of proportion to current trends for this standard of publication.

J F N TAYLOR
Consultant paediatric cardiologist

Child Development and Child Health. By Martin Bax, Hilary Hart, and Susan M Jenkins. (Pp 417; £18.95 paperback.) Blackwell Scientific Publications, 1990. ISBN 0-632-02048-2.

With general practitioners embarking on child health surveillance and baby clinics, there will be a demand for books to fill gaps in their knowledge. This book is clearly designed to meet that need, and will do so to some extent.

The book covers child health and development from 0-5 years, drawing heavily on the authors' research at the Thomas Coram Research Unit. It includes normal development, developmental problems, health and health problems, with background information on social and environmental influences. It is a book to be read, rather than to be used for reference.

The information is presented in a confusing order, and is hard to summarise. The chapters on normal development are interrupted by one on growth. Some chapters include normal and abnormal (for example, feeding), and sometimes normal and abnormal are in different parts of the book (for example, development). There are three chapters on normal development, which is covered in some detail, and one on growth. This is followed by an interesting and useful discussion on the effects of the environment on development. There is a chapter on feeding, and one on immunisation, which is inevitably out of date, but this possibility is referred to and the reader is advised on keeping up to date. A section on problems follows (development, health, and behaviour). The final chapters are on the services and the interrelation between health development and behaviour. Appendices include growth charts and yet another summary of development.

There is a lot of repetition, particularly in the chapters on development. Normal development is described, then developmental testing, then a summary, as well as a summary in the appendix. In the chapter on behaviour, the management of a behaviour problem is separated from its description, leading to inevitable repetition. The odd order of subjects leads to anomalies, like the description of cover testing for squints in the section on six week checks.

The differences between surveillance and assessment is not made clear. One might infer that doctors should be doing detailed developmental assessment on all children at several ages. There is some attempt to emphasise the importance of observation of children and listening to what parents say, but the overall message is that doctors should be doing developmental 'tests' on children, which is a retrograde step. A description of hearing tests implies that doctors can do this without training. It includes scraping a spoon on a cup and whisper tests, both of which have been discouraged for some years, and will lead to misdiagnosis of hearing problems.

In a small book covering a wide area, it is hard to know what to leave out, but the balance in the chapter on developmental problems seems inappropriate. It goes into great detail on motor problems (20 pages), leaving one page to cover both hearing and visual problems. There is no mention of birth marks, which cause a lot of queries at the time of the six week check.

The best parts of this book are the general chapters on social and environmental factors, and on the relationships between child health and development. I hope the rather unappealing baby on the front cover does not put people off.

C R PULLAN
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Pediatric Intensive Care. 2nd Ed. Edited by Eliezer Nussbaum. (Pp 964; \$150 hardback.) Futura Publishing Company Inc, 1989. ISBN 0-87993-343-7.

The task of the editor of a textbook on paediatric intensive care is probably insuperable, if the subject is to be contained and controlled, if indeed it can be defined. Dr Nussbaum has approached the second edition of the original 1984 text with a vast increase in size, number of contributors, and topics covered. To know how to limit the potential content is the prob-

lem, for all aspects of acute paediatric care can be included.

In the major reorganisation of the text, the editor has continued with a multisystem approach, but has broadened this extensively with 25 extra chapters, which provide reviews and therapeutic regimes for conditions not covered in the first edition. Other chapters are updated and some appear totally unchanged. As would be expected, there is a wide variation of quality and content, with 58 contributors. There is some overlap and repetition, which tighter editing would have prevented. The quality and clarity of the tables, which was such a feature of the first edition, is not apparent in all the chapters of the second. The reviewer must take the proof readers to task for many spelling errors and a lack of consistency in the use of abbreviated forms (cc, ml, and mL all appear as do torr and mm Hg). A more serious typesetting error is the loss of alignment in the chapter on poisoning, where on adjacent pages it is impossible to cross refer accurately, with potential danger to the patient.

What lifts this second edition out of a 'run of the mill' competent category, is the section written by Dr Radetsky on ethics, informed consent, treatment limitation, and brain death. Although this is for an American audience, with a base of its laws and attitudes, it is riveting reading for all doctors.

There are some surprising omissions. The paediatric intensive care unit (PICU) is not considered as an entity from an organisation and management view point; there is no allusion to medical audit; outcome predictors and therapeutic scorings are neglected, as are transport, costs, and use of information technology. Pain relief in children and sedation in the PICU, are two vital topics that receive but scant attention.

Paediatric intensive therapy is not as yet a recognised subspecialty in the UK. Although multidisciplinary PICUs exist in the major children's hospitals of the conurbations, it is not feasible for them to receive all the children with multisystem failure. Whether or not they do, this new edition of Dr Nussbaum's book, despite the criticisms, will be of considerable value to the doctors in the major centres, and peripherally, in the various disciplines providing care. It brings together in one volume a theoretical background and much sound practical advice, and detail on a wide range of clinical problems.

E A SHAW
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