concentrations within the clinic setting using commercial kits.

We submit probably too few patients with intractable epilepsy to surgery (Loynning). The results of the Norwegian and American experiences have been surprisingly encouraging. It is probably the paucity of centres with experience in selection procedures that has limited the numbers over the years. Alternative approaches to managing epilepsy along behavioural lines are explored by Dahl with a critical review of research in the area. The closing chapters deal with prognosis and habilitation of the child within the family and community. The latter is detailed in a series of chapters describing the experiences of different Scandinavian countries.

In conclusion, this collection of chapters on paediatric epilepsy provides a very readable and up to date review on the current state of the art. Although its price and the somewhat Scandinavian perspective may discourage individual purchase, there is little doubt that it would be an invaluable addition to any general paediatric library.

R M BUCHDAHL
Consultant paediatrician

Mixed Blessings: Intensive Care for Newborns. By Lynda Lytle Holmstrom and Jeanne Harley Guillemin. (Pp 317; £13.50 paperback.) Oxford University Press, 1990. ISBN 0-19-506659-6.

I believe the book has been written by two sociologists but no reference in the introduction to their profession is perhaps deliberate to keep the reader unbiased. It is all about the interprofessional relationships in a level III neonatal intensive care unit in the USA. The authors spent a lengthy period at one particular unit in America and then visited other countries including the UK, but there describing only the organisation of perinatal care. The book is really aimed at the American market and some of the situations could only happen in the USA. However, there is something of interest for all in neonatal intensive care units in any country. If I were going to list the professionals who would get most out of the book they would be psychologists, social workers, managers, nurses, and then doctors in that order.

I loved the dialogue. A compilation of quotes from various parts of the book could be as follows:

Resident at morning round: 'Last night I transported a preemie of 600 g who seized [convulsed] all the way. He arrested on arrival so I retubed [reintubated] him. He was really crumping [deteriorating] all night but didn't have the decency to check out [die]. If he makes it, he'll probably be a gork [severely retarded].'

Fellow: 'Does this kid have a murmur?'

First resident: 'Intermittently. . .'

Second resident: 'I don't think so'.

Third resident: 'Me neither'.

Nurse: 'I do. I've heard it'.

Fellow: (sarcastically): 'Then yes it is!'

Mixed Blessings deals with referral to the neonatal intensive care unit, the running of that unit, and the ethical problems created. It describes with great insight the positive and negative relationships of all who work together and the behind the back gossiping and the heart rending antiturn out open sessions orchestrated by the unit psychiatrist. The

good guys are the nurses, the bad guys are the doctors, and the really bad guys are the directors of the units who are out of touch and appearing only for the grand rounds. UK readers will smile at the thought of social worker rounds—not because it is a bad idea but because social workers are like gold dust. When present in great supply as in the unit described in the book, only the nurses attended the rounds which were boycotted by the doctors.

Although criticism is levelled at the inconsistency of ethical decision making, the authors present no better solutions. The book is not an exercise in philosophy but more a commentary on what actually happens. If one remembers that these are the views of outsiders looking at the drama of neonatal intensive care which we take for granted, then the merits of the book come through. On my unit, I see it a helpful book for nursing projects on organisation, staffing, or ethics. Doctors will mainly have a good laugh but that's how the book describes us and I wouldn't want to ruin our image.

J G BISSENDEN
Consultant paediatrician

Kendig's Disorders of the Respiratory Tract in Children. 5th Ed. Edited by Victor Chernick. (£130.50 hardback.) W B Saunders Company, 1990. ISBN 0-7216-2214-3.

This new edition comes only seven years after the last and perhaps illustrates the growing importance of paediatric respiratory medicine in North America. It is a large multiauthor textbook with mainly North American contributors. It has a reputation of being a 'bible' of paediatric respiratory medicine and this edition will help to maintain its place as an important reference book.

Although only 50 pages longer than its predecessor, it does weigh almost 1 kg more! It covers all aspects of paediatric chest medicine from neonatal disorders to the rare and esoteric. There are seven new chapters which include up to date information on infant lung function, exercise testing in children, sleep disorders, and chest problems in paediatric AIDS, all of which are useful additions. The chapter on chest problems in paediatric AIDS is particularly good. Many chapters have been updated and are excellent, including those on sudden infant death syndrome, a large section on respiratory infections, and the chapter on cystic fibrosis. However, some sections are disappointing. The chapter on asthma, although strong on pathophysiology, is weak on clinical management. It tends to portray American views on management with little mention of either sodium cromoglycate or inhaled steroids.

In general the accounts of physiology and pathophysiology are very good. Any multi-author book of this size will contain omissions, but it is still a very helpful reference book for paediatricians with an interest in respiratory medicine, as well as for juniors in training in this subspecialty. However, I would not recommend it for medical students, or for doctors who do not have a particular interest or knowledge of paediatric respiratory medicine. There are smaller and cheaper books available!

P H WELLER
Consultant paediatrician

Basic Mechanisms of Pediatric Respiratory Disease: Cellular and Integrative. Edited by Victor Chernick and Robert B Mellins. (Pp 449; £69.50 hardback.) B C Decker Inc, 1991. ISBN 1-55664-137-0.

As stated in the preface, this book has been produced to bring together current knowledge on the cellular and molecular biology of the lung, together with up to date information on the anatomical and physiological development of the respiratory system and how this can be affected by pathological processes. There is an initial statement on contribution of DNA technology to our understanding of lung disorders, followed by a very clear section on the factors controlling the development and repair of the lung at cellular level. The remainder of this second section is on the prenatal and postnatal development of the lung and the pulmonary circulation and how these processes can be disturbed by cardio-pulmonary disorders. The third and largest is on the developmental physiology of the lung including the development of upper airway reflexes and laryngeal function, lung mechanics in the developing infant, and what is currently known about the transfer and transport of oxygen and carbon dioxide, fluid, and electrolytes in the lung. The remainder of this section is concerned with respiratory control before and after birth, cardiorespiratory interactions, neural control of the lung, bronchial reactivity, and exercise. The fourth section on developmental biochemistry is concerned largely with the surfactant system in the newborn, and also a very good reference section on oxidants and antioxidants and airway sections. The next section is concerned with the development of pulmonary defence mechanisms including inflammation and mucus clearance, and the remaining 50 pages on lung imaging, nuclear medicine, aerosol treatment, and current concepts in high frequency and jet ventilation.

This book is likely to have a fairly restricted readership, but will prove invaluable to anyone with a significant interest in the respiratory system, particularly those about to commence research related to the growth, development, or physiology of the lung. I personally found this one of the most exciting books that I have come across for a long time. It should certainly be held by all the major medical libraries in the country, and even at the relatively high price of £69.50, represents excellent value.

A D MILNER
Professor of paediatrics

Tumors of the Newborn and Infant. By Hart Isaacs Jr. (Pp 251; £53.50 hardback.) Mosby Year Book, 1991. ISBN 0-8151-4809-0.

Tumours provide a supreme example of the way that specific disorders may be linked to particular periods of development. In the newborn infant neuroblastoma and teratomas are the most frequent forms of tumour, leukaemia is the major fatal tumour, and malignant tumours of the kidney are almost unheard of. Within the first year of life the whole range of paediatric tumours may become manifest including three different varieties of malignant renal tumour alone.

This changing pattern of developmental tumours with age provides ample justification for Hart Isaac's new monograph dealing specifically with tumours seen in the newborn or infant. Initial chapters on aetiological