text. Nevertheless, some of the strengths of this book are the abundant lists, tables and algorithms which distil core information, and the extensive bibliography. The quality of some of the figures is a little disappointing; however, this is a solid reference text which will inform and stimulate.

A MARK DALZELL
Lecturer in child health

- 1 Walker WA, Durie PR, Hamilton JR, Walker-Smith JA, Watkins JB, eds. *Pediatric gastrointestinal disease*. BC Decker Inc, 1991.

Synopsis of Paediatrics. By Alex Habel. (Pp 749; £49.50 hardback.) Butterworth-Heinemann Ltd, 1993. ISBN 0-7506-1352-1.

This is a book which, in the author's words 'attempts to bridge the gap between the 2 kg tome and the pocket size *Paediatric Vademecum*'. Having never previously thought of a book by its weight, I pulled a few of my paediatric tomes off the shelf and put them on the kitchen scales. To my surprise the book that weighed the closest to 2 kg was the *Synopsis of Paediatrics* itself!

Although others have gone before, most notably *Essential Paediatrics*, by Hull and Milner, there is always a need to summarise and condense a rapidly diversifying field such as paediatrics. In his attempt to do just that, I would like to applaud Alex Habel's Herculean achievement. The book ranges from the pathophysiology of sepsis, resuscitation of the newborn including details of drug doses, to community paediatrics, epidemiology, and child psychiatry 'all under the same roof'.

As a synopsis, it is a rich source of information which is clearly tempered by the author's own clinical experience and tries to reflect an 'average view' of the topics. The liberal use of headings and subheadings makes it very readable and easy on the eyes. For all its strengths, however, I remain doubtful whether a book of this size really can be all things to all people. As it would not fit into even the most 'designer' of pockets, there seems little point including so much practical details. To include a physiology sections in such a brief and simplified form is of questionable value. There is also a rather unnecessarily rigid adherence to a problem orientated approach, which sometimes creates confusion and leads to a lot of unnecessary repetition; congenital cardiac problems are covered both in the cardiology section and in the neonatal section to name but one example. One area which should have been expanded is a good reference list and bibliography. By not including this, an opportunity has been missed for the book to appeal to a much larger market.

S ROTH
Consultant paediatrician

Multiple Choice Questions in Dermatology. By S K Goolamali. (Pp 144; £7.95 paperback.) Wolfe Publishing, 1992. ISBN 0-7234-1769-5.

It has been argued that dermatology is the study of skin and all it contains. This concept is clearly embraced with enthusiasm by the author of this ambitious little manual.

Anybody studying it carefully cannot fail to be stimulated and informed. They may be even irritated (as I was) into going to original sources to check up on what seemed to be some of the more outlandish and certainly unexpected answers to many questions. After the vast majority of such expeditions, I came home chastened but informed.

Clearly some of the answers have had to be based on a balanced judgment, rather than a simple straightforward and factual response, but the author succeeds admirably in imparting (quite painlessly) very considerable amounts of information, not just relating to dermatology but about general medicine, paediatrics, and many other specialties. The author's aims were to familiarise students and non-dermatologists with the concept that the skin may reflect internal disease; and secondly to provide packaged information on selected subjects to help the reader consolidate previously acquired facts or identify subjects that require further in depth reading. His third aim was to give practice to those students who are obliged to take examinations where multiple choice questions are used routinely. In my opinion he succeeds in all of these aims, and the book will be of great use at almost all stages of a student's career – whether undergraduate or postgraduate studying for MRCP. Perhaps established or elderly consultants in medicine and dermatology should be warned off as the depth and width of knowledge clearly accepted as the norm here for their juniors will profoundly depress them.

J S COMAISH
Consultant dermatologist