SPRING BOOKS

Paediatric Day Case Surgery. Edited by N S Morton and P A M Raine. (Pp 119; £37.50 hardback.) Oxford University Press, 1994. ISBN 0-19-262256-0.

Increasing ambulatory care and reducing inpatient stay have become major health trends. Paediatricians and paediatric surgeons can justifiably be proud that they have been ahead of the times. Day case surgery, suitably delivered, appeals to policy makers, purchasers, patients, doctors, and nurses alike. New day case units are being set up all over the country in recent years. The publication of Dr Morton's and Mr Raine's textbook is therefore very timely. Although different aspects (organisational, anaesthetic, surgical, etc) of the book may have been covered in relevant specialty textbooks and journals, this book is the first of its kind to devote itself comprehensively in a single volume to the topic of paediatric day case surgery.

It starts with a chapter on history and reminds us of the long tradition of paediatric day case surgery in Glasgow – practised by James Nicholl as early as 1899. Some of the arguments he put forward are as pertinent today as they were at the turn of the century.

I found the chapter on facilities a little too brief. Planners for the establishment of new paediatric day case units or improvement of existing day case units may wish for more details. Description of the actual layout and staffing of a large day case unit, such as that in Glasgow, and a small successful unit elsewhere could provide useful models for planning.

Patient selection, assessment, and preoperative preparation are presented in great detail. Tables on the exclusion criteria for paediatric day case surgery and the American Society of Anesthesiology classification of physical status are particularly useful and should be made compulsory references for any staff involved in the admission of patients. Personally, I will place copies of these two tables on the notice board of my clinic and the day case unit. The risk, inconvenience, and organisational chaos that result from an inappropriate admission to a day case unit cannot be over emphasised and not infrequently an entire operating list can be ruined because of omitting to observe guidelines for exclusion as a day case.

There is an excellent description of anaesthetic management. Principles and details of both general anaesthesia and local anaesthesia are clearly presented in the text, supplemented by superb coloured illustrations. I enjoyed reading different methods of local anaesthesia. There is now a lot of emphasis on the quality of delivery of minor surgery and pain relief is undoubtedly one of the most important elements. The introduction of Emla cream has done much to allay children's fear of insertion of a needle before induction of anaesthesia. Despite the popularity of Emla cream, perhaps not everybody is aware that Emla stands for eutectic mixture of local anaesthetics and that the cream should be administered at least one hour before the procedure. Postoperative pain relief is equally

important and modern techniques for infiltrating relatively long acting bupivacaine either into the wound or as nerve blocks should now be standard practice in paediatric day case surgery. The vivid description of various nerve blocks make the reader feel that he/she can become an expert in their administration following the step by step instructions. While the effects of local administration of different systemic analgesics are less clearly defined; this may be the next area for improvement in paediatric day case surgery. It is sometimes not appreciated that when the patient is on the way home in a taxi or the family car, effects of the local anaesthesia may wear off, resulting in considerable stress.

Surgical techniques of common operations performed on a day case basis are described with adequate illustrations. The need to mark the side or site of intended operation with indelible ink cannot be over emphasised – complaints and legal claims can result from omission of this rule. Marking the site of an epigastric hernia by a cross, as illustrated in the book, may however carry the risk of tattooing unless the ink is removed from the line of incision before surgery. My personal preference is to use two vertical arrows above and below the lesion pointing at it without encroaching on the proposed transverse incision. Description of the operations in this chapter should give sufficient information for non-specialists such as general practitioners and nurses to participate constructively in the team care of their patients. Laparoscopic surgery is a rapidly expanding field and, although its role in children remains to be defined, some simple laparoscopic procedures are likely to work their ways into the repertoire of paediatric day case surgery. Laparoscopy is not mentioned in this book but I predict that procedures such as diagnostic laparoscopy for impalpable testes, laparoscopic ligation of testicular vein for varicocele, etc will feature in a new edition.

The book rounds off with useful instruction on postoperative management. Nevertheless, more details would be welcome here. In some units, 'certificates of bravery' are issued to children – these are well earned and often much appreciated. Leaflets of discharge advice containing specific information about the relevant procedure are useful, for example a leaflet on circumcision will tell parents that their son should have a bath the day after the operation and at least once a day thereafter, that the penis may look sore and swollen for the next few days but not to worry as it will soon look normal again.

Paediatric day case surgery is here to stay. This book contains a succinct description of how to achieve it effectively and safely. It is highly readable and provides an excellent reference for any person involved in providing day case surgery for children and is therefore highly recommended.

PAUL TAM

Clinical reader in paediatric surgery

Atlas of Paediatric Urologic Surgery. Edited by Frank Hinman Jr. (Pp 140; £135 hardback.) W B Saunders, 1994. ISBN 0-7216-4231-4.

Paediatric urology is now a well accepted subspecialty. The British Association of Paediatric Surgeons recommends that there should be one paediatric urologist in a regional centre serving 2.5 million population. There can be no question that the best results in managing major urological prob-

lems in children are achieved by surgeons who limit their practice to the subspecialty. Nevertheless, local needs will continue to require paediatric surgeons, urologists, and general surgeons to perform common urological operations in children as part of their service. This book aims to cater not only for the very small market of the subspecialists but also for the much bigger market of the generalists. It is therefore a very comprehensive volume covering a range of procedures from circumcision, hernia repair, and orchidopexy to reconstruction of bladder extrophy.

Atlases are intrinsically attractive to surgeons. Manuals of surgical techniques with step by step instructions, accompanied by clear illustrations, are to surgeons what recipes are to cooks. In this day and age of multiauthorship textbooks (one recent textbook has four professors contributing to one page) this atlas is unique in being written by a single author with illustrations drawn as viewed at the operating table by a surgically oriented illustrator. This is possible because the author writes from a vast experience, accumulated over a long and distinguished career in the subspecialty. The style is therefore consistent and authoritative. To provide a broad base of information and allow for alternative views, the author has cleverly invited commentaries to each chapter from experts in the field. The book, however, is heavily based on an American experience with the author and most of the commentators from the US – only five out of 108 commentators come from the UK.

The text of the book is well written. Perhaps my expectation of the illustrations was too high but while they were mostly acceptable I must confess that I have seen better drawings elsewhere. There were occasional lapses and, in the illustrations of the dismembered pyeloplasty, it took me a little while to figure out that the illustrations did not correspond to the view of the surgeon operating on the side indicated by the first figure. I also find the shading of the illustrations rather unnatural.

The book rightly devotes a section on preparing for paediatric operations. Some of the instructions differ from practice in this country but most of the principles apply. The chapter on 'preparation for surgery' starts with a section on bowel preparation. Readers should be aware that this is not universally required for all of the procedures described in the book – for example circumcision! There are useful tips for general operative techniques as well as postoperative management with drains, catheters, tubes, stents, dressings, etc, which are often baffling to the non-specialists and their staff.

The remainder of the book is divided into sections for each organ. Different surgical approaches to the kidney were described as well as common procedures including pyeloplasty and nephrectomy. I find it surprising that management of renal calculi has been omitted and there was only a three paragraph description of ureterolithotomy. Not all stones are suitable for extracorporeal shock wave therapy or endoscopic manipulation, nor are these facilities universally available.

Different operations for the ureter are described. For reimplantation, the Politano-Leadbetter technique is favoured; in the UK the Cohen technique is popular. There is surprisingly no mention of the STING (submucosal Teflon injection) procedure for the treatment of vesicoureteric reflux. This perhaps reflects a transatlantic bias towards a procedure first developed in Ireland.

Most of the chapters on the section for the bladder describe specialist works including: reconstruction, diversion, augmentation, and substitution – procedures that should not be attempted by surgeons with occasional practice.

There are good descriptions on various techniques of orchidopexy with recognition of the use of laparoscopy for impalpable testes and orchidectomy.

The last section is on the penis and urethra and contains detailed descriptions for common procedures including circumcision, treatment of concealed and webbed penis, and the most popular methods of hypospadias repair. While the surgical techniques are described in detail I regret that there is scant discussion on the indications for a common procedure such as circumcision. There is plenty of evidence in this country that many unnecessary circumcisions are being performed. It is still not adequately recognised that failure to retract the foreskin in the first four years of life is not abnormal and that medical indication for circumcision in this age group is rare.

At £135 this textbook does not come cheap but overall it is an excellent book and will serve as an invaluable reference for any surgeon involved with the care of urological problems in children.

PAUL TAM

Clinical reader in paediatric surgery

Community Paediatrics. 2nd Ed. Edited by Leon Polnay and David Hull. (Pp 479; £35 paperback.) Churchill Livingstone, 1993. ISBN 0-443-04250-0.

All paediatricians need to keep up to date with community child health and some still need to discover its fascination. This is a field where thinking is developing rapidly and services are changing, but a historical perspective remains crucial. *Community Paediatrics* is currently the best basic text on the bookshelf covering the essential elements that all paediatricians in training need to know about. It offers an easy read to those broadly familiar with the contents already.

The format of the new revised edition provides a brief historical background followed by an account of the current provision of health, education, and social services. The section on benefits will date, but is still useful. The one on the law could be expanded to include a European perspective as we move ever closer.

The information section, supplemented by the later chapters and appendix, is useful, but more on information technology in child health could have been included. Examples of audits undertaken would stimulate interest and pointers to areas where further research is indicated would be a major asset.

The basics of growth, physical and emotional development are well covered. Perhaps accidents do not receive the depth of coverage they deserve considering their importance in child health, particularly after infancy, but the multidisciplinary and inter-agency aspects are clearly illustrated.

The section on child protection precedes the chapters on disability, which are excellent. Throughout the book key data, summaries, tables, and facts are highlighted in green. This attractive layout breaks up the text in a useful way.

There is a very good introduction to emotional and behavioural problems while

the section on genetics is essential but short. References are more than adequate for a basic text and generally up to date.

At present there is discussion about the syllabus for paediatricians in training. There is a need for clearer definition of the knowledge and skills needed at both basic and higher training levels. The examinations in paediatrics have included an increasing number of community topics, so the comprehensive revision undertaken to produce this second edition is both timely and very worthwhile. I strongly recommend it to paediatricians at all levels.

SHEILA SHRIBMAN

Consultant paediatrician and director of child health

Essential Paediatrics. 3rd Ed. Edited by David Hull and Derek I Johnston. (Pp 365; £21.51 paperback.) Churchill Livingstone, 1993. ISBN 0-443-04782-0.

The authors of the third edition of *Essential Paediatrics* claim that it is just that – 'The essential core of knowledge required by medical students during their clinical course'. As a whole this is exactly what it manages to achieve.

Written by Sir David Hull and Derek Johnston, in conjunction with 13 experts associated with Nottingham University who contribute on aspects of the many paediatric subspecialties, this textbook is both sufficiently comprehensive for finals, yet free from excessive detail. At first glance it is well laid out with important points clearly highlighted, either in diagrammatic form or in tables. The numerous illustrations are easy to memorise, constitute effective summaries, and provide welcome breaks in blocks of text, as does the use of colour type.

This latest edition is far more user friendly than its predecessors; boasting colour photographs, the authors have obviously woken up to the effectiveness of visual aids in keeping medical students awake. Similarly, colour is utilised throughout in drawing the reader's attention to salient sections of text. Many of the radiographs are accompanied by diagrammatic representations which aid interpretation, a necessity for most medical students.

The 21 chapters cover the main systems of the body as well as more specific topics such as growth, mental handicap, and behaviour. In particular there is a useful introductory chapter on 'the ill child and his doctor' explaining how to take a history, though more importantly how to cope with the awe inspiring task of examining a strange child for the first time, and deal with anxious parents too.

There is some material superfluous to an undergraduate medical course, especially the 'genes' chapter, which goes into far more detail than the average medical student needs or understands. In contrast, the chapter on emotions and behaviour, tucked away at the back, skims over some topics too briefly. A subject like sexual abuse and its consequences for children and adults is covered in eight lines, and although the bibliographies at the end of each chapter offer useful pointers for more detailed reading there isn't one on child protection.

An appendix contains an easy to find list of all the normal values that an undergraduate would ever need as well as an effective outline of the child health surveillance programme, a summary of the UK immunisation schedule, and a paediatric formulary.

From medical students' point of view, it updates an established and popular book that is already viewed as one of the best student paediatric texts on the market. Its readability is a strength, and with such tightly packed student schedules, it provides easily absorbed, succinct material yet manages to engender an enthusiasm for paediatrics.

KATIE BROCKLESBY
Medical student

Child and Adolescent Psychiatry: Modern Approaches. 3rd Ed. Edited by Michael Rutter, Eric Taylor, and Lionel Hersov. (Pp 1122; £69.50 hardback.) Blackwell Scientific Publications, 1994. ISBN 0-632-02822-X.

The publication of the first edition of *Child and Adolescent Psychiatry: Modern Approaches* in 1976 was a major landmark in the child psychiatry literature. Those were exciting times for specialists working in the field of child psychiatry. The time was indeed ripe for a new and different textbook of child psychiatry aimed at providing a comprehensive account of the current state of knowledge through the integration of research findings and the understanding that comes from clinical practice. The book became a bible for child psychiatrists in this country and internationally.

The just published third edition has been duly responsive to the considerable professional changes of the last two decades, and the increase in scientific work relevant to the practice of child and adolescent psychiatry. The book has been completely rewritten and new and fresh approaches to the subject reflected in the new chapters. They acknowledge the decreasing importance of theoretical approaches, psychodynamic and otherwise, and the increased influence of developmental psychopathology. A richer appreciation of the role of biological factors in the origin of psychological disorders becomes apparent and the relationship between child and adult disorders is similarly given considerable attention. The involvement of mental health professions in the consequences of child abuse had led to a chapter on this topic and there are also chapters on psychiatric involvement with infants, and the AIDS pandemic. The coverage of treatment issues has been increased: and the evidence from trials as a basis for therapists' actions is carefully reviewed.

For paediatricians who still think of child psychiatry as a purely clinical endeavour strongly influenced by psychological theories, the depth and range of the discussion on underlying scientific issues may be a revelation. Advances in the classification of psychiatric disorders provide interesting reflections on the nature of classification in medicine generally. Of particular interest to paediatricians should be the chapters on interviewing parents, children and families, on clinical neurophysiology, on genetic chromosomal and brain influences on childhood psychopathology. The effects of chronic adversities, of physical and emotional maltreatment, and of family breakdown are also relevant to the work of paediatricians, particularly community paediatricians.

Recently there has been an upsurge of interest in disorders such as post-traumatic stress disorder, depression, neuropsychiatric problems such as obsessive compulsive disorders and tics. These are fully described