Finally Witmer states that her aim has been: ‘... to show that psychotherapy is a living process, not a text book of set rules, and that he who would practise it must learn how to translate theory back into the language from which it originated—the symbols that two persons, psychiatrist and patient, use when they want to communicate with each other to therapeutic ends’ (p. 433.)

The most topical page (in view of the recent publication in England of Anna Freud’s book, The Psycho-Analysis of Children, is that on which there is a discussion of the establishment of the therapeutic relationship (p. 39): ‘Anna Freud says that the psychiatrist must strive to secure from the child an affectionate attachment, with its accompanying faith in the therapist, admission of illness, and desire for recovery. To this end she suggests that the therapist strive for the child’s love, stress the seriousness of his disability, and insinuate himself into his confidence.

American child psychiatrists (perhaps reflecting American belief in individualism, even for young children) put less emphasis on “winning” the child and more on the child’s own interest in being helped.’

Many British child-analysts would range themselves with Witmer in this discussion, if the description of Anna Freud’s view is accurate. British child-analysts might go further and express doubt as to whether, even Witmer and her co-authors have appreciated the full depth of the unconscious co-operation of the child in a working analysis.

**Mongolism and Cretinism; A Study of the Clinical Manifestations and the General Pathology of Pituitary and Thyroid Deficiency.** By **CLEMENS E. BENDA, M.D., Director, Wallace Research Laboratory for the Study of Mental Deficiency, Wrentham, Mass. 1947. London: William Heinemann (Medical Books), Ltd. Pp. 330.** (Price 25s.)

This book is based on a study of over three hundred cases of mongolism and fifty autopsies, a number of the cases having been studied over a period of ten years. Cretinism has been included for purposes of comparison and contrast, though it is treated less fully. The most interesting section is that dealing with endocrine pathology in both conditions. In forty-eight autopsies on mongols, the author considered the thyroid normal in only two, whilst the anterior pituitary he describes as showing two types of pathology: (1) deficiency of the gamma cell system and general inability of formation of chromophilic elements, and (2) chromophilic shift toward eosinophily with absence or deficiency of gamma cells and pathology of beta cells. He considers mongolism an example of primary pituitary dysfunction and that therapy calls for the use of an effective anterior pituitary extract. Such he admits is not yet available, but he claims some effect with a thyrotropic hormone used in a single case after thyroid administration alone had proved ineffective. He urges more detailed endocrine studies during pregnancy with a view to determining latent hypothyroidism, hypopituitarism, or hypogonadism, and adopts a somewhat optimistic view with regard to the future possibilities of preventing mongolism. The book is well worth reading if only because the author is not prepared to accept the completely defeatist attitude toward one of the commonest types of mental defect. The fact that the reader is unlikely to go all the way with him, even in his description of the mongol as a ‘pituitary cretin’, does not lessen the book’s interest.

**Diseases of Children’s Eyes.** By **JAMES HAMILTON DOGGART, M.A., M.D., F.R.C.S., Ophthalmic Surgeon, Hospital for Sick Children, Great Ormond Street, and St. George’s Hospital, London.** With 210 illustrations including 32 coloured plates. 1947. London: Henry Kimpton. (Price 42s.)

The author has performed a real service to the profession in bringing together in one volume of reasonable compass the widely-scattered information on which it is based. The physiology and anatomy of the eye in infancy and childhood is seldom well described even in the larger works of reference devoted primarily to diseases of the eye in adult life, whilst it is often necessary to hunt the literature for information on diseases peculiar to childhood which may have secondary ocular manifestations. Minor criticisms might be made: a rather high proportion of the illustrations are borrowed from other authors, and the references are not as extensive as might be desired; the sections on disordered movement and squint, though excellent, might well have been expanded in view of the importance of these conditions. In general, however, this is a thoughtful, stimulating book based both on wide personal experience and reading, and one which should prove invaluable for reference to both the ophthalmic surgeon and the paediatrician.


This is a study of the individual diets of one thousand children, carried out from 1936 to 1939. The food eaten by each child was weighed over a period of one week, and the diets translated into terms of their constituents. The diets were correlated with individual heights and weights, and some other clinical observations were made. It is regrettable that the long delay in publication has rendered some of the data of historical interest only; but it will at least serve as a valuable standard for comparing with conditions in later and less happy days.