REVIEWs


Most of the readers of this journal are concerned for the clinical aspects of children’s diseases and they use biochemical and biophysical techniques in direct application to clinical problems.

This textbook, which is the first comprehensive and authoritative text on electroencephalography, may well daunt them, for the major and best part of it comprises a detailed account of the purely scientific background of the subject. The chapters dealing with the physiology by Dr. Whitteridge, biochemistry by Dr. Heppenstall, and pharmacology by Dr. Greville comprise critical reviews of the first order and the introductory chapters dealing with the equipment, technique and interpretation give a most detailed and clear account of the physical basis of electroencephalography. Here the electrical analysis and synthesis of records shows to its best advantage, for the student can see how these complex and seemingly irrational tracings are made up of integrated sinusoidal waves, some of which can be correlated to clinical phenomena. The pattern of these waves is very different in childhood, and a fully mature series of records is not usually obtained until after puberty. The immaturity of children’s records not only influences interpretation, but it also modifies the electrical response of the cortex to abnormal states such as epilepsy. This aspect of the subject is repeatedly illustrated in the text.

Where technical facts are concerned the book is admirable but it is weaker in the chapters dealing with clinical electroencephalography, perhaps because electroencephalographers are not clinicians, because clinicians have not sufficient electronic knowledge, or because the integration of clinical and laboratory data is still immature. Although Dr. Walter deals with the electroencephalographic phenomena found in epilepsy very carefully, all his illustrative records bear the tracings of electrical analysis of the electro-encephalogram which are not seen in many laboratories, so that their meaning is not at once evident. Similarly Dr. Cobb’s chapters on tumours and trauma are mainly illustrated by records made with a two channel apparatus, which is unlike any equipment in use today. Because of these deviations from usual practice, and because of the weakness of the clinical correlates, these sections do not maintain the excellent standard of the entirely technical sections of the book. Dr. Hill does not have the same difficulty in dealing with his subject of psychiatry. He begins his admirable review by saying that ‘at the outset it must be recognized that strictly within this field, disappointingly little has emerged’, and then goes on to integrate these advances which have taken place. This integrity of attitude in the difficult marriage between electronics and clinical medicine is one which too few have managed to attain.

The book is very well produced, fully illustrated, and includes technical appendices, an accurate index and a comprehensive bibliography, which is, however, being rapidly superseded. The need for the book will secure a wide sale.


Reports like this tend to correct ‘impressions’ and to open new avenues to explore. In the former report covering 1930 to 1935, the assumption was made that measles would not spread if only a small proportion of susceptibles were present. Further figures in this report, which deals with the same schools from 1935-39, show that measles seem to spread even if there are a few in the school unprotected by a previous attack. Similarly it is stated ‘from the very limited data available it would appear contrary to some opinion, that an attack of chicken-pox does not necessarily confer immunity from herpes zoster’.

The report has its limitations.

The foregoing paragraph: ‘During the period 1935 to 1939 there were very few instances of measles exhibiting any of the usual complications. Out of 786 cases recorded in boys’ schools 14 (1.78%) also had associated otitis media and 12 (1.53%) developed pneumonia. In the period 1930 to 1934 the complications were slightly more frequent, the percentages being 2.7 and 1.9. In the girls’ and naval schools the proportion of complications was negligible: 0-65% of measles attacks in the former were associated with otitis media compared with 3.1% in the earlier period while no cases developed pneumonia compared with 1% during the years 1930 to 1934.’

stimulates the question: ‘Is this because of the sulphonamides or in spite of them? Certainly in many areas sulphanilamide was not available in 1939.

One startling feature of the report is the relative figures for diphtheria, tuberculosis, and anterior poliomyelitis. In the naval schools averaging 1,300 boys, the boys’ school averaging 4,000 and girls averaging 1,500, there were two cases of diphtheria in the naval, ten in the boys (four single and an epidemic of six) and nine in the girls. The incidence of anterior poliomyelitis was five (four in one boys’ and a single case in another, boys’ school). Tuberculosis caused two deaths from meningitis and four other cases in the naval school; 13 cases in the boys’ and three in the girls’ schools. Possibly three cases were doubtful, but to balance this