

many years'. Few are privileged to write so authoritatively on the clinical and pathological aspects of skeletal disease.

The introductory classification of the diseases considered is a revelation of clear thinking and logical arrangement. Sir Thomas has always shown special care in the proper use of words in the nomenclature of diseases in bones and his present list should be accepted as authoritatively correct.

The scheme of presentation adds to the delight of the book, and in nearly every sentence the reader gains something from the fund of personal wisdom displayed and the clinical ideas interpolated gently but persuasively. Not only the core of the subject matter is vividly in focus, but the variations in each particular instance are brought out in an absorbing relevance.

'An Atlas of General Affections of the Skeleton' will be immediately accepted as a classic in the medical writings of paediatrics. A very large part of the book is related to congenital developmental errors and to problems of nutrition and metabolism. Each chapter is appropriately planned to contain a general discussion on a particular abnormality followed by descriptions and radiological illustrations (and sometimes photographs of the patient) of personally studied cases. Thus the reader is never in doubt of the vast experience incorporated into the book. The historical notes, often serving to introduce the particular syndrome, give further point to the author's sense of responsibility and thoroughness in making known the steps whereby the present status of knowledge has been reached. As an example of the easy power of description, Chapter 32 on renal osteo-dystrophy is recommended for study; all that is known in this extensive field is brought out by the plainest of language in no more than four pages.

The once common diseases, such as infantile rickets, are presented in a refreshingly new way, but by wise action the variety of rickets, e.g. resistant or continued rickets, and some other types of rickets which are relatively more frequently seen at the present time, are given appropriate emphasis both by word and precision in x-ray illustrations. Moreover, in many of the case histories and notes there is an abundance of therapeutic method and prognostic data. It might be fairly stated that Sir Thomas has actually written a series of chapters on the natural history of affections of the skeleton and he has not hesitated to mention, without irrelevance, suitable information on the biochemical findings and on the concurrent physiological derangements. Wherever aetiological factors are doubtful, a skilful discussion usually clears away any pre-existent fogging of ideas.

With commendable brevity the article on Fanconi's syndrome reveals Sir Thomas's great descriptive ability. It is to be noted that he has not necessarily become involved in some of the up-to-date biochemical complexities of renal tubular dysfunction, and it will be necessary to look elsewhere for these. Eosinophilic granuloma of bone is considered in close association with Hand-Schüller-Christian disease and Letterer-Siwe disease, and the radiographs on page 302 clearly show the great similarities in this group. Osseous manifestations in the lipoidoses are well presented. Spinal

lesions in Gaucher's disease are shown and some extremely interesting case records are included. Fluorosis and the osteosclerosis due to bismuth, lead and phosphorus receive adequate discussion. The skeleton in the endocrine disorders is a particularly interesting section of the book, and the chapters on pituitary, thyroid and gonadal relationships have a special paediatric interest. The important matter of bone involvement in congenital syphilis is comprehensively illustrated and the radiographs, though demonstrating a little of the common difficulty of reproduction in this particular condition, depict the variety of bone reactions so often helpful in the diagnosis. To throw it into comparative relief, the next chapter is concerned with a classical life history, in text and radiographs, of a case of infantile cortical hyperostosis which, as is usual, reached a favourable conclusion.

The index is another example of precision and completeness.

**Pathology of the Fetus and the Newborn.** By EDITH L. POTTER. (Pp. 574; 601 figures. 150s.) Chicago: The Year Book Publishers Inc. Distributors in Gt. Britain, Interscience Publishers Ltd. 1952.

Dr. Edith Potter has a world-wide reputation as an authority on foetal and neonatal pathology, and this remarkable book is the product of an experience of many years and many thousands of necropsies. It is the work of an author who can draw on a vast store of personal observations and need depend little on secondhand information. An adequate bibliography is given at the end of each chapter, but the text is refreshingly free from references to other people's work: it is very much a record of the author's own experience.

A large proportion of the book is taken up by the description and illustration of malformations. This is done so thoroughly that there can be few developmental anomalies not mentioned, and the pictures provide a gallery of malformations the like of which has probably not been seen before. Errors of development bulk much larger in the book than in the actual practice of foetal and neonatal pathology, but the diseases and injuries that occur during this period of life, and various general aspects of the subject, are not neglected. There are chapters on anoxia, birth trauma, infections, tumours, prematurity, placental pathology and other subjects, as well as references to diseases of the various systems and organs in their appropriate chapters.

A few minor errors have crept in, e.g. the description of the pneumococcus as a Gram-negative diplococcus, and the use of the term 'pyloric sphincter' where the wall of the pyloric canal is meant. In megacolon, Auerbach's plexus is deficient in the unhyertrophied distal segment, not in the hypertrophied portion as stated. The statement that subdural haemorrhage is uncommon is contrary to general experience, and there is some confusion about the source of subdural bleeding, which on p. 90 is said to be most commonly the middle meningeal artery and on p. 405 the middle cerebral artery—both surprising statements.

The publishers' part in the production of the book is a great achievement. The type is clear and well-spaced;

misprints are few. The illustrations, of which there are over 900 in the 601 figures, all in black and white, are excellently reproduced and contribute immensely to the merit of the book. It is to be regretted that the price has to be so high, but understandable in view of the abundance and excellence of the illustrations.

It is safe to say that this book will immediately be recognized as a classic, and that it will be a long time before a serious rival to it appears.

**Foetal and Neonatal Pathology.** By J. EDGAR MORISON. (Pp. 366; 59 figures. 50s.) London: Butterworth & Co. 1952.

This book is welcome because it is the first on this subject to be published in modern times in this country, and is a notable contribution to a branch of paediatrics and pathology on which few books are available in any language. The author has adopted, where possible, a physiological approach, and the first two parts of the book are devoted to discussion of those factors that may cause disturbance of prenatal life and development, or affect the adaptation of the newborn infant to independent life. This is admirably done, with critical assessment of the present state of knowledge, drawing a careful distinction between what is surely known and what is still largely speculative; and indicating the need for much fundamental research before many of the problems of 'perinatal' pathology can be solved. There is also a useful section on foetal and neonatal infection.

The descriptions of pathological conditions that may be found at necropsy are given a somewhat subordinate place. They are dispersed among much other matter in the text, and are sometimes too brief to be fully informative to a reader not already familiar with the conditions described. Most of the illustrations are diagrams and charts; only a minority are photographs of pathological material. For these reasons a young pathologist exploring this field as a learner may not always readily find what he needs to guide him as to what to look for in carrying out his necropsies and in the interpretation of what he finds. It is a book to be read right through, rather than used as a textbook of morphological pathology, and everyone interested in the subject will gain much by so reading it. A valuable feature is a large and well chosen bibliography, with important references indicated in heavy type.

**Penicillin in Severe Otorhinolaryngological Complications.**

**A Symposium.** By ROBERT LUND *et al.* Danish-Norwegian-Swedish Otolaryngological Joint Research. (Pp. 120. \$2.50.) Copenhagen: Ejnar Munksgaard. 1950.

The symposium collates the 421 reports collected over the course of one year (1948) from the E.N.T. Departments of the main hospitals of Denmark, Norway and Sweden, the basis of the reports being a questionnaire circularized by a centrally formed committee. Separate chapters by different Danish authors are devoted to the results of penicillin and sulphonamide (essentially sulphathiazole) therapy in the treatment of meningitis, labyrinthitis, cerebral abscesses, petrositis, osteomyelitis,

and thrombophlebitis, while the first deals with the bacteriological field and the final chapter lists the allergic and toxic effects encountered.

The results in general confirm the place of penicillin as a great advance in therapy. Though many of the chapters are clearly written, the weight of the evidence from the wealth of material is to a great extent offset by the poorness of the bacteriological control. Of the 421 cases collected, only 182 had bacteriological investigations made, and of these in only 24 (6%) was the sensitivity of the organism concerned determined. Thus many of the statements made in the chapter on bacteriology are not based upon the investigation, and are at considerable variance with those more generally accepted.

**Specific Dyslexia (Congenital Word Blindness): A Clinical and Genetic Study.** By BERTIL HALLGREN. Translated by ERICA ODELBERG. (Pp. 287. No price.) Copenhagen: Ejnar Munksgaard. 1950.

This study of 169 cases includes only 'specific' cases of reading difficulty, some seen at the Stockholm Child Guidance Clinic (122 cases), and the rest picked out of a special reading class in a secondary school in Stockholm. Children whose reading difficulty was secondary to emotional disturbance, general backwardness or other causes were excluded. Controls were supplied by non-dyslectic classmates. In the clinic material no child had an I.Q. lower than 80; one school child had an I.Q. of 65-69. Since school starts at the age of 7 and cases were not taken from classes lower than the second, presumably the ages would be around 9 years, and the investigation selected children seen over a period of just under 16 months. The overall estimated incidence for the general population is approximately 10%.

The study is mainly directed to disproving causes popularly associated with this condition, and in supporting the view that it is inherited.

The method of setting out this material is nothing if not detailed and painstaking but the translation is sometimes too literal to clarify the meaning. For example 'in [the author's] opinion, all the forementioned interpretations of the higher incidence of nervous disorders in the probands are plausible. It is, however, extremely difficult to determine the connexion in the individual case. This is especially because the symptoms can have a causal connexion even if it is non-existent.' 'Proband', a word which does not appear in the *New Oxford English Dictionary*, means by inference a case which is a subject in this enquiry.

The final conclusion is interesting. It has been clinically apparent for a long time that specific dyslexia may have a familial incidence. This enquiry goes into the genetic aspect, supported by very interesting family trees. The author's final positive conclusion states: 'The genetic-statistical analysis shows that specific dyslexia, with a high degree of probability, follows a monohybrid autosomal dominant mode of inheritance', going on to specify groups in which this is clearly demonstrated by her work.

The overall incidence is high compared with this country, thus throwing open queries as to criteria.