**BOOK REVIEWS**


Since the first edition of this useful little book in 1952 there have not only been many advances in our knowledge of poliomyelitis and its viruses, but there have also occurred on the one hand the outstandingly disastrous Copenhagen epidemic which brought forth a reassessment of the treatment of bulbar types of poliomyelitis, and on the other, the elaboration of a protective vaccination. It follows that this second edition had to be largely rewritten.

The book makes no claim to be an exhaustive textbook on the disease, but nevertheless the author has managed, in under 150 pages, to give a very comprehensive account of every important aspect. Management and treatment occupy, quite rightly, nearly two-thirds of the subject matter, and these sections are models of quality and of economical and arresting writing, and of the use of carefully chosen illustrations and diagrams. Here also, as throughout the book, the thumbnail sketches of cases to illustrate points in the text are valuable, both as instruction and to maintain interest. The care of cases of poliomyelitis during the acute stage has largely been given over to the infectious diseases hospitals. It is doubtful, as the author clearly indicates, whether this is in the best interests of the patients, or whether it is epidemiologically justified, but what is quite sure is that the loss to teaching hospitals of this experience will be reflected in a widespread ignorance in the disease by practitioners who have not during their studies had the opportunity to recognize the symptomatology or to observe the principles of treatment. When the inevitable epidemic overtakes them, and they have perforce to deal with a host of diagnostic problems, and also perhaps to treat many mild cases in their own homes, they will do so all the more adequately for having this handy and near perfect little book ready on the shelf.

The production is excellent and on excellent paper. The illustrations are unusually successful in illustrating the points they intend to make. There are some 90 references, most of them up to date, and a somewhat sketchy index.


This is an excellent eye-witness account by 21 experts and Professor Lassen himself, who has also edited the whole, of the terrifying outbreak of poliomyelitis which occurred in Copenhagen in 1952. At one time, for several weeks, 30 to 50 patients a day were pouring into the Blegdam Hospital of whom six to 12 were drowning in their own secretions. The situation called for improvisation and emergency measures. It is now well known how the method of tracheotomy and insertion of the cuffed intratracheal tube came to be chosen. This book tells in detail how this was done and why, and the results obtained. It also deals with much more in the whole care of the patient with acute poliomyelitis, including the management of the convalescent stage. (In the list of contributors there is no mention of an orthopaedic surgeon!) There is also an excellent summary of necropsy findings. Anyone concerned with the care of patients with this disease will find this a fascinating and hopeful book. It is hoped it will become of historical value only, for Denmark is well ahead with vaccination of its population under 40 years of age with a poliomyelitis vaccine. Dr. Thomas Anderson of Glasgow has assisted with the translation undertaken by Professor Lassen and two Danish colleagues.


Although only five years have elapsed since Professor Ellis’s book first appeared, the general advances in paediatric knowledge occurring in this span of time have necessitated a thorough revision of the first edition. The changing face of paediatrics is mirrored in the long section devoted to congenital malformations; prenatal infection has a chapter devoted to it, and disorders of storage and growth are considered extensively. These aspects of paediatrics become yearly more important as the infections of childhood are brought under control. In the same way neoplastic disease is increasing in importance and is dealt with fully. The illustrations throughout really do contribute to the understanding of the text, the book is beautifully made and printed and is as much a pleasure to handle as its contents are to read.

**Kinderärztliche Notfallfibel.** By **B. de Rudder.** (Pp. viii+178; 22 figures, 1 table. DM. 16.50.) Stuttgart: Thieme. 1956.

That a third edition of this handbook should have been called for since the first edition appeared in 1949 is a sign both of the rapid advance of medicine and the need for a book dealing with the treatment of acute emergencies in childhood. Further evidence of the book’s popularity is that it has now been translated into Italian and Spanish. This third edition has been expanded to include newer disease syndromes and newer treatments, and is an up-to-date and comprehensive presentation of emergency treatment. There is a table of doses of drugs likely to be used in emergency and it is to be hoped that in the fourth edition a column will be included explaining what some of the proprietary names listed indicate.


This is not a monograph on the subject, but a brief, practical treatise on the early diagnosis, prevention and treatment of congenital syphilis based on the author’s personal experience of the vast clinical material available in Germany in the early post-war years.
The chapter on diagnosis is divided into three sections: clinical, serological and radiological. The clinical section is rather sketchy. It lists the symptoms and signs of the condition in their order of frequency and emphasizes the fact that none of them is pathognomonic per se. The author also stresses the fact that several time-hallowed syphilitic manifestations, like pneumonia alba, hydrocephalus and jaundice, are extremely rare and occur much more frequently in other conditions. The differential diagnosis of neonatal syphilis from other intraterine infections (e.g., toxoplasmosis, cytomegalic inclusion body disease) and from haemolytic disease is well tabulated.

The serological section is up-to-date and includes the treponema immobilization test. The section is mostly devoted to the pitfalls of serological diagnosis with particular emphasis on false positive results which may be due either to the method, to the sample (cord blood) or to the presence of maternal antibodies in the infant's blood.

The radiological section contains largely the author's original (partly experimental) work on the pitfalls of radiological diagnosis. He deals with three types of radiological appearances: osteochondritis, periostitis and osteomyelitis, each of which he proves to be non-specific. The commonest osteochondritis is apparently the most misleading.

The author divides prevention into antenatal and postnatal. Antenatal prevention consists of penicillin treatment of all mothers either giving a history of syphilis or found to be syphilitic irrespective of previous treatment. The degree of compulsion which he advocates is acceptable only on the author's side of the Iron Curtain. The optimum time for treatment is the second trimester of pregnancy, but treatment should be given later if necessary, though after the eighth month it is not considered adequate.

Postnatal prophylactic treatment is given to all infants born of syphilitic mothers who either received no treatment during pregnancy, whose treatment is considered inadequate, or those who received their treatment too late. Children of adequately treated mothers apparently require no further treatment.

Treatment of overt cases differs in infancy and after the first year of life. During the first year of life penicillin alone has been found adequate, after that it is supplemented by arsenic and bismuth.

The complete plan of prevention and treatment as adopted in Leipzig by the author is given in detail.

As for tests of cure, the author is aware of the fact that the only conclusive evidence of it is a primary re-infection! For practical purposes, however, he discusses the behaviour of serological tests, cold agglutinins and serum iron levels under treatment.

The list of references is limited almost entirely to the German literature.


This book is one of a series of monographs on modern medical therapeutics that has been inspired by Professor Raymond Turpin. The aim of the series is to present up-to-date reviews on certain subjects that can be used by general practitioners and teachers of undergraduate students. Dr. Jean Levesque has presented a very comprehensive study of the diarrhoeas of infancy which, although it lacks a bibliography, should be of help to young paediatricians and practitioners.

The monograph is divided into three parts: the first section deals with the physiology of digestion, the pathophysiology of diarrhoea and the principles of treatment. The second part describes the course and treatment of parenteral and summer diarrhoeas and the final section includes the dietetic diarrhoea and the chronic diarrhoeas, for example, coeliac and fibrocystic disease.

The classification is full and considerable emphasis is placed on summer diarrhoea and infantile cholera. In contradistinction little is written concerning the coli-bacilli in acute gastro-enteritis and in the wealth of suggested treatments, which range from kaolin, carrot soup and apple puree to the antibiotics, no mention is made of neomycin.

The author is not impressed with the role of gluten in the production of coeliac disease and suggests that there is a lack of vitamin B complex (for reasons unknown) with a resulting starch intolerance.

In spite of these few criticisms, this is an interesting account of diarrhoea in infancy and will be referred to frequently by French students.


The theme of this monograph is that those periodic symptoms so common in children, and in particular cyclical vomiting, are manifestations of epilepsy in which the characteristic convulsion is missing. The origin of the idea that epilepsy may occasionally be the cause of these symptoms must, as they say, be lost in the mists of antiquity, but to say of epilepsy 'that the true cause of this condition' is epileptic and to claim that this discovery is a new one, removes the monograph from the realms of serious scientific communication.

The basis for this claim is stated to rest on the abnormal electrocardiograms not infrequently alleged to be found in children suffering from cyclical vomiting and especially on the good response that is had from the administration of phenobarbitone. The author says, for instance, that 'it is generally admitted that if a disorder responds to anticonvulsant drugs it may legitimately be called epileptic', and later on the same page 'I maintain that phenobarbitone is an anti-convulsant drug, and that any obscure periodic disorder which responds to treatment with it is probably epileptic', and finally that 'one of the reasons why phenobarbitone has a reputation as a general sedative is because it cures masked epilepsy'. The reviewer for one disagrees emphatically with each of these opinions.

The monograph attempts to support these claims by sketches and tabulation of the findings in 20 cases.