

## BOOK REVIEWS

### **Year Book of Pediatrics (1960-1961 Year Book Series).**

Edited by SYDNEY S. GELLIS. (Pp. 479; 92 figures. 60s.) Chicago: The Year Book Publishers; London: Interscience Publishers. 1960.

Anyone glancing through this Year Book will gain a rapid insight into what has been going on in children's medicine during the year. All branches of the subject are considered and the reader will end his perusal as up to date in surgery and pathology as in internal medicine.

The doctor with limited time for reading and restricted in foreign languages may regret that the Year Book does not give him more insight into Continental literature. He may speculate whether the high proportion of American papers abstracted is a true reflection of where most of the worthwhile new work is being done. He cannot but be grateful to the editor, however, for enabling him to do his year's reading in a rapidly progressing subject so agreeably in a couple of evenings.

Dr. Gellis is to be warmly congratulated for maintaining the high standard to which we have become accustomed in past years.

### **Protein and Amino-acid Requirements in Early Life.**

By L. EMMETT HOLT, JR., PAUL GYÖRGY, EDWARD L. PRATT, SELMA E. SNYDERMAN and WILLIAM M. WALLACE. (Pp. vii + 63; illustrated. \$1.00.) New York University Press. 1960.

This small monograph by a distinguished team of investigators, including Professor Emmett Holt, Jr., is intended to evaluate critically the available information regarding the protein and amino-acid needs in early life, in health and disease. Much of it is based on the authors' own findings, especially on the amino-acid requirements of infants.

The clinical effects of protein deficiency, especially kwashiorkor, are discussed as well as the effects of high protein diets. To the general reader, much of the interest will lie in the section on protein requirements of infants, rather than in the individual amino-acids, admittedly of greater theoretical than practical import. The authors' conclusion is that little is gained by feeding protein diets containing more than 2.0 g. protein per kg. body weight to normal full-term infants, or even to premature infants, although they are more cautious in regard to the latter.

Little mention is made of the considerable body of evidence, which has been published both in this country and the United States, in favour of a protein intake considerably greater for premature than for full-term infants. The report, however, will be useful in providing many interesting facts not easily found in the literature.

### **Congenital Malformations; A Ciba Foundation Symposium.**

Edited by G. E. W. WOLSTENHOLME. (Pp. xii + 308; 91 figures; 28 tables. 45s.) London: J. & A. Churchill. 1960.

Ciba Foundation symposia have gradually developed into authoritative discussions on subjects of current interest and importance, led by selected authorities and delivered to limited audiences. A selection in book form gives others the opportunity of having at their disposal reviews of recent work of high standard.

This volume reports the Symposium of January 1960, on 'Congenital Malformations', and contains 24 contributions, each with its own brief discussion and a final general discussion. Subjects cover a wide field and there is inevitable variation in interest and excellence. Almost, though not quite all, contributions are of absorbing interest to the general paediatrician, though the subjects tend to be treated esoterically and the reader needs to be already reasonably well up in the subject to follow the main speaker, let alone the discussion. The value in print of the discussions at the end of each chapter is debatable. Many of these make almost no additional contribution, but occasionally, as in that which follows the subject of environmental teratogenesis, the audience participate freely.

The binding, print and photo-reproductions are of American standards.

**The Medical Annual.** Issues 77 (pp. xl+620; 66 plates + 40 figures), 1959, and 78 (pp. li+572; 59 plates + 47 figures), 1960. Bristol: John Wright.

When stuck for some quickly available information on recent work the Medical Annual seems frequently to be able to assuage at least the worst of the need, and these two volumes for 1959 and 1960 are as useful as ever. The chapters on children's diseases review a selection of conditions, a kind of chef's collation particular to the author, Dr. Newns, but have sufficiently wide interest to make welcome food for other mouths. *Child Surgery* by R. E. Horton is largely concerned with neonatal abdominal surgery in 1959 and with various types of hernia in 1960, whilst *Child Psychiatry* by Dr. Kenneth Cameron deals with much the same subjects each year, particularly childhood dementia and the use of drugs with defective children. These three authors share between them less than 20 pages in each volume which seems inadequate and certainly limits their choice of subjects. However, articles of paediatric interest are widely dispersed throughout both volumes and, indeed, appear in almost every section.

The special articles, now a prominent feature of the Medical Annual, serve as valuable up-to-date summaries of their subject, and retain a high standard in paediatric

in the 1959 volume. Professor A. W. Wilkinson reviews blood and electrolyte balance in relation to surgery, much of which is directly related, or at least relevant to, childhood. Dr. Leatham this year also contributes a long article on cardiac auscultation which, read, digested and absorbed, will benefit the clinical acumen of all who read it.

**The Tonsils and Adenoids in Childhood.** By DONALD F. PROCTOR. (Pp. xi+70; 23 figures. 60s.) Oxford: Blackwell Scientific Publications; Springfield, Illinois: Charles C. Thomas. 1960.

This is an excellent monograph, but it is a curious commentary on present-day surgery that it should be necessary to hammer home its main message, which is given in one entry in the index—'Guillotine, avoidance of'. That is to say it pleads for the removal of tonsils and adenoids to be done with the care, accuracy and delicacy that is expected of those operating in the chest or abdomen. It is well established that what is rudely known as 'the choke and grab' method, by which some practitioners boast they can do up to 30 cases in the hour, has an enormous percentage of failures, when either too much or too little is hurriedly removed in a welter of blood. Estimates of the percentage of failures vary from 20 to 68 (Hyde, 1951), and this does not include the adenoids. Dr. Proctor confines himself, in discussing inefficiency, to the damage done by removing too little; one should consider also that done by removing too much e.g. the tight palate due to thrusting up the pillars into the ring of the guillotine, and the chronic ear discharge due to scarring of the Eustachian cushions.

For efficient operating there is needed not only technique, but also a knowledge of anatomy. I am personally flattered that the author has kind things to say about a paper in which I pointed out that the textbook descriptions of the blood supply were totally inaccurate. That account of the dangerous vessel, the paratonsillar vein, had gradually made its way into textbooks of formal anatomy, though not into those strange compilations that deal with 'surgical anatomy', nor into most textbooks of otorhinolaryngology. Consequently a far from inconsiderable number of children still bleed to death, with those responsible unaware of what vessel is bleeding; while the number of actual fatalities must be a small proportion of those which cause hours or days of acute anxiety.

Dr. Proctor states that he can find no previous account of a similar application of surgical principles to the tonsil before Dr. Crowe and his colleagues (1917) reported 1,000 tonsillectomies with 1·2% of postoperative haemorrhages. Had he departed enough from United States practice to carry his researches across the Atlantic he would have discovered that this method had been preached and practised at The Hospital for Sick Children, Great Ormond Street, for many years before 1909, when Mr. George Waugh (Waugh, 1909; Moore, 1928) who originated it, had operated on 1,500 cases (400 of which had been guillotined previously one or more times) with no haemorrhages. His paper records only 900 cases, but this was because, as he told me, it had been written

two years before publication. The intervening time had been taken up in getting it past the obstruction of 'experts' who all used the guillotine and contended that the new method was so extremely dangerous that the profession should be shielded from hearing about it.

Waugh's technique was, I think, superior in that the entire removal was carried out by dissection, whereas that of Dr. Crowe descends to blind division by a snare for the last stages. And I suggest that to use a figure-of-eight suture for a bleeding vessel instead of a simple ligature carries a risk, as Dr. Proctor points out, of puncturing others hitherto intact.

The book discusses fairly the fundamental question of whether the removal of tonsils and adenoids does good or harm. The trouble is that the present percentage of operative failures renders quite futile the many investigations that have been done on this, since there is no doubt that a partial removal leaves the patient worse than before. As to whether the tonsils and adenoids have a function, or, like the mastoid cavity and similar structures, they are both useless and dangerous, Dr. Proctor is cautious. He well might be, since in this argument one is apt to encounter both the Darwinian reasoning that the universal law of survival of the fittest proves that 'they wouldn't be there if they didn't have a use' and the theological dogma which teaches that they are a part of perfection, since the human body is made in the image of God. The author rather hesitantly puts forward the usual explanation that it is good for the body to have a culture ground in which either acute or chronic infections can multiply, since in this way antibodies are formed. This line of argument is not usually applied to infected teeth or sinuses, nor to staphylococcal infections of the skin, nor to appendicitis; and it is worth noting that the almost invariable first lodging of diphtheria in the tonsil is not mentioned.

Also discussed, though not at great length, is the common infection of the adenoids and tonsils with tubercle. In this country I have sat through long conferences on the indications for their removal without hearing this spoken of, and have read recent papers on tubercular glands of the neck which omitted totally this obvious source of infection (Miller, 1956).

There is no mention of the rare but important condition of congenital adenoid obstruction which prevents proper sucking owing to the baby's inability to breathe through the nose. The removal of these adenoids requires a far smaller curette than is listed by any instrument makers but the results can be most satisfactory.

My criticisms are on minor points: the book as a whole shows a thoroughly sound surgical approach and great care for the avoidance as far as possible of fright to the patient; it should help to let in light on one of the darker departments of surgery.

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