

It is suggested that in some cases members of the team might profit from personal analysis. They should have healthy and balanced personalities, a breadth of vision, and their emotional and family lives should be stable.

The location of the clinic is discussed in some detail.

Child guidance centres have developed differently from traditional medical clinics, because the total environment of the child needs to be considered. The writers consider that the child guidance centre is an agency for improving the adjustment of children, with special reference to social and emotional relationships. Children are to be helped to adapt themselves to their circumstances. Moreover, the modern conception of the Child Guidance Clinic is, that it is not only the child, but the whole family, that needs to be treated. For this reason, it should form an essential part of the social and medical services. The number of children with psychiatric disorders is small and they should be treated in hospital. The Report suggests that if a new centre is being planned, it is better, because some children are afraid of hospitals, to avoid placing it in one. The convenience of having some kind of a mental hygiene unit in the children's hospital, where paediatricians can collaborate with the psychiatrist is, however, stressed. It would be undesirable for child guidance and child psychiatry to be considered as a sub-branch of paediatrics, for the work involved goes far beyond the traditional field of medicine, and calls for non-medical skills.

There is a most interesting chapter on the technique of psycho-analysis of children between 6 and 10, and a useful classification of disorders is given. The appendix 'Annex 1' contains an account of the effective development of the child, in which psycho-analytic data is integrated into the neurobiological study of the child.

This monograph is well worth reading, not only by those working in the field, but also by those who wonder what purpose the child guidance centres serve.

**Orthopaedics.** By GEORGE PERKINS. (Pp. xiii+975; 577 figures. 126s.) London: The Athlone Press. 1961.

I enjoyed reading this book very much, it is well conceived, the text is clear and easy to read. The illustrations are well done and lavish in number. The x-ray illustrations in particular demonstrate basic principles and detailed rarities with equal clarity. I found the enlargements of small framed areas in these x-ray illustrations of great value. One minor criticism is that the text in the early chapters tends to outrun the illustrated page, but this is perhaps unavoidable and is no doubt a printing difficulty, insurmountable in a book of this size.

The chapter on examination is good. It puts in simple uncluttered language all the essential basic principles of an adequate examination of an orthopaedic case and, as is so necessary in this day and age, the paragraph dealing with x-ray examination is extensive.

The bone dystrophies are well handled and fully

covered with the minimum of controversy, good illustration and simple description without confusion by the inclusion of many and varied descriptions.

A comment rather than a complaint on this, and the chapter on vascular disease from a paediatric point of view, is that many diseases are well known to a paediatrician under the name of the original medico describing the condition, e.g. Legg-Perthes disease is a term better known to the paediatrician than pseudo-coxalgia. I could not discover the name Legg-Perthes disease in the index under either Legg or Perthe, although Legg is mentioned in the text; Köhler and Freiberg's disease are indexed and adequately covered in the text and are described separately under osteochondritis of the scaphoid and metatarsal, but osteochondritis of the hip is not indexed. Fanconi syndrome, Morquio's disease and Hand-Schüller-Christian disease are indexed and described, but gargoylism is neither mentioned nor indexed.

The congenital deformities described under 'errors of segmentation' might have had a small paragraph included under treatment of the lower limbs to include platform prostheses.

Dislocation of the hip and talipes equino-varus are fully covered, although at certain centres the treatment advised would be frowned upon. I cannot agree that illustration 395 is Denis Browne's splint for talipes equino-varus—it is one of many, and this one in particular was abandoned some years ago and at that time it was used to hold a corrected talipes equino-varus after manipulation.

This is an excellent book and should be in all medical libraries and orthopaedic surgeon's bookshelves; it also offers virtual full coverage to that specialized corner paediatric orthopaedics.

**Differentialdiagnose von Krankheitssymptomen bei Kindern und Jugendlichen, Vol. I.** By WERNER CATEL. (Pp. xxxvi + 1051; 483 figures + 70 tables. DM. 220.) Stuttgart: Georg Thieme. 1961.

The first volume of this truly epic trilogy deals with disorders of bones and joints, the haemopoietic system and metabolic diseases. A vast amount of ground is covered in great detail with meticulous thoroughness. The wealth of information given makes the work a reference book for postgraduates rather than a textbook for undergraduates. A good system of headings, sub-headings and paragraphs, numerous comprehensive and clear tables and many excellent photographs and radiographs make the material presented easy to read and absorb. Many of the conditions described are further illustrated by short succinct case summaries. Details of laboratory technique are given where appropriate. As is implied in the title, the author and collaborators have not regarded treatment as being within the scope of this book. This is a pity, as most clinicians would probably prefer to read about treatment and management in a book of this size and price than about standard laboratory techniques. Each chapter is followed by an extensive bibliography of the international