

60% of those treated by exercises the deformity increased, and in 40% it remained unchanged.

Dr. Burger-Wagner reports his results in treating 'les scolioses essentielles'—that is, idiopathic scoliosis, on the assumption that an idiopathic curve between 30° and 55° before puberty will more than double by maturity: this is certainly true in many cases, but there are also many patients whose deformity remains stationary or almost so and no pronouncement can be made about a particular patient without sufficiently prolonged observation to establish the pattern of progression in that particular individual. Eighty-two patients were treated as out-patients twice a week with daily or twice daily periods of exercises on all fours at home. Fifty-three patients were treated as in-patients remaining recumbent all the time except for the twice daily exercises. The length of treatment is not made clear, but radiographs showing progress over more than a year are illustrated. In addition, an unspecified number were treated with various forms of spinal brace as well as exercises, and a further unspecified number of the more severe curves by spinal fusion.

Radiographs of the results of treatment are unimpressive. The rotation is minimal in some cases, flexibility in a compensatory curve being illustrated as showing the effect of treatment on a primary curve; and the method of measurement is open to question as the vertebrae chosen for measurement were sometimes in the compensatory rather than the primary curve.

This is the second edition of this monograph, and I hope that it will not lead to continuation of the outmoded practice of forcing large numbers of children with postural or trivial structural scoliosis to spend long hours having special exercises instead of leading the normal active lives of their fellows. Equally important is it to realize that exercises, however carefully designed, will not prevent the worsening of a rapidly progressive scoliosis. We have a great deal to learn about the effective treatment of scoliosis, but this meticulous insistence on posture and exercises attempts to put the clock back half a century.

The Early Diagnosis of Congenital Abnormalities. By R. W. SMITHELLS. (Pp. xvi + 198; 49 figures. 25s.) London: Cassell. 1963.

This little book fulfils a need for the midwife, obstetrician and paediatrician alike. Divided into five chapters it gives a comprehensive survey of those factors that will lead to early and correct diagnosis of every abnormality, be it anatomical or metabolic, that may beset the newborn child.

The first two chapters, dealing with prenatal diagnosis, and diagnosis during labour, provide a concise dissertation on the significance of various maternal factors, including oligohydramnios, polyhydramnios, illness or drugs during pregnancy. The interpretation of x-ray appearances of the foetus is given, together with several illustrations.

Chapter 3, on examination of the symptomless infant, stresses the need for a careful routine examination of all infants as soon after birth as possible by an experienced doctor. The significance of the various physical signs is

discussed and the technique of special investigation is given, together with some excellent photographic plates.

The next chapter deals with the interpretation and investigation of early symptoms that arise from congenital anomalies, and the last chapter discusses the problems of interviewing the parents of an abnormal child. Helpful advice is given here towards the initiation of preventive mental hygiene, and there is a useful list under the heading 'Genetic Prognosis' that gives the risk of recurrence of almost all heritable diseases.

Lastly there is some practical advice concerning the care of the newborn infant during transfer to another hospital and also notes on the developmental, vision and hearing tests in young infants up to 6 months of age (reproduced from the Ministry of Health Report, no. 102).

There is necessarily some repetition from chapter to chapter, but this book is intended for reference as well as for reading. Any doctor or nurse concerned with the welfare of the newborn infant will find in it invaluable help towards the diagnosis of emergencies and of less urgent problems. The style is clear and the presentation attractive.

The Growth and Development of the Prematurely Born Infant. By CECIL M. DRILLIEN. (Pp. xv + 376; 34 figures + 95 tables + 28 appendices. 50s.) Edinburgh and London: E. and S. Livingstone. 1964.

It is perhaps surprising that today, when so much effort is being expended on the care of the premature infant, so little is known of his long-term prognosis. As readers of this journal will already know, Dr Cecil Drillien's work in Edinburgh has done much to make good this deficit. This book is largely a re-presentation of her previous papers on the subject in a more convenient and digestible form. It contains a mass of detailed observations made on a group of 381 premature and 214 mature infants born in 1953/54, who, having survived the neonatal period, were followed up to the age of 5 years. Data are provided not only of the physical and mental development but also of the incidence of disease in the group. There is also a chapter on the behaviour of the children during their first few years at school. The author considers in detail the effects that various environmental factors have had on the health and development of the group. In doing so she has largely abandoned the Registrar General's familiar classification of social classes for her own more realistic social grading and for an assessment of maternal efficiency. The relevance of the latter, particularly in respect of the smaller prematures, is well shown by the figures.

A final section is concerned with the follow-up of a group of 110 very small prematures. The figures here serve to highlight the general finding of the survey, that on average the prematurely born child fares less well in almost every respect than his mature counterpart. In addition the book provides a most valuable contribution to our knowledge of the general pattern of child care in contemporary society.

So much information whets the appetite for more. In particular perhaps the practising paediatrician would like

to know how far various perinatal events are likely to affect the ultimate prognosis of the premature infant. This information, unfortunately, Dr Drillien is not able to provide.

The text is, on the whole, easy to read though some of the tables and figures are complex. There is also an appendix containing 28 additional tables and a good index.

Donald Paterson's Sick Children: Diagnosis and Treatment, 8th ed. By RONALD LIGHTWOOD and F. S. W. BRIMBLECOMBE. (Pp. x + 724; 89 figures + 23 plates + 35 tables. 50s.) London: Cassell. 1963.

This well-known and popular textbook of paediatrics was first published in 1930 and Donald Paterson in his preface then expressed the hope that the readers would find that the description of symptoms, although concise, would be adequate. Aetiology and pathology were not neglected but, as the title suggests, the main stress has been laid on diagnosis and treatment as the surest way of making the book practical and helpful. The considerable advance in paediatrics subsequently, and particularly since 1956, when the last edition appeared, has necessitated radical revision. This has been admirably achieved by Lightwood and Brimblecombe who, while maintaining the original objectives, have skilfully incorporated much new material and also given more attention to variations in normal and emotional development. A chapter on emotional disorders contributed by Dr. Mildred Creak gives an excellent account of common deviations seen during emotional maturation and their relation to the background of family and environment, with symptomatology so commonly met with in paediatric out-patient clinics. The inclusion of a chapter on Diseases of Childhood in the Tropics from the able pen of Professor Cicely Williams is an indication of the wide appeal of the book and provides a timely reminder of the need for the alleviation of poverty, lack of education and community hygiene in developing countries. The separate appendixes on the use of antibiotics, steroids, drug dosage, electrolyte control, norms of physical growth, special diets and legislation concerning children should also prove invaluable to the student of paediatrics and enhance the value of the textbook for those studying for the Diploma in Child Health.

Survey of Clinical Paediatrics. 4th ed. By L. B. SLOBODY and E. WASSERMAN. (Pp. x + 541; 5 figures + 33 tables. 89s.) New York: McGraw-Hill. 1963.

The title is misleading: this book is a synopsis rather than a survey, and the emphasis is hardly clinical.

It has the virtues of a synopsis. The writing and the format are clear; a great deal of information is compressed in simple tables and lists; and it is reasonably up to date. It has also the faults of a synopsis. There is the common sharp (but artificial) separation of interrelated aspects of the sick child. A mass of data is often presented without perspective. Investigations, such as radiographs, are

described without discussion of their indications; and under treatment are found such vague statements as 'adrenal corticosteroids may be tried' and 'these agents [tranquillizers] have been used as adjuncts in therapy for various behaviour disorders, hyperactive states, and psychoses in children'. The word 'pain' does not appear in the index. 'Review Questions', at the end of each chapter, are designed to test the reader's assimilation of the information presented.

This book would probably be useful to family paediatricians, who can themselves provide perspective based on experience, on occasions when they want to make sure that some important point has not been omitted in diagnosis or management.

Year Book of Pediatrics, 1963-64 (Year Book Series).

Edited by SYDNEY S. GELLIS. (pp. 504; 111 figures + tables. 64s.) Chicago: Year Book Medical Publishers; London: Lloyd-Luke (Medical Books). 1964.

Once again this book gives us the pick of the papers for the last year. The selection is less predominantly American than in previous editions. A rough count gives about 60% of papers from North American journals, 15% from the United Kingdom, 8% from France, and 7% from the Scandinavian countries. Many readers in this country will have kept reasonably up to date with journals published here, but few can have had the time and opportunity to read all that they would like to from other countries, so this annual survey of the literature is always welcome. There is much more in the book, however, than a mere précis of selected papers. The editorial comment, often based on personal experience of cases, is always pertinent and adds greatly to the interest and pleasure.

The cost may seem rather high for a book of its size, but the wide range of subjects covered, the wealth of information, and the excellence of its presentation and comment make it a bargain that few can afford to miss.

A Manual of Paediatrics for Students and Practitioners in South East Asia. Edited by PINCHAS ROBINSON with the collaboration of 54 contributors and in consultation with Arvid Wallgren. (pp. xiv + 504. Rs. 9.00). Bombay, Calcutta, Madras, New Delhi: Orient Longmans. 1963.

This is the second edition of a book first published in 1957. There are 60 contributors, half of whom live and work in the territories of the title; the rest are American or European. The terms of reference are wide indeed, and in fact few areas of paediatrics are left unexplored; system by system, and specialty by specialty, the realm of childhood disorders, physical, emotional, medical, tropical and surgical are relentlessly examined, with short but often penetrating forays into pathology, nutrition, public health and genetics. The commendably low sale price dictates a rather flat layout, and after 500 pages the meagre use of capitals and generally unemphatic presentation, seems to merge valley with mountain,