Book Reviews


This Research Monograph brings together the results of the author's remarkably complete follow-up study, at the age of 6–9 years, of the children with a birthweight of 1800 g. (4 lb.) or less, who were originally included in the Medical Research Council's investigation of retrolental fibroplasia. They were born during 1951–53 in one of the 14 British centres which supplied the obstetric and perinatal information, and it is estimated that they represent the product in this weight range of no less than 230,000 total births. Of the 1128 who survived the first six months of life, 28 had died and 19 could not be traced: the remainder were all seen by a health visitor, and 1012 were assessed by a test of IQ appropriate to their age and any neurological disability. A gross handicap (blindness, deafness, cerebral palsy, or an IQ of less than 50) was found in 13.6% of the 759 singletons and 5.9% of the 322 survivors of multiple births, and just over 6% of the whole group had had one or more convulsions. Separate chapters discuss clearly the different aetiological factors which can be shown to be related to these different handicaps. Short gestation and cyanotic attacks, for instance, are clearly related to the syndrome of spastic diplegia and to perceptive deafness, while being born small-for-dates clearly increases the risk of developing convulsions or cataracts. But one of the most important and provocative findings is that if these grossly handicapped children are excluded, the IQ of the remainder does not differ from national norms.

It is of great value to have all this work, much of it already published in a series of separate papers, brought together and discussed as a whole, with suggestions for prevention and for future study—but the price is a handicap which may limit the effective distribution of this monograph.


This concise textbook about the premature infant now has a significant subtitle 'and other babies with low birth weight'. A lengthening of 56 pages from the previous edition is more than justified by the inclusion of new material on the causes and prognosis of low birthweight, the respiratory distress syndrome, neonatal hypoglycaemia, and neonatal infections and their treatment. The deservedly high reputation of this excellent text will be further enhanced by this edition. The book is well produced and the references are most extensive.

It is so good that the reader is made impatient for yet a further edition, in which perhaps more information might be included about the techniques used in the clinical assessment of maturity of newborn infants. In the present edition the author might be considered over cautious about the use of oxygen for the respiratory distress syndrome, and some authorities would disagree with the statement that in the treatment of cyanotic attacks the oxygen concentration must be rapidly reduced immediately an attack is overcome. The value of early feeding in the prevention of hypoglycaemia in dysmature infants is perhaps still considered too controversial to be mentioned in this edition.

It is difficult to single out particular aspects of this book for special praise, when the general standard is so high, but the section on the epidemiology of low birthweight is particularly valuable, because much information is brought together from many varied sources for the first time and submitted to succinct analysis. Dr. Mary Crosse has put us all in her debt by this up-to-date and excellent revision of her famous book.


This small book manages to give a brief account of the main theories of the origin of speech, as well as describing normal speech development in the child. It gives, as we would expect, evidence of massive erudition, in a historical account of thought about aphasia, apraxia and agnosia. The book as a whole is founded upon a particular thesis—"That the key to our understanding of speech and its pathology is a physiological one, physiology being the link between the anatomy of the brain, in terms of which we describe lesions, and psychology, in terms of which we apprehend speech disorders." The author calls the several physiological organisations that must subserve speech 'schemas' and he hypothesises the role of the schema as the means by which a large number of variable stimuli elicit the same response. Some mechanism such as this must underlie, for example, the child's ability to recognize a particular word spoken so differently by his father, his mother or himself. The author suggests that a schema works by automatically calculating that a stimulus possesses a certain set of properties, and refers to the evidence that the organiza-