
This is a comprehensive dictionary of German and English medical terms. It will prove of invaluable help to those with a working knowledge of German who wish to keep abreast of German medical literature but are unfamiliar with medical terminology. The authors have succeeded in including the major part of the vocabulary of medicine.


This is a collection of papers on perinatal problems read at a combined conference of obstetricians and paediatricians.

The first paper by H. Wulf surveys recent knowledge of perinatal physiology. He begins by describing the influence of maternal and placental steroid hormones on the development of the fetal sex and suprarenal glands, and the practical application of this by quantitative differential assay of oestriol and of chorionic gonadotrophins in the urine in monitoring the state of the fetus. He then discusses the transplacental transfer of immune bodies and the implications of this both for mother and fetus, reviews the circulatory changes during birth, and follows with an account of the biochemical changes that accompany the initiation of respiration with emphasis on blood, gas, tension, and metabolic acidosis.

Fischer and Thews describe a study of the oxygen supply of the fetal brain during labour. This paper is highly theoretical. Their conclusions depend not only on taking into account the oxygen saturation values of arterial and venous blood of fetal lambs on readings obtained from blood samples taken during labour from the fetal scalp, but on complex mathematical calculations relating to the radius of a tissue cylinder of blood supplied by a central capillary. The practical conclusion of the paper is that the duration of the second part of labour should be kept as short as possible. Huntingford from the United Kingdom gives a résumé of the perinatal mortality survey in England, Scotland, and Wales which will be familiar to British readers.

Schulte’s paper is a prolonged follow-up study of full-term children showing evidence of brain damage in the neonatal period both due to cerebral and extracerebral causes.

Next, Koller and Koller Brench describe the working of their resuscitation unit in Basel, which includes well-illustrated tables, diagrams, and statistics. The results and figures are comparable with those of similar special care baby units in this country. Gamp and Keavella describe an ingenious method of an external, intermittent vacuum determined artificial respiration, used in conjunction with an Isollete incubator rather than on the principle of an iron lung, which they put forward as an alternative to intermittent positive pressure respiration and not necessitating endotracheal incubation. Many complications including the possibility of obstruction of the respiratory airways, and greater difficulty in nursing make it unlikely that this method will be of great value.

There follow three papers by Beck, Everbeck, and Badmann, respectively, on resuscitation of the asphyxiated newborn, the management of respiratory distress, and the care and management of at-risk infants during the first few days of life. These three papers illustrate aptly the rapidly changing pattern in neonatal care as new knowledge is gathered and fresh experience gained, which make many methods advocated in the papers appear obsolete already. For instance, there are constant modifications in infant respirators coming on the market, and the Bennett respirator widely used in the United Kingdom is not mentioned at all. All the authors lay great stress on the use of intravenous therapy, the use of trometamol (Tris and THAM) to correct metabolic acidosis, and the use of orciprenaline in the management of asphyxiated infants, methods which many advanced British centres have now abandoned in favour of greater use of intermittent positive pressure respiration and of early oral feeding. The routine use of γ-globulins in such cases requiring exchange transfusion is likewise strange to British readers, as is the routine use of large doses of prednisone in the treatment of neonatal jaundice. However, the reader will find little to disagree with in the description of the management of infants with diabetic mothers or of other neonatal emergencies.

The second part of the book is devoted to papers concerned with the problems of breast-feeding. The subject is started off by Hytter who discusses physiology of lactation, breast development, and comparative anatomy of the breast and its hormonal control. Kute views the subject from the obstetric point of view. Surprisingly