make is that the latter can only be a small and unrepresentative sample of American research in this field.)

The reviewer can add little to the justifiably warm praise given to this book in the introduction by Dr. Mary Sheridan. Like her, one hopes that the work put into it will continue, so that these reviews can be kept up to date.

Anyone working in this field places himself under a serious and totally unnecessary handicap if he does not have access to these Research Volumes.

Cellular Organelles and Membranes in Mental Retardation. Institute for Research into Mental Retardation Study Group No. 2. Edited by P. F. BENSON. (Pp. viii + 224; illustrated + tables. £3.50.) Edinburgh and London: Churchill Livingstone. 1971.

This volume is a record of the contributions and discussions given at the second study group meeting held under the auspices of the Institute for Research into Mental Retardation. There was no single unifying theme, and in fact 4 topics were discussed including renal tubular function and mental subnormality, lysosomal function and disease, and chromosomal redundancy associated with mental subnormality. The contributions, 16 in all, vary widely in their aim from a review of an already well-documented condition, e.g. Hartnup disease, and a synopsis of defects in renal tubular reabsorption of amino acids, to descriptions of original studies. Inevitably, much of the work discussed here has already been published. All the papers are highly laboratory orientated and will appeal mainly to the specialist. It is doubtful whether the general paediatrician will find much of interest unless he has a particular concern in inborn errors of metabolism. The discussions after each paper are more rewarding than at most such meetings and, though usually highly technical, occasionally a point of general interest emerges, as for example that it was worth while definitely establishing or excluding a diagnosis of a specific hereditary metabolic disorder even when no treatment was available.

The volume is well produced, though somewhat expensive for its size especially considering no costly illustrations are given.

E.A.T. (Edinburgh Articulation Test). By A. ANTHONY, D. BOGLE, T. T. S. INGRAM, and M. W. MCISAAC. (Pp. 86; assessment sheets + picture book + conversion table. £12.22.) Edinburgh: Churchill Livingstone. 1971.

The Edinburgh Articulation Test is a unique addition to the collection of tests and assessments currently at the disposal of those concerned with the description of deviant or delayed speech development. It is unique in its combination of standardized test and qualitative assessment components.

Actual administration takes about 20 minutes. A knowledge of phonetics is required. The subject is recorded naming 41 items from the picture book. (Some of the attractive illustrations are disappointingly ambiguous for young children.) From these utterances, 77 consonants or clusters are transcribed onto the quantitative score sheet and scored on a right/wrong basis. A lengthy section in the textbook gives guidance on scoring.

The raw score thus obtained can be used to find the subject's articulation age (between 3 and 6 years), or it can be converted to a standard score. For the low achievers the examiner moves on to the five-page qualitative assessment. The same data are used. Each item is then matched to International Phonetic Alphabet symbols in one of six columns which are headed 'adult form' through to 'very immature' and 'atypical substitutions'. If the subject's articulatory attempt cannot be matched, it is inserted into the column containing the most phonetically similar sounds. Here subjectivity appears to creep in. For example, does one match place or manner of articulation? This analysis provides a measure of articulatory maturity and alerts the examiner to features of atypical or extremely retarded speech development which may require remedial treatment.

It is stressed in the textbook that the items are based on data collected from normal Edinburgh children and they provide an open-ended framework. It remains to be seen whether the articulation of children from other areas in Great Britain will readily fit into this framework and be successfully subject to the same classification. However, it is certain that this test, minutely detailed and rigorously standardized, will have many useful applications.

Specific Dyslexia. The Research Report of the ICAA Word Blind Centre for Dyslexic Children. By SANDHYA NAIDOO. (Pp. xv + 165; 3 figures + 49 tables. £3.00.) London: Pitman. 1972.

Sandhya Naidoo has published the results of a joint investigation by physicians and educational psychologists under the auspices of the Invalid Children's Aid Association, of intelligent, apparently normal children with a specific impairment in their capacity to learn to read and to spell. All cases in which concomitant emotional disturbance or deficient educational opportunity might have been causal were excluded from the investigation, so that environmental factors could not obscure constitutional factors.

In most subjects one or several of the following points were observed: delayed speech development and language immaturity, immature perceptuomotor ability, atypical cerebral dominance, poor visuospatial ability, auditory perceptual weaknesses, and disturbance of sequential organization (visual and/or verbal). No common aetiology, however, emerged. In some cases symptoms of disorder seemed to reflect differential rates of maturation rather than true abnormality. In others, the disability could have been inherited, or acquired as a result of early brain damage, or minimal neurological impairment of possible pathological origin was indicated.

The term 'dyslexia' is now an international one. The author endorses its continued use as a means of differentiating reading and spelling disability of constitutional origin from reading failure caused by environmental factors. The book provides a welcome source of reference for doctors who need to identify this condition, even while knowledge of the syndrome is still far from complete.

Differential Diagnosis in Pediatric Neurology. By JORGE C. LAGOS. (Pp. x + 346; illustrated + tables. £6.50.) Edinburgh and London: Churchill Livingstone; Boston: Little, Brown. 1971.

To write a textbook on paediatric neurology is a harder task now than 10 years ago, and is likely to become more difficult with the increasing complexity of the subject. Of the many attempts made in recent years some have been more successful than others: all have encountered the problem of keeping up to date in the light of biochemical advances and the reclassification of diseases that these have necessitated.

It was therefore an excellent idea to produce a book which, instead of following the traditional pattern of describing diseases by systems or aetiology, has chapters discussing the common neurological presenting complaints or clinical situations. As the author disarmingly points out in a foreword, the similar initial manifestations of many different neurological diseases means that this approach presents a formidable problem of repetition and overlapping. Dr. Lagos, however, has handled his material with great skill, and in addition has a readable style, so that though occasional *longueurs* are inevitable with recurring lists of common symptoms, the book is easy to read and yields up its information readily, being particularly useful for the student, resident, paediatrician, and family doctor who must consider the differential diagnosis in a particular situation and supplement his reading from more standard texts and journals.

The conditions described are dealt with in reasonable depth and the author has included a considerable amount on pathology, investigation, and treatment, though he has sensibly freed himself from the burden of having to write statutory sections on these aspects for every disease considered.

Five useful appendices and a glossary of eponyms end the book. The clinical and fundus photographs, *x*-rays, and pathological illustrations are excellent. The standard of *x*-ray plates is far higher than in most journals and books: it is, for example, unusual to be able to see suprasellar calcification or a difference in the size of the two optic foramina so clearly in such small plates.

Each of the 19 chapters has a useful list of references with some as recent as the 1970s. This might have been more valuable if they had been indicated in the text, and the British reader may regret that there are not more references from this side of the Atlantic.

Child Psychiatry. 4th ed. By LEO KANNER. (Pp. xxiv + 735; illustrated + tables. U.S.$16.50.) Springfield, Illinois: C. Thomas. 1972.

Among the many accolades deservedly awarded to 'Kanner' since its first appearance 37 years ago, none has been more apposite than that of the *British Medical Journal*, 'Still the only textbook on child psychiatry of international status'—a tribute as currently germane to the 4th edition as to earlier issues.

Nevertheless, 15 years have elapsed since the 3rd edition, and in that time, as the author himself concedes, 'there has been a veritable publication explosion . . . the sifting (of which) . . . represents a truly Herculean task'.

However, certain areas do merit special mention because they reflect growing points in this branch of medicine, and among these, for example, an effort has been made to include the controversial topic of minimal brain damage, and the important subject of cytogenetics, with particular reference to Down's syndrome.

On the other hand, recent contributions to the field of infantile autism, by Lorna Wing and Michael Rutter, for example, or by Israel Kolvin and Christopher Ounsted, have somehow failed to attract detailed discussion, despite the author's role as progenitor of Kanner's syndrome. Similarly, scant reference will be found to recent developments in the field of affective disorders of childhood and the scope of thymoleptic drugs in their treatment.

Perhaps this is because 'progress has been so fast . . . and the literature so abundant, that much time will be needed to test some of the new hypotheses . . . before they can be included in a textbook'.

Yet, despite the conservative scale of textual revision adopted by the author, so much of what this book retains has a timeless quality about it, as to commend it anew to a fresh generation of paediatricians and child psychiatrists who will find within it the distilled wisdom of a humane and uniquely experienced clinician. For them, as for the reviewer, the master has not lost his magic.