Book reviews


This is a collection of statistical studies from the Office of Population Censuses and Surveys, and deals with seven subjects related to childhood mortality and morbidity. Clinicians sometimes criticize medical statisticians and epidemiologists on the grounds that their studies either simply confirm what the clinicians thought they knew already, or deal with influences or changes which are of little practical importance. However, paediatricians should find at least the first three papers in this book to be of real interest. The first two deal with spina bifida, the more important one showing that the proportion of babies with spina bifida who die in the first year has been rising since 1970. The authors seem mildly surprised that the debate on policy for managing children with this malformation has actually produced an impact on mortality statistics. Paediatricians may be more surprised that the impact was not greater. In 1969, 30% of liveborn children with spina bifida died in the first year, and this figure has been steadily falling since 1960 when it was 66%. In 1970 the downward trend was reversed, and in 1972 41% of these children died in the first year. One hopes Dr. Weatherall and his colleagues will publish figures for subsequent years, because personal experience and discussion with colleagues suggest that the mortality is now much higher.

The third paper analyses death rates between ages 1 and 14, according to occupational class of the father. In preparing talks for students on social influences on child health, this reviewer has always found it difficult to obtain up-to-date data on child mortality rates in relation to social class (except for infants in Scotland). This paper provides them, and very remarkable they are. Among children aged 1 to 9 the overall death rate is twice as high in social class V as in classes I and II. Likewise, death rates from respiratory diseases (aged 1 to 4) are twice as high in social class V and death rates from accidents or violence over four times as high. A child under 9 is five times as likely to be killed in a road accident and ten times as likely to be killed by fire if he comes from social class V than if he comes from social class I. These are not statistical minutiae, but evidence of the crucial role of social factors in some of the major kinds of childhood death.

The other papers discuss environmental influences on stillbirth and infant mortality (higher rates of cot death and neural tube defect apparently related to northerly latitude rather than to soft water); variations in recording of 'sudden infant death' on death certificates (highly variable); sequelae of virus infection in pregnancy (a very small increase in the risk of childhood neoplasm if the mother had chickenpox, and possibly if she had rubella and influenza); foundlings (fewer found dead or alive in 1972 than 1965); and seasonal patterns of infant mortality (death rates slightly higher for babies born from July to December than January to July). These latter papers are largely for the epidemiological connoisseur, but the others concern every reader of this journal.


In Africa children up to 6 years of age make up a fifth of the total population, twice as many as in industrialized countries, and this number of children is likely to double by the end of the century. However, these are the survivors, and in the early years of life commonly a quarter and often over a third of the children may die.

In the foreword to this book, Dr. T. Peter Omari, an African, writes, 'Children and women have traditionally been low as priority considerations in African society. Modern enlightenment has not yet made any significant dent in this thinking, and they continue to rank low in the social, economic, and political priorities. Lacking spokesmen and leverage, it is little wonder that their plight has continued unabated and unheralded. If traditional African society were to be likened to a boat filled with men, women, and children, and if the boat were sinking, I can well entertain the vision of men leaving first, followed by the women and finally by the children'. He goes on to point out how value systems are different in Africa and that a massive re-education and concerted effort will be necessary to change the priorities in favour of children and women.

This book is a remarkably successful attempt to edit the proceedings of the Dag Hammarskjöld seminar held in Addis Ababa in May 1973. As well as including presentations by world authorities, the seminar also asked these authorities to suggest what they would do when put into the rural health centre, the provincial, central, and university hospital, with the type of dilemma that the young worker meets in these situations with limited resources and tremendous demands. This is a beautifully prepared and well presented book, costing Swedish kronor 30 (£4.00). Surely a book produced at a fraction of the cost and perhaps printed in Africa and widely circulated there might have done more to reach the excellent objectives of the producers.


This slim volume is a report of the second 'paediatric workshop' sponsored by Unigate, and held at the Royal College of Physicians in 1974. The editor points out in his preface that the definition of environment as 'the sum of external influences acting upon the organism' was the broad concept underlying the meeting. The