Book reviews

The Pregnant Diabetic and Her Newborn. 2nd edition. By JØRGEN PEDERSEN. (Pp. 280; illustrated+tables. Dkr. 140.00.) Munksgaard: Copenhagen. 1977.

Jørgen Pedersen published his thesis in 1952. It reviewed the extensive early literature on the subject of diabetic pregnancy, was a model of clarity, enunciated therapeutic principles which have not been bettered, and described his hypothesis which subsequent workers have further embroidered. Danish colleagues, whom he has led or influenced, affectionately marked his 60th birthday not long ago with a special selection of their own papers. He now provides for us a 2nd edition of his original work, expanded of course with important additions to knowledge, many of them inspired by his own original thoughts. The 620 references owe much to almost 50 contributions from the closely integrated Danish group of internists, obstetricians, and paediatricians which he has led. They are as up-to-date as 1977 and those for the period 1970-76 are as well described as the Old Master's own. British workers are well represented among them though there are a few strange omissions of classical studies rather than of reviews alone. Almost certainly some of the reviews which he recommends as further reading would make his list complete.

When Pedersen's thesis was published originally, papers relating to diabetic pregnancy, and especially its effects on the fetus and child, had a small enough readership to make it possible for authors to meet most demands from the 50 reprints provided. The subject has, however, grown greatly as its significance has been grasped and there must now be few serious researchers in Britain who can afford to mail reprints around the world in the numbers requested. In this 2nd edition Jørgen Pedersen has performed a service in lucid English and in a handy book for those paediatricians both old and new to this subject. The old may look critically at their own work through his discerning eyes and the young will find all the information they need before starting work on a problem which, like diabetes itself, is in some ways as challenging now as it was 25 years ago.

J. W. FARQUHAR

Born Too Soon or Born Too Small. Clinics in Developmental Medicine No. 61. Edited by G. A. NELIGAN, I. KOLVIN, D. MCI. SCOTT, and R. F. GARSIDE. (Pp. 101; tables+graphs. £4.50.) Heinemann Medical: London. 1976.

This study compares the growth and performance, at ages 5 to 7 years, in representative samples from 337 infants whose gestational ages at birth were greater than 255 days (mean gestation 281 days) and with birthweights below the 10th centile, 151 infants whose gestational ages were less than 255 days (mean gestation 244 days) but whose birthweights were appropriate for gestation, and 229 randomly selected 'control' infants (mean gestation 281 days) from the Newcastle Survey of Child Development. The authors conclude that children in the two index groups show some impairment of function at school age and that it is better to be born too soon than to be born too small.

A bold statement of the primary objectives and conclusions of this study does not do justice to its careful planning, discriminate use of sophisticated assessment techniques, and overall awareness of the social and family environmental influences acting between and within these carefully chosen population groups. It is a tribute to the late Gerry Neligan and his co-workers that such a complete picture of a well-defined population was achieved. That poor intrauterine growth is associated with subsequent widespread and non-specific impairment of performance is an important observation, but equally the very large influence which the quality of mothering and other family factors was found to have on performance has not been previously so clearly shown.

The findings are already 'out-of-date' because of the many changes in pre-, intra-, and postnatal management and social circumstances which have occurred during the 15 years since the study population was born. None the less, without such information valid statements about the effects of changes in management cannot be made. This carries the implication that similar careful observations must be made on infants being born now. Anyone planning such studies should be guided by the Newcastle group's unique experience and enthusiasm.

I strongly recommend the purchase of this book to all departments concerned with community health and social sciences as well as to medical and nursing units of obstetric and paediatric departments.

FORRESTER COCKBURN

Recognizable Patterns of Human Malformation. 2nd edition. By DAVID W. SMITH. (Pp. 504; illustrated. £15.50.) Holt-Saunders: Eastbourne. 1976.

'Indispensable' is a word often loosely applied by reviewers to books that most of us have cheerfully managed without. However, paediatricians who see newborn babies with congenital malformations, or children with developmental problems including mental retardation, or children of short stature—and that must include practically all of us—would find it very difficult to manage without an atlas of malformation syndromes. We do not simply need to satisfy natural curiosity as to whether a child with a collection of physical peculiarities belongs to a recognizable syndrome; there is the much more important practical issue of whether such a syndrome has genetic implications.

Dr. Smith's atlas is one of the two best available and probably the easiest to use and handle. The second edition has been expanded and brought up to date (225 syndromes compared with 135 in the first edition) and it is a work of very great value. The format is unchanged with a concise description of the major features of each syndrome, photographs, and some relevant references. There is not only an excellent index but also a valuable appendix listing for each particular clinical feature the syndromes in which it occurs frequently and those in which it occurs occasionally.

Syndrome classification is often disparagingly compared to stamp collecting, but Dr. Smith's interest is at a more fundamental level, and the book concludes with some more general chapters on the nature and aetiology of congenital malformations. There is also a useful chapter on the practical approach to investigating children with growth deficiency, with mental deficiency, with arthrogryposis, and with ambiguous genitalia. Finally, there is a useful com-

pendium of normal standards including those for some of the less commonly measured parts of the body.

I had two general thoughts on studying this book whose first edition has already proved its value. First, the majority of children whom I see with physical peculiarities, usually combined with mental retardation, do not fit into any of the recognized syndromes described in this book. Either there must be a vast number of as yet undescribed syndromes or, perhaps more probably, there are so many combinations of abnormalities that can occur during development that many of them do not cluster together with sufficient frequency to be recognized as a syndrome. The second thought is that this is one field of medicine in which computer-aided diagnosis really ought to be a practical and helpful possibility.

R. J. ROBINSON

Developmental Pathology of the Neonate.

By JEANNE-CLAUDIE LARROCHE. (Pp. 525; illustrated+tables. US \$73.50.) Excerpta Medica: Amsterdam. 1977.

This book makes no attempt to be a complete textbook on the subject but ranges widely over the author's own interests in various aspects of fetal development and perinatal pathology. An initial chapter on the technique of post-mortem examination is followed by others dealing with particular organs or organ systems and with individual pathological conditions or syndromes such as haemolytic disease, nonimmunological hydrops fetalis, and intrauterine growth retardation. There is a separate chapter on pathology associated with umbilical catheterization. A major part of the book is concerned with development and pathology of the central nervous system.

It is certainly useful to have, within a single volume, access to Dr. Larroche's views on a wide variety of aspects of perinatal pathology, and neonatal neuropathology in particular. There are many sections which will interest any pathologist or paediatrician concerned with the perinatal period and a few chapters, such as that on the lungs, can be regarded as good reviews of their subjects. Particularly welcome is the inclusion of descriptions and illustrations of the pathological lesions associated with different forms of

neonatal intensive care. However, I find it difficult to understand to what readership the work is principally directed as the style is that of a straightforward morbid anatomical text, rather than a compilation of papers on topics of interest to the author. Both spelling and use of English are as haphazard as the selection of subjects for inclusion, and many of the photographs are poorly reproduced. Although this book forms a useful addition to those available on neonatal pathology, it cannot replace the standard texts.

JONATHAN WIGGLESWORTH

Clinical Pediatric Urology. Vols. 1 and 2.

Edited by P. P. KELALIS and L. R. KING. (Pp. xxix+1107; illustrated+tables. £50.00.) Saunders: Philadelphia, London, and Toronto. 1976.

This is the most comprehensive work yet produced on paediatric urology and will undoubtedly be the standard work from the USA in this exciting and rapidly advancing field for some years to come. Every aspect of the speciality is covered in detail by a team of paediatric urologists and paediatricians, helped by an anaesthetist, a gynaecologist, a radiologist, and a geneticist. The editors have put the whole together so successfully that there is minimal overlap and the text is most readable. The emphasis throughout is clinical with a good balance between diagnostic aspects and operative detail. In addition to the chapters on obstruction, infection, and congenital abnormalities, etc., several topics have been taken separately such as incontinence, neuromuscular dysfunction, abdominal masses, hypertension, anaesthetic management, genetics, and radiological evaluation and these are clear and explicit contributions.

So much of these two volumes is excellent and up-to-date that it is invidious to single out examples but the sections on incontinence, posterior urethral valves, and undiversion (the process of restoring urinary continuity after diversion) are exceptionally good. The standard of illustrations and x-ray reproductions, with a few exceptions, is superb. The references at the end of each chapter are selected and recent. Although there are no British contributors to the text, the references to

clinicians from this country are plentiful and generous.

At a time when the price of all good things is spiralling it is not surprising that these volumes are expensive but I believe they are good value for your money and a sound investment. They will be compared with Innes Williams's *Paediatric Urology* but they are so dissimilar in scope, approach, and price that they are completely different and will stand proudly on a shelf together.

ROBERT H. WHITAKER

Paediatric Haematology. By MICHAEL L. N. WILLOUGHBY. (Pp. xii+434; illustrated+tables. £18.00.) Churchill Livingstone: Edinburgh. 1977.

This book is intended to be of use to all concerned with diagnosis and management of blood diseases in children. In these days of wordy multiauthor textbooks, it is refreshing to see one author cope with the whole spectrum of paediatric haematology. Wisely, Willoughby does not embark on lengthy expositions of pathophysiology which are already available in existing texts. There is enough explanation for clarity and the book is extensively, perhaps rather unselectively, referenced, with citations up to 1975. Of course, the single authorship has led to uneven coverage of topics but the overall standard is high; the chapters on neonatal anaemias and the disorders of haemostasis seem particularly good. Few would share the author's enthusiasm for the osmotic fragility test in investigation of thalassaemia; indeed the whole chapter on haemoglobin disorders is disappointing and shows insufficient clinical emphasis. Similar criticisms can be made of the chapter on acquired haemolytic anaemias where recent evidence about the frequency of acute complement-mediated haemolysis in childhood is not mentioned. Most topics, however, are amply dealt with in a way that carries the stamp of the author and his own experience.

This book can be confidently recommended as a handbook and reference source for the general paediatrician and for the haematologist who has to deal with occasional haematological problems in children.

JUDITH M. CHESSELLS