Book reviews


I was becoming rather fed-up with the flood of books detailing theories, researches, or symposia on battered and abused children. This one makes a change, and is stimulating, if only because its conclusions are so much at variance with the others.

Doubts have recently been expressed on whether the underlying attitudes of battering parents can be changed. Perhaps the ultimate test of the effectiveness of medical intervention would be the study of how individuals, who have themselves been battered early in life, in their turn behave and feel towards their own children. Standards for comparison are necessary, and this too entails continuing observation. How could one avoid the problems of observer-altered experiments? How could one refrain from intervening in a control series? Indeed, is it really possible to obtain a truly matched control series?

An American social worker and her co-workers have now reported what is claimed to be the first controlled, long-term follow-up study of child abuse; and they plan to follow the children into adult life. Traumatised infants were divided in 2 groups, according to their assessment as deliberately or accidentally injured. Eight years later some of these judged to have been abused were matched against others classed as accidentally injured. At this later stage, too, an additional group of uninjured children was brought in as a further control.

It is generally accepted that child abuse can harm not only physical but intellectual, emotional, and social development. The author here concludes that the abuse of children made no appreciable difference to the comprehensive development of her cases. The decisive factor, it is claimed, is low social class, associated with poverty. It is, of course, nothing new to affirm that poverty reinforces and perpetuates itself from one generation to another, and long ago Bernard Shaw put it neatly: 'Poverty is the most chronic disease of the poor'. But the absence from this study of evidence incriminating battering and ill-treatment in developmental impairment is so surprising—as the author candidly admits—that one looks suspiciously at the controls.

The crux, surely, is this. Poverty can certainly impair the development of children; but it seems to me that poverty plus abuse would impair it even more, and the differences should be assessable. In the present study the investigators went to considerable lengths to safeguard and validate their basic data, but sophisticated statisticians are likely to detect flaws (they usually do!). I mention only one of the items that disquiet me. Five families, originally classified under the category of accidental injury, were later transferred to the other category, abuse. I would go further. The entire accident group, to my eye, looks suspect. Some among them may well have been injured deliberately; but, in any event, the disturbed emotional climate in families whose children suffer accidents (as distinct from abuse) can itself influence their development adversely.

Although I am reluctant to accept the author's conclusions, I find the book well written and deserving of serious attention. I know from my own experience that, for those involved with battered babies, the passion may be more persuasive than the statistics.

J. APLEY


When your reviewer first gave a lecture on the prevention of fetal malformations, a search of the world literature revealed just one scientific paper in German and one unscientific paper in Reader's Digest. Since then the subject has burgeoned, and it is a pleasure to commend this latest book, based on a symposium held in March 1977. The 22 papers are by workers of international repute, and each paper is concise and readable. They cover not only the aetiology and prenatal diagnosis of fetal malformation, but also the management of pregnancy termination, cost effectiveness (without which no modern symposium feels complete), and the legal and administrative consequences of antenatal screening.

The production is excellent, and 300 pages of distilled wisdom between hard covers for £12 is tremendous value. Only one black mark can be awarded, for the worst-designed dust jacket of the year, but that is easily removed. This book is mandatory for the perinatal section of every medical library, and strongly advised for the personal bookshelves of paediatricians and obstetricians.

R. W. SMITHIELLS


Treatment of Haemophilia and Other Coagulation Disorders was published in 1966 and described in detail the experience of the Oxford Haemophilia Centre. This book is its natural successor and has been written as an authoritative guide for haematologists, physicians, and surgeons who care for the haemophilic patient, and even, perhaps, the editor intimates, for the patient himself—although no book in that context could surely rival Peter Jones’s monograph. Topics covered are: the theory of haemostasis, the factor VIII molecule, clinical and laboratory diagnosis, availability and use of therapeutic materials, home treatment, and many social and economic topics related to the haemophilic and society. The tone of the book is extremely didactic but this is permissible in view of the authors' unrivalled experience and each chapter is lavishly interspersed with tables and graphs drawn from that experience.

A comparison of the book with its predecessor shows the welcome changes that have taken place in management of haemophilia during the last 12 years—the most important of which, from the patients' point of view, must surely be the advent of home treatment. The comments of patients and parents provide the most compelling illustration of its benefit.
I was surprised that the chapter on orthopaedic management has disappeared; this is presumably because of the widespread acceptance of the prime importance of early replacement therapy as the mainstay of management, and also because the Oxford group has published a book about musculoskeletal problems. I think this omission is a mistake. Small haemophilia centres, whose disadvantages are discussed in great detail, may not have access to the companion volume. Surely it is too early to assume that the present generation of haemophiliacs will be orthopaedically normal, and home treatment must be accompanied by a programme of regular orthopaed assessment.

Nevertheless, this book is clearly indispensable to all concerned in diagnosis and management of haemophilia. I just wish the role of all the authors had been identified; I recognised several distinguished authors by name but it would be nice to know precisely what part each contributor has played in this unique team.

JUDITH CHESELLS


The book has chapters on the general principles of treatment and its organisation, an outline of different treatment approaches and their synthesis, assessment for treatment, treatment procedures, therapy in groups, the problems of deformity and a (much too brief) chapter on equipment. There is a good index and a reasonable list of references which happily do not interrupt the text. It is copiously illustrated, although some of the line drawings are not as explicit as they are attractive. The book concentrates on the details of treatment and, as such, it is written primarily for those who treat rather than for those who prescribe treatment; but a cursory understanding of those techniques would be of benefit to all who work in this field.

In criticising a book of this scope, it would be easy for a reviewer to be destructive and comment on omissions and inadequacies; but the author, whose knowledge of the treatment of these disorders is a byword, has taken on a task which has daunted others. She deserves praise for a book which will become a classic against which other books on this subject will be judged.

DAVID SCRUTTON

Shorter notices


This follows the familiar and excellent form of its predecessors. Well written and informative abstracts of well-chosen papers from the 1976–77 literature, including many from nonpaediatric journals. Often followed by characteristically witty and pithy comments from the editor, or by longer critical reviews. Well indexed, entertaining, and instructive to browse through; invaluable for reference.


Proceedings of a 1975 symposium in Toronto. About two-thirds of the book is concerned with basic sciences, largely mechanisms and pathogenesis of fever, although there is some neuroanatomy and neurophysiology. The other third deals with clinical aspects of febrile convulsions —sequela and prophylaxis. Most of the work reviewed by Ounsted, Aicardie and Chevril, Wallace, Falconer, and Lennox-Buchthal has been published before. The work of Nelson and Ellenberg suggesting a very benign outcome in a large population study of febrile convulsions was presumably not available to the symposium. The interested clinician will find the first two-thirds of the book hard work and the last third to contain disappointingly little that is new.


The first edition was reviewed in 1974 (p. 588) as ‘most impressive’ and enthusiastically recommended. This second edition incorporates the important advances in treating lymphomas and leuemias, Wilms’s tumour, osteosarcoma, and rhabdomyosarcoma.


A very large amount of both experimental and clinical work, much of it of the highest class, is described, the book’s title hardly indicating the width of the subject matter discussed. Copiously illustrated, and well indexed. But why is it impossible to discover when the symposium took place which the book reports?


The first edition was reviewed in 1974 (p. 973); it provides perhaps the most complete coverage of perinatology of any of the many books published in the past few years in this field. Yet some of the more disheartening gaps in the first edition noted by the reviewer — such as the physical examination of the newborn and genetic counselling — persist.