Book reviews


This is the first of a new series of paediatric monographs which succeeds the postgraduate paediatric series published by Butterworths, of which the late John Apley was editor. For this series Butterworths have enlisted different editors for each book and have tried to share the editorial tasks between a UK and a USA editor.

It is a comparatively small, moderately priced book for which the editors have chosen 13 topics, each dealt with by a different author, most of whom are from the USA. It is intended for general paediatricians and the choice of subjects is sensible. The level of information is also well judged giving either a guide to current best management or some insight into exciting and important trends. The controversial practical aspects are dealt with firmly and usefully; thus in the chapter on thrombocytopenic purpura, clear advice is given about when and how to use corticosteroids. However, the brevity of the chapters means that they cannot be regarded as authoritative; a paediatrician confronted with a child who has haemophilia will require more knowledge than is available in the chapter on 'Home therapy and haemophilia'; and the trainee taking a postgraduate examination will require more information than is available in the relevant chapter. The book should not be considered as a paediatric haematology and oncology reference book, but rather as a guide to recent trends.

Bearing in mind its limited size and scope the space used for reference lists is extraordinary; one chapter comprising 20 pages of text is followed by 15 pages of references. Another brief chapter has 315 references, all given in full Vancouver style and printed in a type large enough to make a presbyopic paediatrician purr.

**ROY MEADOW**


This third book in a series edited by Margaret Pollack is compact, readable, and practical. Topics dealt with in the text include the morphological and physiological development of the visual system; the development of visual behaviour in the young child coupled with descriptions of the techniques available to the clinician for the assessment of vision; the principles governing optics and refraction, the importance of strabismus within the context of paediatric practice; models of ophthalmic services for children and the special visual needs of handicapped children.

Peter Gardiner is to be congratulated on his authorship, particularly in the way he expresses complicated technical principles in simple uncluttered English. The sections on optics, refraction, and squints will be especially valuable to the primary care physician, and give him sufficient working knowledge to make selective referral to specialist colleagues correctly.

Severe visual disability is only briefly referred to and although the book did not set out to detail the embryological, genetic, and paediatric facets of congenital visual handicap, a section emphasising that there are important overtones in these areas in the most forms would have been valuable. It would have been helpful to have had a description of symptoms and signs to watch for in babies and young children.

Although the book is well indexed and referenced the lack of reference to much of the more recent research on early infant vision is a pity.

This is an excellent little book which will find a useful place on the shelves of paediatric libraries as well as of doctors and people in other disciplines working in child care and development, and it should certainly be on the book list for courses in child development.

**PATRICIA M SONKSEN**


A new text on paediatric pathology is a rare occurrence and this addition to the field by Professor Colin Berry and 11 other contributors deserves a warm welcome. Its roots can be traced to the Department of Pathology at The Hospital for Sick Children, London, where five of the authors trained; two-thirds of the contributors are from London medical schools.

The first three chapters cover examination of the fetus, placental and abortion pathology, and congenital malformations. The final chapter provides a concise
account of sudden infant death syndrome and non-accidental injury. The remaining 12 chapters are devoted to systematic pathology; only skin and eyes are omitted. The text is uniformly sound and in the case of metabolic diseases and the chapter on muscle and peripheral nerve there is a useful practical section on techniques of investigation. The illustrations are of high quality.

The uneven balance of the content is largely pre-empted by the declared editorial aim that this is not a comprehensive text or reference book. It is intended for pathologists with a special interest in this field rather than a special training. However, some chapters are comprehensive already and I hope that Professor Berry may reconsider the present selective policy for future editions, which should be assured to judge by this volume.

ANGUS GIBSON

Books for patients and parents

Churchill Livingstone Patient Handbooks

I have just been listening to Mozart’s A Major piano concerto No 23 (K 488) played by Pollini; the most sublime of composers and one of the greatest of modern pianists; genius interpreted by genius; perfection. In a way, and on an entirely different plane, the writing of books for patients and the parents of patients is similar to a musical performance in so far as for complete success you must have both the corpus of knowledge and experience (the composition) and the ability to interpret it to the readers for whom it is intended (the performance). In another way however the analogy stands completely inverted because, whereas in music there are few composers and many performers, in the writing of popular books on medical subjects there are many with the qualifications to compose but relatively few with the ability to interpret well. It would be easy to suppose that this kind of writing requires less effort than writing for professional readers but the opposite must be true. I heard it said of the late Ronnie MacKeith that he once interrupted a meeting with ‘Yes, but what we ordinary mums want to know is . . . ?’ How many of us really know what we ordinary mums want to know?

So far in this series there are eleven books, six of them (the five I’ve read and another on Diabetes in your teens) deal with paediatric subjects. They are attractively produced, small books each with a different coloured, bright, glossy, soft cover, measuring 18.5 x 12.5 cm and containing between 43 and 115 pages. There are a few simple diagrams and occasional tables and figures, but no photographs. Each of the authors is a nationally or internationally acknowledged authority on his or her subject and has written extensively about it before. As might be expected the factual content of the books is largely impeccable—though the Laidlaws’ assertion that 10% of children with febrile convulsions later develop epilepsy is a gross overestimate.

There are traps which lie in wait for anyone who writes this kind of book and some of the authors have occasionally fallen into them. There is the trap of talking down to people, one facet of which is the use of over-elaborate simile; Professor Farquhar’s reference to ‘the movie camera at the back of the eye known as the retina’ seems to me to come into that category. There is the trap of over-simplification which may confuse rather than illuminate—the Laidlaws’ diagrammatic egg-shaped brain divided into exchange brain, computer brain, and primitive brain is an example; I can see no real advantage of an egg-shaped brain over a brain-shaped brain. There is the trap of letting your enthusiasm run away with you. Professor Illingworth can’t really expect to get away with ‘On no account let your child come in contact with an adult who has, or has had, tuberculosis even though it is said to have “healed” or to be inactive’. The morphological similarity between Koch’s bacillus and Hansen’s bacillus doesn’t justify treating all those who have ever been victims of the former in a way which may be used to be reserved for those of the latter.

There is the trap of tautology. Teachers should be grateful for a marvellous example: ‘the BS 1619 contains 20 units in 1 ml, but it will only do so when you use soluble insulin at a strength of 20 units in 1 ml’. There is the trap of preaching a sermon rather than giving professional advice—witness Professor Illingworth’s exhortation to parents under the heading ‘set a good example’. There is the trap of being ‘groovy’ and talking like a Radio 1 disc jockey—‘16 units at 80 strength is only 4 on the syringe, and 16 units at 40 strength is only 8 on the syringe. Got it?’ (Lest I be accused of favouritism let me say quickly that I examined the short book on enuresis by the senior editor of this journal most carefully for such slip-ups and it gallles me considerably to have to admit that I didn’t find any). I am also aware that we all fall into such traps from time to time and I claim no immunity, especially from the trap of enthusiasm.

Who will these books help? Despite the traps the one about the diabetic child is invaluable as a supplement to, or explanation and discussion with parents and all children’s departments should have copies to lend. The one about enuresis should also prove helpful for intelligent parents and general practitioners might find it useful to have several copies for them to lend. I found the book about epilepsy less readable, but that may be a personal reaction to the style and many parents or parents might well find it useful, especially in providing points for further discussion with their doctor.

I am not sure how Professor Illingworth’s two books will be used; there are several longer and much more attractively presented books which deal with many of the same subjects. The book about infections and immunisations could be useful to parents as a reference book in times of trouble but the absence of an index detracts from its use in that way. Again, general practitioners wishing to encourage health education might consider both books as an addition to their waiting room stock.

D P LAY

The Illustrated London News in their surgery waiting rooms.