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 × 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 oversimplification 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 is 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 gallantly 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 direct explanation and discussion with patients 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 patients 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 library. A replacement for the Illustrated London News in their surgery waiting rooms.