

£45.00 hardback.) Butterworth: London. 1981.

This excellent and much-needed book provides a comprehensive description of all but the very rarest specific congenital heart defects; it also contains useful chapters on their pulmonary consequences, associated syndromes, and cardiac tumours which present so early that they are probably congenital.

A common, frequently subconscious, fear afflicting widely respected experts is that one day someone will realise that their subject does not require superhuman comprehension, but is actually very simple. To avoid such an embarrassing dénouement, the subject is therefore surrounded by a heavy smoke-screen of quite unnecessarily complex pseudo-science expressed in impenetrable jargon. Experts on congenital heart disease are no different from others in this respect; therefore it is refreshing to read the view of the authors that 'congenital cardiac malformations are to us a paradox. It would seem that many pathologists consider them a mystery. . . . Yet we are convinced that the diagnosis of congenital cardiac anomalies is not difficult'. They go on triumphantly to prove the point.

The book is beautifully and lucidly written, with enough flashes of irrepressible humour to counteract any somnolence. Iconoclasm abounds, as it should if scientific progress is to be based on robust intellectual discussion rather than on grey conformity. The lavish scale of illustration means that the written text of many chapters is so brief that even the least motivated reader is unlikely to become bored. He will almost certainly learn a lot, whatever his background, at the cost only of eye-strain. The poor reproduction of some photographs was my only disappointment. In their preface the authors accept the blame for any deficiencies but anyone familiar with the almost legendary quality of Becker and Anderson's slides will realise they have been greatly let down by their publishers.

I strongly recommend that anyone with an interest in paediatric cardiology should

buy two copies of this book; one for himself and the other for his pathologist.

F J MACARTNEY

**The Prevention of Handicap of Early Pregnancy Origin: Some Evidence for the Value of Good Health before Conception.** By M Wynn and A Wynn. (Pp. 68; illustrated + tables. £5.00 paperback.) Foundation for Education and Research in Childbearing: London. 1981.

This large pamphlet by the indefatigable Wynns is subtitled 'Some evidence for the value of good health before conception'. It is a brave, and largely successful, attempt to review the relationships between maternal factors (particularly nutrition) and fetal outcome (particularly birthweight and malformations). It could be said that here and there scientific detachment is tempered by missionary zeal, but the book is clearly intended for a wide and general readership so a clear take-home message is appropriate, and it is one to which I would not take exception.

R W SMITHELLS

**Surgical Problems in Children. Recognition and Referral.** By H C Filston. (Pp. 596 including index; illustrated + tables. £39.50 hardback.) Mosby: St Louis. 1982.

This book is intended for the primary care physician. After a discussion on general considerations, the author has subdivided the material according to age groups—namely the newborn, the infant and toddler, the child from 2 to 12 years, and the teenager. Although the author intended to make the book symptom orientated, this is not clear. The scope of the book is the conditions requiring surgical intervention in the gastrointestinal, genitourinary, nervous, musculo-skeletal systems, some skin/subcutaneous anomalies, and some respiratory system problems but excluding cardiovascular anomalies. The attempt to subdivide material into the age bands creates difficulties and results in a some-

what fragmented or repetitive description of disorders. It is surprising to find discussion on pyloric stenosis, atresias of the small bowel, meconium ileus, and necrotising enterocolitis reappearing in the 2-12 section.

It is stimulating reading with many illustrations. Both x-ray films and photographs are sometimes of patients of an inappropriate age for the section in which they appear. A few of the illustrations are uninformative to a paediatric surgeon and one wonders if they are of value to the primary care physician. In a few areas the text diverges significantly from British experience—for example that malrotation 'is probably the most common aetiological entity for most intestinal atresias'.

In this kind of book more consideration of the signs and symptoms of appendicitis at different ages, rather than a detailed discussion of the postoperative management, would be beneficial for British doctors, but the requirement of the American primary care physicians may be different and this nicely produced book may fill a gap in the north American literature.

D G YOUNG

## Shorter notice

**Childhood Cancer in Britain: Incidence, Survival, and Mortality.** By G J Draper, J M Birch, J F Bithell, L M Kinnier Wilson, I Leck, H B Marsden, P H Morris Jones, C A Stiller, and R Swindell. OPCS Studies on Medical and Population Subjects No 37. (Pp. 87; illustrated + tables. £9.70 paperback.) HMSO: London. 1982.

In the age group 1 to 14 years malignant disease is the second most common cause of death in children in Britain, only accidents causing more deaths. This publication from the Office of Population Censuses and Surveys, based on a study by workers in Oxford and Manchester, gives up-to-date information on incidence and mortality and survival rates for most of the important childhood neoplasms.

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