

## Book reviews

**A Manual of Neonatal Intensive Care.** By N R C Robertson. (Pp. 278 incl. index; illustrated+tables. £9.95 paperback.) Arnold: London 1981.

Pressures are being put on maternity hospitals to provide high standards of care for very ill and often very preterm babies. These pressures will not go away; in fact efforts to centralise neonatal intensive care have the paradoxical effect of making greater demands on paediatric and nursing staff at district maternity hospitals who feel duty bound to give babies a chance and to provide at least short-term intensive care until help is forthcoming from the regional centre.

This manual of neonatal intensive care will enable the resident paediatrician to endure his punishment on the neonatal unit with much greater confidence. Neonatal medicine, far from being highly specialised, is the last bastion of the general physician. A knowledge of physiology of the different organ systems during adaptation to extrauterine life is very necessary and enough is included in this book to help the resident understand the common neonatal disorders. The author has managed to cram virtually all the topics relevant to neonatal intensive care into 250 small pages and keep the text readable.

The chapters on resuscitation and respiratory disorders are particularly helpful, with a lucid account of the use of assisted ventilation. One of my obsessional-compulsive behaviour traits is that I cannot pass flow diagrams without tracing every stream of arrows from their source to destination; some of the author's compositions were a problem. I narrowly escaped becoming trapped in the 2-page spread of guided missiles which showed what to do when an infant deteriorates on a ventilator. Dr Pickering's chapter on congenital heart disease is instructive; did you know that each of the major types of cyanotic congenital heart disease begins with the letter 'T'?

It is clear that the author has spent much time by the incubator resolving clinical problems, and this excellent book contains the nuances of neonatal care that are rarely found elsewhere; for me that is one of its greatest strengths. It will strongly appeal to resident paediatricians.

My only complaint is that the cover of the book is pink! I suppose this was necessary for balance because throughout the text babies are referred to as 'he'. May I urge the publishers to go the whole hog and produce the next edition in an appropriate shade of blue?

MALCOM CHISWICK

**Paediatric Practice in Developing Countries.** By G J Ebrahim. Macmillan Tropical Community Health Manuals. General Editor J Grant. (Pp. 321 including index; illustrated+tables. £12.00 paperback.) Macmillan: London. 1981.

This book is intended primarily for district medical officers in developing countries responsible for organising and administering district mother and child health services. It provides accounts of the background to paediatric disease in developing countries followed by sections on specific infections and diseases of systems. These last chapters contain accounts of the epidemiology and the pathogenesis of disease, and variable amounts of instruction on the diagnosis and treatment of individual conditions.

The doctor in a developing country is confronted by the dilemma of how to divide time between the organisation of preventive medical services and the treatment of sick patients. There is a similar dilemma here in that the author seems undecided whether to write on the management of acute paediatric disease or on the organisation of paediatric health care. The management of specific conditions is dealt with somewhat patchily. There is no account of tetanus; bronchiolitis gets all-embracing treatment; tuberculous meningitis is dealt with in two brief paragraphs. Some treatment regimens are unusual and confusing (especially for digoxin on pages 236 and 238). The parts relative to paediatric services seem to lack practical detail. Nutritional rehabilitation services and under fives clinics occupy only half a page each although we are told that 'the importance of the under fives' clinic... has not been sufficiently appreciated'. The final section which covers 'Provision of care' is so crucial that it demands more than the final 7 pages.

This book is one of a series of manuals available at a reduced price in developing countries; this is good. Nevertheless, despite the price and clear, attractive layout, those wondering whether to buy it would be wise to see it first so as to decide whether it really would be of value in their paediatric practice.

ELIZABETH POSKITT

**Recent Advances in Paediatrics 6.** Edited by D Hull. (Pp. 264 incl. index; illustrated+tables. £17.00 hardback.) Churchill Livingstone: Edinburgh. 1981.

The difficulties encountered in reviewing this book in no way reflect on its qualities. Since paediatrics is an age-related rather than a system-related specialty the reader will most appreciate those chapters which deal with his own particular interests within the specialty. However, the appearance of a new number of *Recent advances in paediatrics* is an event for all paediatricians in the UK and for many abroad. This maintains and, in many ways, improves on the standards of earlier numbers in scope and in the quality of the contributions.

In twelve chapters the volume contains authoritative reviews of aspects of paediatrics as diverse as interpretation of perinatal mortality statistics, reviews of clinical practice in its scientific basis in neonatal paediatrics, paediatric cardiology, chronic diarrhoeal disease, liver disease, and malignant diseases in childhood. Other contributions include thoughtful reviews of diabetes of childhood, the role of immunology in paediatrics, and chronic central nervous system disease in childhood. It is also valuable to the paediatrician of the 1980s to have a discursive chapter on the place of health education. It is perhaps one of the outstanding features of this volume that it provides such a critical review of many of the most controversial aspects currently in paediatric practice. The first chapter on problems and interpretation of perinatal mortality statistics treats the subject with a delicate and informed scepticism and should be required reading for individuals or groups discussing priorities for health care and who draw facile conclusions on