the smokers' level. In places with concentrations of heavy smoke the level rose to 5%. The author analyses research findings concerning the effects of smoke exposure on cardiorespiratory function, nose, and eyes. He quotes adverse ophthalmic effects including glaucoma, cyanide-induced optic atrophy, corneal arcus, and vascular changes in the retina.

The chapter on passive smoking and the fetus was especially interesting. The chapter on possible remedies seems misplaced; logically it should be at the end after all the factual scientific reviews. It concerns the changing tide of public opinion regarding smoking and also discusses relevant legislation in various countries. The description of 'smokers' courts' in Chicago, and a non-smoker who sued the Louisiana Superdome stadium for his exposure to tobacco smoke sent a chill down my spine. The author acknowledges that it is now widely accepted that passive smoking cannot be controlled by law, but will need a general change in social attitude.

As a review of an important subject I think this is an excellent book, but I have mixed feelings about its value as a vehicle for health education. I found that the author's personal antipathy to smoking intruded too much; those concerned in health education know how difficult it is to get a message across. Perhaps the first lesson to learn is to avoid the polarisation of issues on a personal level. The scientific content of this book makes the message crystal clear, the personal comments could blur the image.

JOHN CASH

Pediatric Electrocardiography. Edited by J Liebman, R Plonsey, and P C Gillette. Pp 354: £41.00 hardback. Baltimore: Williams & Wilkins, 1982.

For some time there has been a need for a comprehensive and up-to-date account of paediatric electrocardiography and this book satisfies that need admirably. The first section concerns basic science aspects of electrocardiography including chapters on the biophysical basis for electrocardiography, the anatomy of the cardiac conduction system, and a short but clear account of electrocardiographic lead theory and system.

The central section deals with interpretation of the normal and abnormal

electrocardiogram and emphasis is placed on the systematic analysis of the vector loop rather than on pattern recognition on the scalar ECG. Comprehensive tables of normal values for both scalar and orthogonol data are presented, and there is a useful chapter on statistics and their relation to electrocardiographic interpretation.

The final section, by Gillette and Garzon, covers interpretation and investigation of cardiac dysrhythmias. Most of the text and all of the figures have appeared previously in the book on cardiac dysrhythmias, by these authors, reviewed in the *Archives* earlier this year. The figures have been improved by the addition of 'ladder diagrams' to aid interpretation and the step-by-step approach to arrhythmia analysis is easy to follow.

This is clearly intended mainly for those with a special interest in paediatric cardiology and it will not serve as a quick guide to interpreting the paediatric electrocardiogram. Nevertheless, it provides a valuable source of reference that should be accessible to paediatric departments.

D F DICKINSON

PasTest. MRCP Part II Paediatrics. By S Lingam. Pp 107: £30.00 paperback. Hemel Hempstead: PasTest Service, 1982.

This PasTest package is designed solely for the use of the candidate soon to take MRCP Part II in paediatrics. The package includes two complete mock examinations, each consisting of questions based on case histories, data interpretation, and clinical slides. As past papers are not available these PasTest exams are carefully designed in style and complexity to be similar to current papers from the Royal College and may be studied at leisure, or taken as trial examinations. There is space in the book, as in the exam, to note one's answers. Included are 40 good quality colour slides covering a wide variety of clinical conditions and some radiographs. In the final section suitable answers are given together with short notes and comments, providing both a method of learning and a chance for the candidate to gauge the depth of his own knowledge and to note any particular weaknesses.

A separate section deals briefly with the clinical examination. It gives a short

description of the structure and some elementary, but essential, hints on examination technique and etiquette. There is a guide to history taking which will be of more use to those not involved in general paediatrics around the time of the examination and a list of short cases that have repeatedly appeared on past occasions.

Overall this is probably a useful addition to the armamentarium of the candidate taking part II, and it is certainly beneficial to look through a complete, albeit mock, examination paper. However, the price is extortionate and the wise candidate will study a copy borrowed from a wealthy colleague.

SIMON NEWELL

Water and Electrolytes in Pediatrics. Physiology, Pathophysiology, and Treatment. By L Finberg, R E Kravath, and A R Fleischman. Pp 251: £31.25 hardback. Philadelphia: Saunders, 1982.

I spent some of my formative years pestering Leeds mothers, at the behest of the senior editor of the *Archives*, for samples of their formula milks in an attempt to establish a link between concentrated feeds and hypernatraemia. During this time I discovered the extensive work of Dr Finberg on the management of fluid and electrolyte disturbances which forms the core of this book. There are four sections: the physical, chemical, and physiological factors affecting body fluids; pathophysiology of fluid disturbances; treatment of dehydration; and management of specific clinical disorders. There is a glossary of terms used in the text and a short history of fluid and electrolyte physiology. The text is presented attractively with many tables, diagrams, and illustrations. Most chapters conclude with references both for general reading and to specific points and include papers published in 1981. There is a full index.

I will not dwell on the first three sections. The normal and disturbed physiology is dealt with comprehensively, authoritatively and, above all, lucidly. As one would expect the chapters on hypernatraemia and management of dehydration are particularly good. The section on solutions for infusion is less useful to the British paediatrician who will manage most of his fluid and electrolyte disorders with a few standard solutions and when pondering the clinical examples in the