**Book reviews**


In the aftermath of two world wars, we have watched the Wordsworthian vision of childhood as a time of innocence and unspoiled goodness fade away, to be replaced by a new version of the concept of original sin based on the theories of Melanie Klein and the experience of ever-more precious, worrying, and disillusioning juvenile delinquency. Our reaction has been on the one hand to blame parents or society, or both, and on the other to regard human beings as innately prone to what we see as evil. These contrasting attitudes could be thought of as exemplified in the psychoanalytic theories of Winnicott and Klein who, of course, knew, respected, and learned from each other; and it may be no accident that the former was an Englishman brought up in the era of Edwardian optimism whereas the latter was a German Jewish émigré from a defeated and already antisemitic country.

Alice Miller’s book is an attempt to explain the behaviour of so many Germans in the Nazi era as a consequence of the pedagogic theories accepted and practised by their parents in the Prussian hegemony and based on the idea that children need to be trained for the duties and responsibilities of adult life. It is interesting in this context that Winnicott should have said that ‘the training always seems to me to be something that belongs to the care of dogs but a dog doesn’t have to grow up eventually into a human being’. But Getman training could be said to have been remarkably successful in producing obedient and industrious citizens and the most effective armed forces that we have seen in action in our century, though in the end they lost out by virtue of their vices. From a British point of view, we might set in apposition to Mrs Miller’s book about the corruption of a whole nation, that by Erin Pizzey, *Prone to Violence*, which describes the similar corruption of an unfortunate subgroup of our population by parents also inclined to control their children by force majeure. Alice Miller remarks at one point in her book that the English were able to export the products of repressive homes to the Empire—implying that the violence that in Germany was directed against the Jews was used to hold down native populations by the British; but this is to oversimplify one’s view of the two cultures (though it must be admitted that, for instance, our Wesleyans preached what many German parents seem to have practised and we should perhaps remember that the United Kingdom, which led the world in proscribing slavery and judicial torture, is now about the only country to permit the formal corporal punishment (torture!) of young children by teachers for what are usually trivial offences, despite having long ago abandoned the flogging of presumably hardened adult criminals).

But what the reader wants of a reviewer is an answer to the question ‘should I expend any of my limited reading time and energy on this book?’, and sadly the answer must in this instance be a qualified ‘no’. Mrs Miller has arrived at an interesting, plausible, and, if true, important hypothesis regarding the induction of violent propensities in individuals and the societies that they belong to, but she has not subjected it to the available test of its validity. Those of us who mistrust the statistical approach to child psychiatry adopted by Professor Rutter and his disciples must nevertheless admit that while statistics seldom generate useful hypotheses, they are essential for testing—especially for testing the more simplistic hypotheses, such as that propounded by Mrs Miller. What carries conviction these days is not the amassing of every scrap of evidence in support of a theory, it is a rigorous subjection of the theory to the evidence against it. However, failure to prove is not disproof and Mrs Miller and Mrs Pizzey are probably right in that their explanations of human violence would seem altogether more likely than alternative ones; and if they are right, the implications are large and urgent action on them would be prudent in the light of the hundred dollar topical question ‘whose hand on the atomic trigger?’ Our society does not at the moment provide for most of its citizens the facilitating environment that enables parents in their turn, or indeed teachers, to provide a facilitating environment for children to grow up in, capable of love and work—that is, able to deal with persons and things in a human way. Mrs Miller and Mrs Pizzey have warned us about how things have gone and still do go wrong. Winnicott tells us how they can be allowed to go right; meanwhile we should acknowledge that psychoanalysis has to some extent more to teach us than Mrs Whitehouse or Lord Justice Lane about the origins of criminality.

**JOHN A DAVIES**


The authors aim at a concise, well illustrated text devoted to the more common congenital malformation syndromes, with a standard format of clinical description followed by specific and differential diagnosis, prenatal diagnosis, the basic defect, genetics, prognosis, and treatment. The guidelines on making a diagnosis would hold well for any branch of medicine. The chapter on terminology is augmented by a glossary at the back of the book. The small section on ‘fetal environmental syndromes’ illogically contains the ‘battered child syndrome’, which is neither a fetal nor a malformation syndrome. Other conditions are grouped as either developmental or genetic defects, but the distinction between these two is not explained (are not neural tube defects partly genetic in origin). There is a regular comment on prenatal diagnosis for each condition in the book and there are useful sections on the measurement of body parts, together with figures and tables of the normal values.

This book will inevitably be compared with Smith’s *Recognisable patterns of human malformation*. Unlike Smith, however, this book relies on line drawings only, which serve to draw attention to the features outlined in the text rather than showing the pictorial reality. The most popular paediatric textbook for undergraduates has line drawings only, and although communication of knowledge is perhaps enhanced by the technique, photographs are necessary to enable recognition of syndromes. This book frequently has more information than
Smith on individual syndromes, particularly on specific methods of diagnosis and differential diagnosis, though it does not contain the useful list of differential diagnosis by anomalies which is to be found in Smith's book.

Despite the good points of this book, you are more likely to diagnose a 'rare face' with Smith's book, which will continue to be the essential classic for all English speaking paediatricians.

G M CENERY


This book, written by an American nurse who is the mother of a child with spina bifida, is addressed to parents of handicapped children and to professionals caring for them. The author covers the causes, mechanism, and management of emotional reactions likely to emerge in parents and caring professionals dealing with the handicapped child, and also offers some practical advice about management of medical problems. Some of this medical advice reflects North American bias, for example, we would probably consider long term indwelling bladder catheters before implant of an artificial bladder sphincter in a child with spina bifida. The book would be of no value to a parent seeking practical or financial advice in this country as reference is made to American agencies, and indeed it would have limited appeal to parents seeking general advice on emotional crises at various ages because quite an advanced reading age is required to wade through its complex phraseology. The American orientation of the book limits its value to British professionals but I liked the concept of developmental phases in family life which can be distorted by the need to care for a handicapped child. The main interest of the book to me was the picture it gave of how much initiative may fall on the parent in the USA to seek and make use of professional help, whereas in Britain, support services would, we hope, come into play virtually automatically. Also, it was interesting to read how financial provision for treatment could be a major additional burden for American families with handicapped children and happily this is greatly cushioned here. The chapter advising professionals and parents to learn to be advocates for the handicapped emphasises similar preoccupations on either side of the Atlantic.

R MACFAUL


This major textbook of paediatric cardiology first appeared in 1968, and the third edition, just published, is in general a very praiseworthy volume. The problems of producing any mammoth text such as this are undoubtedly large, and the editors are to be congratulated. They quote, on the front page, from Proverbs, chapter 11, verse 14, 'in an abundance of counsellors there is safety'. While there is undoubted truth in this saying, I think that some of the counsellors give rather confusing counsel. The chapter on univentricular hearts, for instance, is excellent. It is lucid, readable, and contains the best and newest thinking on this complex group of lesions. In comparison, the chapter on malpositions of the heart reiterates the old confusing nomenclature which has for years baffled the students of paediatric cardiology—surely D and L transposition have outlived any usefulness they ever had.

Although most chapters cover fully the investigation and management of different clinical problems, the volume would surely have been improved by a chapter on history taking, clinical examination, and the integrated approach to the family of those children with congenital heart disease. The various diagnostic procedures are dealt with under the different cardiac lesions. The chapter on dysrhythmias is an excellent review of the problem in paediatric practice, but vectorcardiography seems to play a much greater role than most non-American authors would give it. Cross sectional echocardiography is hailed in the introduction as a great new diagnostic tool, but the full value of the technique is not particularly well shown in the text; a problem perhaps born of recent developments in ultrasonics and a long gestational period for the book.

The worst feature of the book is undoubtedly the index. Try to look up 'prostaglandin' or 'pacemaker' and you will find no direct reference, although both are well covered in individual chapters. Despite these criticisms, however, this is still a very useful book with some outstandingly good chapters. I like particularly the sections on the tetralogy of Fallot, the hypoplastic left heart, and arteriovenous fistulae.

One last comment should be made, there is an increasing non-American input into several chapters which is a major advance for an American text book. So many of the new techniques and advances in paediatric cardiology in the last decade have come from Europe, and it is good to see that at last the American literature is giving the European cardiological community its due.

STEWART HUNTER

Shorter notice


The author has assembled a comprehensive review of pulmonary problems in paediatrics. Clinical and radiological features, pathology, and a brief account of treatment are found in most sections; where appropriate, embryology is included. There is a good reference list at the end of each chapter. I found this a difficult book to read, but used as a source of reference for a particular problem it is of great help. Current and traditional thought on malformations and disease are well set out, and the radiographs are many and well reproduced. Although not a textbook in the true sense, this book has great value in the reference section of your library.