If I were offered this book as a gift I should be delighted. I wish it every success, but regret that I am not very optimistic.

J M H BUCKLER

Allergy. Immunological and Clinical Aspects. Edited by M H Llesof. Pp 474: £29.50 hardback. John Wiley and Sons, 1984.

Professor Llesof has assembled a distinguished group of authors to ensure that his latest volume will bring a cool, critical scientific approach to the broad subject of allergic disease. His declared aim of marrying together the basic scientific and clinical aspects of the subject are, for the most part, achieved.

Chapters on the more basic aspects of allergy, including its biological role, mediator and diagnostic methods, are followed by detailed reviews of the main clinical allergic disorders. The correlation of the often partially known immunological facts with the observed events in the patient is at times masterly. The reader is not spared quite detailed background immunology and in parts a little more clarification would perhaps help the clinician, for an important role of this book will be to bridge the substantial gap between science and clinical practice.

There are numerous references with each chapter and these provide a valuable

entry to the varied literature sources for the reader.

Perhaps unavoidably there is some repetition between chapters and the doctor looking for an update on detailed management of certain disorders may be disappointed. For example, the drug treatment of childhood asthma is dealt with in half a page and one table.

In Great Britain most patients with allergic disorders do not see an allergist but are treated by the family doctor; chest or general physician; paediatrician; ophthalmologist; ear, nose, and throat surgeon; or other hospital doctor.

This volume provides an up to date critical review of the scientific background and available facts (as opposed to beliefs) on allergic disorders and should make a major contribution in this area. It may be unreservedly recommended to all those many and varied clinicians who see the millions of patients whose complaints are primarily allergic.

J M LITTLEWOOD

Pediatric Nephrology. (Contemporary Issues in Nephrology, vol 12). Edited by B M Tune, S A Mendoza, B M Brenner, and J H Stein. Pp 409: £45.00 hardback. Churchill Livingstone, 1984.

In recent years a number of textbooks of paediatric nephrology have been published: this is not one of them. It is the 12th

in the series *Contemporary Issues in Nephrology* and is intended to focus attention on the characteristics that distinguish paediatric from adult nephrology, particularly in the areas which are developing most rapidly. As one might expect in a multi-author book, the quality of individual chapters varies. There are excellent reviews of the functional development of the kidney and renal disorders of the newborn infant which make the book a good buy for any unit which deals with sick neonates. The full range of techniques now available for imaging the urinary tract, the management of nephrotic syndrome, chronic glomerulonephritis, controversies in paediatric hypertension, and the medical management of chronic renal failure are all well reviewed in chapters which will be of interest to the general paediatrician.

Recent advances in dialysis and renal transplantation in the very young child will have a more specialist appeal. The book also includes practical chapters dealing with urinary tract infections in children and abnormalities of serum sodium. The extensive bibliographies at the end of the chapters will make the book a valuable source of references for some time to come. The editors can be congratulated on achieving their objectives in this interesting book which deserves to find a place in the libraries of most neonatal units and paediatric departments.

M H WINTERBORN

British paediatrics

Training for terminal cancer care

The Standing Intercollegiate Committee on Oncology, on which the British Paediatric Association (BPA) is represented, has produced a report on '*Professional Recognition of Training in Terminal Care of Cancer Patients*.' The committee considers that the development over the last decade of units or hospices for terminal cancer care has highlighted the need for special training in this field of medical work and hence for training standards to be established. It is recommended that an intercollegiate body be set up for this purpose and that training schemes should allow for entry from the ranks of consultants or general practitioners approaching the end of their careers as well as being open to accredited senior registrars in relevant specialities and trained general practitioners.

The report does not refer to children with cancer or to training in paediatrics but the BPA was invited to comment and has firmly stated its view that terminal care for children with cancer should be provided by the same clinicians and supporting staff who cared for them in the earlier stages of their disease. On the whole this care is given at home by the general practitioner in close cooperation with the hospital oncology team; occasionally terminal care is provided in hospital. The BPA considers that hospice care for children with cancer is nearly always inappropriate and should not be needed. Training in terminal care should be part of the training of paediatric oncologists and indeed of all paediatricians.