

Book reviews

The Cerebral Palsies of Children. By Sir William Osler. (*Classics in Developmental Medicine No 1*). Pp 92: £10 hardback. MacKeith Press, 1987. ISBN 0-632-01785-6.

One of the fascinations of cerebral palsy is that it engaged the interest of two of the great names of medicine—William Osler and Sigmund Freud. Osler's monograph based on a series of lectures given in Philadelphia in 1888 was therefore an obvious choice for the first of a series of *Classics in Developmental Medicine*. It is a beautifully produced slim volume, which anyone with an interest in cerebral palsy or medical history will want to own. It would be a welcome Christmas present to any paediatric neurologist.

Whether the recipient will simply treasure the book or actually study and learn from it is another matter. It is not an altogether easy read. A large amount of the text is taken up by around 100 brief case reports, written in staccato note style, and reading a dozen or so of these in succession may leave the reader more bemused than enlightened. There is also the problem of the classification of cerebral palsy that has bedevilled the subject for over 100 years. Osler's terminology may not be familiar to the modern reader, and some familiar terms are used in a different sense.

Essentially the book is a report on 151 cases. Eleven are labelled 'spastic paraplegia', and probably had what we would call spastic diplegia, with minimal involvement of the upper limbs. Twenty had 'double spastic hemiplegia'. Some of these would now be called spastic quadriplegia, some spastic diplegia, while three evidently had choreoathetoid cerebral palsy. The remaining 120 children had 'infantile hemiplegia'. A few of these were congenital, but the majority had their onset in infancy or childhood, often with fever and convulsions, and often following an acute childhood infection. Thus well over half of the total series had a postnatally acquired disorder, and the case mix is clearly very different from that of present day studies.

The reader therefore needs to be aware that this is not a systematic and comprehensive account of cerebral palsy as it was understood towards the end of the nineteenth century (which Freud's 1897

monograph certainly was), but a set of case presentations of cases rather different from those seen today. In places the perceptive observations of a great clinician shine out—for example, that in hemiplegia the arm is always functionally more affected than the leg, that the younger the child is at the onset of acute hemiplegia the worse is the outlook, and that aphasia in children recovers better than it does in adults.

Other statements and recommendations have not worn so well—like a comment on a child's development which simply notes 'decidedly idiotic', or the recommended management of acute hemiplegia, fever and fits with 'bromides with chloral, a calomel purge, cold to the head, and, if necessary, leeches.' The advice that '... flannel underclothing should be used. Attention to this apparently minor point should be impressed upon mothers; it is too often neglected' has the unmistakable tone of Sir Faraday Bond in Stevenson's *The Wrong Box* (published, like Osler's monograph, in 1889). But then there is a very modern ring to the following: 'In such an accident (acute hemiplegia) following vaccination, the doctor is fortunate indeed if he escapes unjust criticism'.

What a classic of this kind really needs is a strong and informative introduction explaining the state of the subject in Osler's time, and his terminology, and a section of explanatory notes on obscurities in the text, and on the historical figures to whom brief allusions are made—like Seguin, Little and the redoubtable Sarah McNutt. In fact it needs the kind of apparatus criticus that one would expect to find in a *Penguin Classic*. After all, the Trojan War is probably no more recondite to the modern reader than the byways of nineteenth century neurology. Lacking this, the serious student of this monograph would do well first to read Dr Tom Ingram's masterly review of the history of classification of cerebral palsy in Stanley and Alberman's *The epidemiology of the cerebral palsies*—or better still in Ingram's own *Paediatric aspects of cerebral palsy*, if he is lucky enough to lay hands on a copy of that classic. It is now regrettably out of print, and deserves republication—perhaps in this series?

R J ROBINSON

Macintosh, Mushin and Epstein: Physics for the Anaesthetist. Seventh edition revised and rewritten by W W Mushin and P L Jones. Pp 660: £32.50 hardback. Blackwell Scientific Publications, 1987. ISBN 0-632-00944-6.

Physics is often taught badly because it is essentially an experimental subject and yet teaching is too often confined to abstract theory. This book provides the neonatologist with practical examples of applied physics which relate to the neonatal intensive care unit. It is ideal for the doctor who wants to know the physical basis of the operation of equipment such as humidifiers, gas valves, factors affecting gas flow in endotracheal tubes and so on. The more obscure parts of the book are for the specialised reader who already has a knowledge of electronics. Large sections of the text are naturally devoted to the physics of anaesthesia and will be of limited value to most readers. It also contains useful advice on safety aspects of electricity, vapours, and explosion hazards. It is a useful reference text for all neonatal intensive care units and is easy to read and understand.

ANIL MEHTA

Lecture Notes on Neonatology. By G M Gandy and N R C Roberton. Pp 363: £8.95 paperback. Blackwell Scientific Publications, 1987. ISBN 0-632-00992-6.

If there was a gap in the market for another neonatal textbook, this book (again from Cambridge) has probably found it. In keeping with the other books in the *Lecture Notes* series, the reader will be between medical student level and senior registrar grade. It is not a handbook for the neonatal senior house officer to consult when the baby 'goes off'. It certainly isn't going to help the senior doctor research the published work on osteopaenia of prematurity. It is between the two, and therefore must have been very difficult to write. Although the standard chapters on perinatal definitions, examination of the newborn, infection, and orthopaedic problems, for example, are all there, the strength of the book comes through where personal feeling

enters the writing. Hence the complications of prematurity are dealt with thoroughly. There are 57 pages on physiology of the newborn and respiratory problems. On the other hand, one finds half a page on dwarfs, and four on skin problems—with no pictures. One could say that the book is comprehensive but it is aimed at those who spend much of their lives stuck in special care units. One useful table concerning organisation was what to do when the mother has measles, chicken pox, zoster,

hepatitis, and so on. This was very clear as were all the diagrams, algorithms, and tables.

To make this sort of book readable and different from others one has to have style and dogma. This has come through with predictable clarity and no doubt the book will be held as gospel by the neonatal senior house officers, while parts will bring smiles to the faces of those already active in the field. When I find all our chest drains on routine suction at 10–15 cm H₂O and

patients with meningitis being given third generation cephalosporins that have revolutionised the treatment of this condition, I will know the source of these suggestions.

Nevertheless, strongly worded opinions—contentious or not—are attractive to the reader and the book will be a success. Its place will be in the neonatal unit, to be read mainly by nurses, senior house officers, and registrars.

J G BISSENFEN