

The new edition is outstanding value for money being much cheaper than smaller and less useful texts. The reference lists are remarkably up to date and I thoroughly enjoyed the new information on molecular biology. In addition there were very few typographical errors and the layout of the book is very good. No paediatric haematology department will be complete without it and it remains the standard text for haematologists and others who manage children with blood disease.

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**Antimicrobial Therapy in Infants and Children.** Edited by Gideon Koren, Charles G Prober, and Ronald Gold. Pp 819: hardback (price not stated). Marcel Dekker, 1988. ISBN 0-8247-7745-X.

This is volume 4 of '*Clinical Pediatrics*', a series edited by Fima Lifshitz of Cornell University and designed to provide '... an excellent data base for physicians ... to aid them in their clinical practice ...'. The remit to provide a data base has certainly been fulfilled. The book is an encyclopaedic resource for almost everything known about antimicrobial drugs, and it provides authoritative well referenced guidelines for their use, drug by drug, in infancy and childhood.

Where I feel that the book fails seriously is in its second declared aim. The layout of the book is by drug: chapter 17, macrolide antibiotics; chapter 18, the lincosamides, rather than by condition—for example, meningitis—and it is not at all easy to extract disease oriented information. This identifies the major failing in my eyes, the index, which is frankly inadequate to deal with clinical issues. For example, to retrieve information on the use of antimicrobial prophylaxis in the family of a child with meningitis caused by *Haemophilus influenzae*, you might look up the organism

in the index: all you find is an arcane reference to the antimicrobial activities of pefloxacin, amifloxacin, enoxacin, and norfloxacin. Still game, you look up meningitis: the single reference now is to a table suggesting the empirical selection of ampicillin and tobramycin as first choice therapy for neonatal meningitis, and ampicillin and chloramphenicol for older children. Prophylaxis—a bit desperate, this—raises no reference at all. If you already knew that rifampicin was the drug to consider, then in the rifampicin chapter you would find the information—a short, referenced section on the prophylaxis of *H influenzae* contacts, cross referenced to elsewhere in the text for dosage recommendations.

My colleagues in the hospital pharmacy like this book for its compendious nature and its emphasis on pharmacokinetics and pharmacodynamics. They'll get my copy, and perhaps hospital pharmacies in general might consider buying it, but I cannot recommend it for the practising paediatrician.

J S KROLL

**Oncology and Immunology of Down Syndrome.** Edited by Ernest E McCoy and Charles J Epstein. Pp 242: hardback (price not stated). Alan R Liss, 1987. ISBN 0-8451-5096-0.

People with Down's syndrome have an increased risk of infection, particularly respiratory infection, and an increased risk of developing acute leukaemia. Scientists are only just beginning to realise the potential of children and adults with trisomy 21 to teach us about resistance to infection and aspects of oncology. The Epsteins, Lois and Charles, have been at the forefront of recent advances, showing by studies on trisomic fibroblasts that the genes coding for the receptors for inter-

ferons  $\alpha$  and  $\beta$  are on chromosome 21. Furthermore an oncogene has recently been localised to 21q22, raising important but unanswered questions about oncogenesis.

This book constitutes the proceedings of the annual United States National Down Syndrome Society symposium held in December 1986. As such it suffers from the usual problems of published proceedings with papers in different typesettings of variable quality, considerable overlap of content, and variable quality of papers. There is an excellent short introduction on the molecular biology of chromosome 21. The rest of the book is divided into separate sections on oncology and immunology. It is evident from both sections that there are too few scientists working in either field to fill a book. The oncology section veers off into a chapter on chromosomal translocations in B cell derived tumours of only peripheral relevance to Down's syndrome, and another chapter on lineage establishment in haemopoiesis that was interesting but obscure. In the immunology section the emphasis drifts from specific immune defects in subjects with Down's syndrome to more recherché aspects of interferon. On the credit side there is a fine chapter by the Epsteins and Jon Weil describing the mouse model trisomy 16.

This book is an indictment of how we have neglected children with Down's syndrome, know far too little about the epidemiology or aetiology of their infections, and have thus been slow to learn important lessons from this 'experiment of nature.' I suspect it will have a very limited readership and I would certainly not recommend it as a book to be purchased for clinics dealing in practical aspects of managing children with Down's syndrome. I hope though that those interested in basic science will read and take note.

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