States. Despite the many authors the sections all have a remarkable uniformity. Parts of the section on pulmonary disorders are more verbose than the rest of the book and more lists here would be helpful. This book is aimed at junior paediatric staff, I think, and perhaps sections on innocent murmurs and sudden infant death syndrome would be helpful when the text is updated. This book will also be of significant value to consultants in this country as the information is very up to date, although the small print is a disadvantage with the advancing hypermetropia of age.

Overall there is a great deal of valuable information in this book which is easy to extract and each section has pertinent and recent references. The price is inexpensive and I would recommend this book to both junior and senior medical staff practising paediatrics in any part of the developed world.

D S K BROOKFIELD
Consultant paediatrician

Teaching Genetics to Medical Students. A Survey and Recommendations. Report of a Working Party of the Committee on Clinical Genetics. (Pp 32; £7 paperback.) The Royal College of Physicians of London, April 1990. ISBN 0-090096-96-1.

A working party of the Committee on Clinical Genetics of the Royal College of Physicians has produced a well researched and revealing report on the existing teaching of genetics in UK medical schools and drawn up recommendations for the future. It is now fairly clear why many doctors, however newly qualified, have difficulty interpreting pedigree risks or understanding chromosome reports: genetic teaching at present is often inadequate and should be improved. The report has found marked variation between schools and found that on average there is only 5.57 hours of timetabled genetics teaching in the clinical course and 17.35 hours in the preclinical course (when two exceptional centres with 66 and 50 hours respectively are excluded).

The report has drawn up guidelines for a balanced genetics syllabus. This is based on a questionnaire sent out to 429 clinicians and medical teachers from all specialties. They were asked for their opinion on essential genetic topics and basic genetic skills to be achieved by qualification. Response was high and interestingly there was significant agreement among responders irrespective of specialty.

The report recommends that clinical geneticists should play a larger part in coordinating genetic teaching throughout the five year training of undergraduates. This would prevent unnecessary repetition and help emphasise the clinical relevance of the subject. It acknowledges that more clinical geneticists will be necessary to implement their proposals but the Working Party hopes to help by setting up a Genetic Education Task Group. This could coordinate teaching at a national level and provide teaching aids, access to professional teachers, and workshops for clinicians involved.

The findings of the report provide strong support for more and improved teaching of genetics to medical students and highlight the need for medical schools to match the revolution in clinical genetics which is taking place at the moment.

KAREN TEMPLE
Consultant in clinical genetics

Paediatric Pathology. 2nd Ed. Edited by Colin L Berry. (Pp 830; DM 380 hardback.) Springer-Verlag, 1989. ISBN 3-540-19536-X.

Diseases specific to the paediatric period are intimately related to the processes of growth and development and thus tend to be expressed at the time when development progresses most rapidly in fetal and early neonatal life. Scientific and diagnostic advances have moved inexorably towards the point of inception of disorders such as structural and biochemical anomalies in the embryo and immature fetus. To many non-medical and some medical people the terms perinatal pathology and paediatric pathology have become virtually synonymous. There is thus an almost insurmountable problem in presenting an overview of a subject which is so heavily weighted towards the fetal end but contains important conditions that present only in infancy or childhood.

This task is one that is now attempted only by Professor Berry, whose book thus occupies a unique position. How has Professor Berry faced up to the advances in fetal and perinatal pathology in producing a second edition? The new edition is as well produced and illustrated as the original and is clearly written throughout with an increase in length by some 130 pages. The book has not changed in overall emphasis, perhaps because neither editor nor many of the contributors are practising paediatric pathologists.

In the first chapter, on examination of the fetus, there is a new section on the neonatal necropsy and a few additional tables to aid in determining fetal maturation. The chapter on the placenta has been excluded in favour of a new chapter by RO Kaschula on infectious diseases. The rest of the book has been updated to varying levels by the original authors. Although some chapters, such as those on the respiratory system and sudden unexpected death, are replete with recent references, others contain relatively few references to work published within the last 10 years. Surprisingly, the new chapter on infectious diseases, while dealing at length with congenital syphilis, contains no mention of AIDS, although the topic is touched on briefly elsewhere in the book.

Many of the chapters in this text are good introductory reviews of the subject and some are extremely useful for reference purposes. The work as a whole remains in that indeterminate position as neither an everyday bench book for the practising pathologist nor a comprehensive academic reference book on paediatric pathology. It is a work for the departmental or hospital library rather than individual purchase.

J S WIGGLESWORTH
Professor of perinatal pathology

Principles and Practice of Endocrinology and Metabolism. Edited by Kenneth L Becker *et al* (Pp 1944; \$125 hardback.) JB Lippincott Company, 1990. ISBN 0-397-50759-3.

With nine editors, 305 (largely American) authors and nearly 2000 closely typed pages one would be disappointed if this book did not prove to be the comprehensive source text intended by Professor Becker and his colleagues! The only practical approach to a review of such a tome for this journal was to see if it fulfilled such a remit for a paediatrician with an interest in endocrinology.

The work is laid out in a disease oriented format with specific chapters on anatomy, physiology, and pathology within the affected system. Each section includes a chapter on the paediatric aspects of each condition where appropriate. This design means that it is often necessary to look in several places to gain the desired information, but the index is extremely comprehensive. There is little historical information and the references are very topical.

Although references are provided at the end of each section, paediatric endocrinologists will find the coverage of their interest rather skimpy and lacking in discussion of the more current controversies and research. For instance, there is very little concerning non-conventional indications for growth hormone treatment or the surgical approaches to short stature in skeletal dysplasias. The therapeutic options for juvenile thyrotoxicosis are mentioned but not assessed critically. For a clinician used to focusing on the impact of an endocrinopathy on the rate of growth the section on auxology is also disappointing. Many of the named drugs are given as their American equivalents and SI unit conversion factors are only given in an appendix. The doses for children are often stated baldly, without allowance for body size or individual variation.

The book succeeds best as a reference for those seeking information outside their usual field of interest and those needing an up to date account of the physiological and metabolic basis for a disease process. There is also entertaining coverage of some extremely rare conditions (such as 'hamburger thyrotoxicosis' secondary to the ingestion of thyroid gland included in mincemeat from one abattoir) and some high quality black and white illustration.

At only \$125, which puts the cost of many comparable recent British editions to shame, this reference text should find its way on to the shelves of our libraries as a source book for a wide range of clinicians and scientists. A paediatrician wishing to own a definitive textbook specifically relating to endocrinology in childhood might find the second edition of Brook's *Clinical Paediatric Endocrinology* a more appropriate choice.

J K H WALES
Honorary senior lecturer

Operative Paediatric Urology. Edited by J D Frank, J H Johnston. (Pp 256; £80 hardback.) Churchill Livingstone, 1990. ISBN 0-443-034788.

Operative Paediatric Urology raises the technical manual to the level of an art form. David Frank and Herbert Johnston have produced a beautiful account of the open operations of the specialty. The text is concise, the layout stimulating and the illustrations, to the surgical eye at least, visually pleasing. The illustrator, Philip Wilson, should be credited for his contribution to the success that this book will undoubtedly enjoy. Paediatric urology is breaking new ground. The editors have endeavoured to reflect this in their choice of subjects and authors. The powerful influence of Liverpool upon the specialty is clearly evident. Mr Johnston has contributed a number of chapters himself and his successor at Liverpool has written an excellent chapter on urinary diversion. There are also excellent contributions from some of the many distinguished Americans who spent time as visiting fellows there.