Current Perspectives in Paediatric Urology. Edited by Robert H Whitaker. (Pp 124; DM 150 hardback.) Springer-Verlag, 1989. ISBN 3-540-19563-3.

Those who yearn for the return of Victorian standards may remember there were days when all surgical procedures in children were performed by dedicated general surgeons. Then came paediatric surgeons, making great strides, in the surgical management of children. Today we are witnessing the emergence of the specialist. Not the specialist of 'single or double seater' fame, but the skilful and thoughtful surgeon, giving helpful advice about difficult areas of surgical practice. In this book, a 'coven' of eminent paediatric urologists review a simmering cauldron of contentious issues and produce helpful advice about many difficult problems.

There are topics which will interest general paediatricians, as well as nephrologists, and urologists. The chapters discussing ureteric reflux and the difficult decision surrounding ureteric reimplantation clearly outline contemporary opinions. It is of interest to see attention being focused once more on the role of bladder dysfunction as a potential cause of renal damage. The issues of prenatal diagnosis and the contentious issue of prenatal diagnosis of urinary tract abnormalities will be of interest to all paediatricians. The criteria for termination of pregnancy are clearly defined. The wisdom of discouraging fetal surgery except in one or two specialist centres is to be applauded.

The management of other congenital abnormalities including pelviureteric junction obstruction, prune belly syndrome, and renal dysplasia is discussed. The difficulties of interpreting the isotope renograms in equivocal upper tract dilatation adds to the problems of management of equivocal upper tract dilatation. The differential diagnosis of Wilms'

tumour will be helpful. Despite the good overall results of its treatment, it is sad to learn that one third of patients with renal tumours are still not treated in major oncological centres. The chapter about the confusing problems of intersex contains a useful classification, with practical advice about its diagnosis. The major advances in the management of urinary incontinence and the neuropathic bladder are outlined, and provide a helpful guide to those treating children with these awkward problems.

Although this is a book written by urologists, details of surgical techniques do not predominate yet there is sufficient detail.

This is a clearly written book, providing information which brings the non-specialist up to date with contemporary opinions in paediatric urology. It is recommended reading for all those with an interest in the problem of the urinary tract.

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Dictionary of Medical Syndromes. Edited by Sergio I Magalini, Sabina C Magalini, Giovanni de Francisci. (Pp 1056; \$79.50 hardback.) J B Lippincott Company, 1990. ISBN 0-397-50882-4.

Perhaps the best place for this large, hardback dictionary of medical syndromes is somewhere near the telephone. Thousands (>2700) of syndromes, eponyms, and odd medical phrases are defined and can be easily looked up.

The authors, from the departments of surgery and anaesthetics at the Università Cattolica del Sacro Cuore in Rome, have put together a massive amount of information. The word 'syndrome' in the title is used in its broadest sense. The book covers conditions

not included in standard genetic, medical, or surgical texts, and, perhaps for this reason, could prove helpful. It is not exactly clear who this book is aimed at. I found the eponyms interesting, particularly from a historical perspective, but I am not sure of the relevance or usefulness of some of the entries. I doubt whether anyone would look up 'Leaking duodenal stump' or 'choriocarcinoma' in a book about syndromes. The book was used for a week in our genetic department and inevitably there were some omissions, poor cross referencing, and odd classifications. However, a lot of detailed useful information was also given. There are subheadings for synonyms, signs, (a)etiology (all text is in American), pathology, diagnostic procedures, therapy, prognosis, and bibliography. The information might have been simplified by concentrating on signs, symptoms, and aetiology, as the rest of the book can become outdated so easily. For just this reason, I worry about accuracy of the text in places, and no one would rely solely on a dictionary of syndromes to offer appropriate treatment for a condition. Inclusion of references helps to get round this problem and is very useful as it allows the reader access to the original literature.

Used as a guide by an experienced clinician, able to recognise the occasional mistake, the book has potential, and I am sure it will find its place in our library alongside other reference books. In the hands of an inexperienced student, however, it could be misleading. I think there is still a place for books of this kind, even in the age of the computer. Many of us still prefer them, although a lot of information is lost in this form. Perhaps the next edition should come out on floppy disk, allowing the reader the possibility of indexing on key words rather than syndrome title only.

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