find the book to be well referenced with references up to 1988 appearing in many chapters.

Most topics in paediatric dermatology are considered, and these include genodermatoses, blistering disorders, infections and infestations, tumours, hair and nails, atopic dermatitis, psoriasis, and cutaneous manifestations of paediatric disease.

Some minor criticisms. I would have expected more on neonatal cold injury, mention of actinic prurigo, hydroa vacciniforme, and tetracycline staining of teeth. Who still uses resorcinol in acne? The importance of clinical differentiation of the benign Buschke-Ollendorff syndrome from pseudoxanthoma elasticum should have been emphasised and recent work by Pope *et al* on Ehlers-Danlos syndrome type IV merited mention. I would not agree that Crohn's disease is rare in adolescence or that involvement of the dorsum of the toes is a characteristic of juvenile plantar dermatosis. The editors could have been more thorough at reducing some repetition of the same disorders by different authors.

The index is good and comprehensive and I found no spelling errors in it. Illustrations are all monochrome and a minority which have reproduced poorly should have been omitted. I assume that colour illustrations would have resulted in a more prohibitive cost.

In 1988 a larger two volume *Paediatric Dermatology* text appeared (Schachner and Hansen) which has been well received. I think this one volume tome at half the cost bears favourable comparison.

I recommend that dermatology and paediatric departments purchase this very readable reference book. Unfortunately the price is too high for many individual doctors to buy a copy for themselves.

J VERBOV
Consultant paediatric
dermatologist

Dewhurst's Practical Paediatric and Adolescent Gynaecology. Second Edition. By D Keith Edmonds. (Pp 148; £40.00, hardback.) Butterworth Scientific Limited, 1989. ISBN 0-407-01520-5.

Sir John Dewhurst established a unique understanding and experience in the very specialised field of paediatric and adolescent gynaecology which is nationally and internationally renowned. This is acknowledged in the altered title of this second edition of his classic book, which has been revised and updated by his 'apprentice' Keith Edmonds.

The adjective 'practical' is justifiably chosen, and the book provides a complete catalogue of detailed and thorough advice on the clinical features, aetiology, investigation, and treatment of all gynaecological problems of childhood, from ambiguous genitalia at birth to pregnancies in adolescents. Each chapter includes a careful list of references to relevant detailed studies and reviews.

This book provides an essential reference work for first line management of what are such important and yet uncommon conditions in the experience of most gynaecologists, and where erroneous initial treatment can have such unfortunate long term results. The advice on appropriate emotional care and understanding of the young patient and her parents is particularly helpful.

The book is written from the gynaecological point of view and essentially concentrates on the gynaecological aspects of these problems. Nevertheless it must be essential reading for paediatricians, and an important reference work for general practitioners.

The one disappointment is the surprisingly brief treatment of the problems of suspected or actual child sexual abuse. The author describes the conditions of vaginal discharge and vulvitis as being 'probably the only gynaecological disorders of childhood which may be thought of as common', but those of sexual abuse are becoming almost equally so (although the referral pattern may well be, rightly or wrongly, biased by the gender of the doctor!).

S TUCK
Consultant gynaecologist

Yearbook of Pediatrics 1989. By Oski Stockman. (Pp 683; £40.00, hardback.) Wolfe Medical Publications Ltd, 1989. ISBN 0-8151-6561-7.

Another year must have passed. I'm a year older (a bad thing) and another edition of the Yearbook has arrived (a good thing). We have both put on weight. The Yearbook has expanded from 550 to 670 pages and I've (well that's a secret).

It's hard to say anything new about the Yearbook, which is an old friend, and this edition maintains the high standard of previous years. The whole range of paediatrics is covered by original articles, and most are followed by fairly long editorial comment, always erudite and humane, and often funny. The usual helpful list of review articles is included.

How could the Yearbook be improved? Some years ago the American Academy of Pediatrics published a review of the Doman-Delacato programme, and pointed out that there was no objective evidence at all that this very expensive and arduous treatment benefited handicapped children. I wonder if the editors would consider commissioning occasional similar special articles on controversial subjects which would then have the authority of the Yearbook behind them? Subjects that could be considered include subclinical copper deficiency as a cause of fractures, hair analysis as a diagnostic test, the role of oxygen in the retinopathy of prematurity, and so on.

I do have one criticism. Very few papers from outside the United States are mentioned. Of 49 papers on oncology, haematology, and urinary tract, 36 are from America and none from the United Kingdom. Is no research carried out in this country, or should the editors widen their horizon?

The Yearbook is essential reading for any paediatricians who want to keep up to date, and I strongly recommend it.

M MONCRIEFF
Consultant paediatrician

Molecular Medicine: Cystic Fibrosis. By Peter Goodfellow. (Pp 96; £15 paperback.) Oxford University Press, 1989. ISBN 0-19-261835-0.

When I was invited to review this book I seriously considered declining as molecular medicine is not one of the strings of my bow. However, I thought, as this was the case at least if I read the book I might learn something. Few clinicians who have left medical school for longer than 10 years have more than a basic understanding of cellular chemistry let alone molecular biology. Most paediatricians, however, have some understanding of the clinical disorder of cystic fibrosis. One of the purposes of this review was to discover if this book would enlighten we clinicians who are so sadly ignorant about the basic sciences on the recent advances in the understanding of the

cellular defects in subjects with cystic fibrosis and the identification and location of the cystic fibrosis gene.

There are five chapters. Three cover the natural history, management, and prenatal diagnosis of cystic fibrosis and present a well written synopsis of the subject, accessible not only to non-medical research workers but also to lay readers. The other two describe the defects in epithelial ion transport and molecular genetics of cystic fibrosis. For the average clinician these chapters are undoubtedly difficult. However, those working in the subject at the interface of clinical and laboratory science will find them comprehensive, up to date and well referenced. It is for this latter group that I think this book will be most useful.

Sir Peter Medawar, in answer to criticism that too much scientific specialisation meant that scientists could no longer communicate with each other, said that 'scientists are getting less specialised not more'—physicists and chemists have entered the world of biology—and 'the reason [they] seem so seldom to communicate with each other is that they do not really want to . . . they want above all to be left to cultivate their gardens'. Certainly this book illustrates very well how the varied contributions of chemists, molecular biologists, clinical scientists, and others make for the understanding of 'that shapely whole' and while each may not understand how the other cultivates his garden at least we may all obtain a concept of how growth is proceeding.

S MCKENZIE
Consultant paediatrician

Handbook of Neurological Investigations in Children. By John B P Stephenson and Mary D King. (Pp 244; £25 paperback.) Butterworth Scientific Ltd, 1989. ISBN 0-7236-1295-1.

What a welcome book to the slightly dull world of paediatric neurology. The authors have tackled their subject with enthusiasm and have produced a very readable and thought provoking book. The very individual approach adopted towards investigation of children with neurological disorders has made the subject very tangible for general paediatricians.

The first section of the book is devoted to each individual test and every chapter ends with well illustrated case histories. A step wise approach to investigation is supported and shopping lists are definitely out! The philosophy of investigations, their benefits, and harmful effects are discussed sensibly. We are provided with an up to date account of the most appropriate investigations available in the late 1980s. The chapters on electroencephalography and diagnostic imaging are particularly good. Although the chapter on biochemistry looks daunting, it is very readable and gives a succinct account of the variety of tests available. The linking of biochemical tests to clinical information enables easier digestion of the information.

The second half of the book is devoted to a problem orientated approach to investigation. This works very well and compliments the first half of the book well. The authors cover a wide range of common topics—some rather too briefly.

Each chapter is well referenced and the 10 page index is comprehensive.

This book is essential reading for all paediatricians, especially those in training, and the odd paediatric neurologist might consult it. These authors are a successful team

and I hope that we see them collaborating in the future!

Health warning—this book could seriously affect your future approach to paediatric neurological investigation and hopefully for the better.

B M MACARDLE
Consultant paediatrician

The Hereditary Hemolytic Anemias. Edited by William C Mentzer, Gail M Wagner. (Pp 476; £52.50, hardback.) Churchill Livingstone, 1989. ISBN 0-443-08242-1.

When the nineteenth century investigators first squinted down the microscope at blood cells and identified diseases they had no idea of the explosion of knowledge that would follow. A blood specimen is so easily obtained that the red cells have been studied in enormous detail, and a vast amount is known about their diseases, some of great rarity. Professor Mentzer is a paediatric haematologist and Dr Wagner is an adult haematologist. Their book is a comprehensive review by a selection of authors from the San Francisco Bay area of the hereditary red cell disorders which lead to haemolysis. After an introductory chapter by the editors, there are chapters on diagnostic strategy, and subsequent chapters on the thalassaemia syndromes, sickle cell disorders and unstable haemoglobins, membrane disorders, metabolic disorders, haemolytic disease of the newborn, mechanisms of red cell destruction, and a final chapter, which is the shortest in the book, on treatment.

The book is not written specifically for paediatricians. It is strong on pathophysiology and weak on management. The chapter on haemolytic disease of the newborn is an exception, so although the subject is not really hereditary, it is well worth reading. The other chapters are useful for reference. The need to be comprehensive means that a page and a half of table is given to classifying the 29 variants of glucose phosphate isomerase associated with haemolytic anaemia. Fortunately the editors have resisted the temptation to include the 150 variants of glucose-6-phosphate dehydrogenase. This is a problem with the haemolytic anaemias: all this information has to be recorded, but its relevance to the day to day management of the haemolytic anaemias that make up the day to day business of a paediatric clinic is slender in the extreme. Nevertheless, this is a good book for looking up the rare disease, for help with an unusual problem, and for throwing light on the dark mystery of the unsolved cases of haemolytic anaemia which puzzle every haematology department.

D I K EVANS
Consultant haematologist

Paediatric Clinical Examination. By Denis Gill, Niall O'Brien (Pp 188; paperback.) Churchill Livingstone, 1988. ISBN 0-433-03956-9.

'Learn to see things' is one of many quotes included in this book, and it is sound advice by Leonardo de Vinci, applicable to the field of paediatrics as well as to art. It can be remarkably difficult to 'learn to see things' in children without adequate guidance and practice, and yet little has been written on the subject. Denis Gill and Niall O'Brien aimed to fill this gap with an entertaining, concise and

readable handbook that provides a simple approach to clinical examination of children.

The book is aimed at undergraduate medical students taking their paediatric course and also at postgraduate doctors commencing their first post in paediatrics. It provides a simple and thoughtful approach to history taking and examination at different ages, particularly in the newborn, infant, and preschool child. The text is written in a very humorous way which makes it easy to read as well as instructive. The authors' prime objective is to put the principles into practice by examining as many children as possible. If they fail to do this in some cases, I think it suggests that the student would be better suited to another specialty, rather than reflecting badly on the text.

In conclusion, I think that this book fills an important gap in the literature, and that students in paediatrics will find it an invaluable guide to the art of approaching children.

C SMITH
Senior registrar in paediatrics

Linear Growth Retardation in Less Developed Countries. Edited by J C Waterlow. Nestle Nutrition Workshop Series, Vol 14. (Pp 295; \$50 hardback.) Raven Press, 1988. ISBN 0-88167-378-1.

This book contains a wealth of interesting information about human growth and nutrition. Unfortunately it cannot give a definite answer to the key question 'Is stunting accompanied by biological functional impairment?'

The size of the problem is not in doubt; 39% of preschool children in developing countries are stunted, less than -2 standard deviations below the most widely used reference figure for height for age (National Center for Health Statistics). This compares with only 12% who are wasted, with a weight for height less than -2 standard deviations (Kellar, chapter 2). The importance of stunting is less clear. Studies from Zaire (Van Lerberghe, chapter 14) do not confirm earlier findings from Bangladesh that there is an increased risk of death in children who are stunted. Most authorities accept that stunting has a definite association with poverty, poor living standards, and incomplete recuperation in adverse environments. Waterlow declares that 'both physiological and political aspects of stunting are important', but Tanner, the high priest of auxology, considers that 'height is only important as a proxy for social deprivation between groups'.

All who are interested in child growth should read this book, and no paediatrician can deny a concern about a process so fundamental to our specialty. Here are a few points, not all related to linear growth, to whet the appetite. Many are not new but some are based on recent research.

In malnutrition the growth related hormonal systems that are most affected are those of growth hormone - somatomedin (Rappaport, chapter 7). After malnutrition there is little catch up in height until there has been an increase in weight so that the weight for height ratio exceeds 85% of the reference values (Golden, chapter 9 and Nabarro, chapter 10). Zinc deficiency does cause decreased linear growth and supplementation increases growth rates in stunted male but not stunted female infants (Golden, chapter 9). Zinc increases the metabolic efficiency of dietary energy utilisation (Tomkins, discussion after chapter 9).

Growth is very seasonal in Nepal, stunting is maximal in August to November but the peak weight gain occurs within the same period, mid August to mid October, followed by the peak height gains from mid December to mid April. Children between 12 and 24 months of age grow 1.5-2 cm in three months, but show no growth in height the rest of the year (Nabarro, chapter 10). There is no causal link between stunting and developmental delay or impaired intellect, both are associated with the effects of poverty and deprivation. Mental development is highly dependent on biological and environmental influences in the first two years of life. There is evidence that early stimulation can to some extent compensate for the negative effects of early malnutrition. 'The family environment . . . is a fundamental determinant' (Colombe, chapter 12). Physical work capacity, as measured by maximal oxygen consumption, is largely dependent on muscle mass which correlates with nutritional state. There are implications that undernourished children will become adults with a reduced physical work capacity (Spurr, chapter 13).

In the final chapter on the significance and implications of the findings of the symposium for health policy, Gopalan introduces some interesting unpublished data from India about the associations between birth weight, nutritional state, and family income. He also makes a few inaccurate over simplifications, 'stunting is . . . invariably associated with poverty'. However, in the context of a scientific meeting supported by the largest infant food multinational corporation he speaks out courageously about the abuses of commercial baby foods by the urban poor. He has data to show that 22-30% of the poorest mothers in Indian cities are using commercial milk substitutes with 'results that can only be described as disastrous'.

W A M CUTTING
Senior lecturer

The Baby Under 1000 g. Edited by David Harvey, Richard W I Cooke, Gillian A Levitt. (Pp 353; £65 hardback.) Butterworth Scientific Ltd, 1989. ISBN 0-7236-0952-7.

This book concerns the management of babies under 1000 g. It has been rather extravagantly claimed (not in this book) that a full term baby has more in common with a teenager than with a baby of 24 weeks' gestation. Certainly very preterm babies are different. Hence this book.

Some aspects of management are not that different, however, and despite valiant efforts by the contributors some chapters read much the same as they would have done had the title of the book been 'The Ill Baby under 2000 g'. Some such chapters, for example the one on ventilator care, are nevertheless very enjoyable. The authors of the chapters on the skin, calcium and phosphorus metabolism, and renal function have an easier time of it. Other stimulating chapters include those on monitoring and neurological abnormalities.

The 32 contributors to this book between them work in 18 different centres—all but three of which are in the United Kingdom. As well as 17 chapters on different aspects of the medical care of the baby under 1000 g there are eight chapters on the subjects of epidemiology, obstetric management, nursing care, emotional needs of the family, cost of care, and outcome. Most subjects are covered clearly and practically with remarkably little repetition. A lot of references are cited.

I would have liked more discussion of the