

immunoglobulin preparation. His weight remained static, and the diarrhoea increased in frequency to twice or three times daily. A biopsy specimen once more demonstrated infiltration with cryptosporidia, but no oocysts were detected in the stools. The immunoglobulin treatment was discontinued after four months, when total parenteral nutrition began. No adverse effects had been noted.

Bovine colostrum is a very rich source of immunoglobulins and contains 40 g/l of IgG₁ which is the principal secretory immunoglobulin in cattle and it is resistant to proteolysis and low pH. It also contains 4.0 g/l of IgA,² whereas human colostrum contains only 3.6 g/l of IgA.³ The commercial immunoglobulin was diluted to a strength of 35 g/l of IgG₁.

Tzipori *et al* reported a case of a child with congenital hypogammaglobulinaemia and cryptosporidiosis who responded to treatment with colostrum obtained from a cow that had been previously immunised with cryptosporidia antigens in order to produce a hyper-immune colostrum.⁴ I suggest that pooled colostrum from non-immunised cows may provide an equally effective, but far simpler and cheaper, method of controlling symptoms due to cryptosporidiosis in immunodeficient patients (P Heaton, paper given at 6th Asian Paediatric Congress, Tokyo, 1988). Immunoglobulin concentrates may also provide an effective, more convenient, and controlled method by which such enteral immunotherapy can be administered. Further study is warranted.

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- 1 Foot ABM, Oakhill A, Mott MG. Cryptosporidiosis and acute leukaemia. *Arch Dis Child* 1990;65:236-7.
- 2 Norcruss NL. Immune response of the mammary gland and role of immunization in mastitis control. *J Am Vet Med Assoc* 1977;170:1228-30.
- 3 Worthington BS, Vermeersch J, Williams SR. *Nutrition in pregnancy and lactation*. St Louis: CV Mosby, 1977.
- 4 Tzipori S, Robertson D, Chapman C. Remission of diarrhoea due to cryptosporidiosis in an immunodeficient child treated with hyper-immune bovine colostrum. *Br Med J* 1986; 293:1276-7.

Lask of the Hospital for Sick Children, Great Ormond Street, and Abe Fosson from the University of Kentucky have joined transatlantic (and transcultural) hands to put together a paperback which is by far the best guide to this labyrinth that I have come across. Plato would be approved.

No one should underestimate the complexity of dealing with child, family, school and society, organic illness, behavioural manifestations, and emotional disorder all rolled up into one child. This volume does a neat unravelling job on this everyday conundrum for those who undertake outpatient clinics.

Mind you, like many who get involved in psychiatry it clears its throat several times before venturing an opinion. Plato might have been a little impatient not only with two forewords but also a preface and a prologue not to mention an epilogue. Once into its stride, however, it deals at an exhilarating pace with definitions of psychiatric terms and the nature of symptoms as markers of stress and distress. Chapter 3 is a brief guide to a number of specific conditions with a major psychosomatic component and later there is a description of the networks which surround the sick child—introduced, incidentally, with a child psychiatric interpretation of Humpty Dumpty's traumatic event (did he fall or was he pushed?).

The second half deals with an integrated approach to treatment and introductions to methods of behavioural, family, and individual therapy.

It's written with a deft touch, engaging humour and—leaving aside the 'Stateside' preface—a singular lack of jargon. Apart from a rather weak and over simplified last chapter, which is a potted guide to medication, it is a winner. Not just for libraries as at a mere £11.95 (paperback) it is essential reading for every general practitioner trainee and paediatrician of whatever seniority, if only to remind them that—to paraphrase the authors' words—children talk with their bodies.

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A Colour Atlas of Brain Disorders in the Newborn. By L S de Vries, L M S Dubowitz, V Dubowitz, J M Pennock. (Pp 199; £50.00 hardback.) Wolfe Medical Publications Ltd, 1990. ISBN 0-7234-4542-9.

Colour atlases, like the colour supplements of some weekend newspapers, can be so lavishly illustrated that the text is overlooked. In this case the real value would be underestimated. This new volume from Linda de Vries and her colleagues is not a text of neonatal neurology but a systematic presentation of the various imaging techniques accompanied by profuse clinical photographs.

The book is notable for the illustrations of magnetic resonance imaging (MRI) of the brain. After a brief introduction which covers clinical examination, electrophysiological measurements, and ultrasound scanning, there follows a chapter that details the principles of MRI. The importance of this book lies to some extent in the comparison that is made between the appearances on MRI and those of ultrasound and computed tomography. How useful this becomes will depend to some extent on the availability of MRI and further work that defines the optimal timing as well as the benefits of this new technique.

The remainder of the book consists of over 50 case reports, which detail the clinical presentation, examination, and investigation of preterm and term babies with common, and some not so common, disorders that are the concern of all who look after the newborn. As the authors emphasise no single investigation is sufficient to make a diagnosis nor a prediction of outcome. Those, like ultrasound, remain pre-eminent at the cot side, while new information, particularly about myelination of the brain is revealed by MRI. A particular strength of the text is the emphasis placed on the remarkably good outcome that can occur after a certain degree of brain damage, particularly after periventricular haemorrhage. The importance of distinguishing ischaemic lesions from the aftermath of haemorrhage is covered extensively. In addition to hypoxic ischaemic encephalopathy there are chapters that cover less common lesions such as cerebral artery occlusion and the increasing recognition that some of the insults that the brain sustains are of antenatal origin. The book ends with a special glossary of MRI terminology.

In a field that is advancing so rapidly this book brings together in a condensed format investigations and clinical correlates with a clarity that will be widely appreciated. I should emphasise that most will be gained by reading from the first page to the last, however, while avoiding the temptation to let the excellent illustrations detract from the text. In any case the chapter on MRI will be compulsory if not compulsive reading. This book should find a place in every neonatal unit where nurses, resident doctors, as well as the physiotherapist and social worker, will find explanation as well as illustration of the problems they are dealing with on a daily basis. However the temptation to find a case report here which fits with that of a patient must be avoided.

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Fetal and Neonatal Cardiology. Edited by Walker A Long. (Pp 863; £140 hardback.) W B Saunders Company (Harcourt Brace Jovanovich Inc), 1990. ISBN 0-7216-1887-1.

Over the past 10 years tremendous advances have been made in the diagnosis and treatment of congenital heart disease in the neonate and more recently the fetus. Transcatheter treatment of neonates with an increasing number of lesions is now becoming commonplace, and we have recently seen that fetal intervention is also a practical possibility. These are exciting times, and undoubtedly a sufficient body of knowledge has accumulated to justify a textbook of this kind.

This volume is divided into three parts. The first deals with the basic sciences of cardiovascular development, structure, and function. Part 2 concerns prenatal cardiology, and the final part covers cardiology of the neonate. This segment is divided into sections on diagnostic modalities, cardiovascular disorders of the preterm and of the term neonate, and a last section concerning therapeutic modalities. This includes chapters on: neonatal catheter palliations, cardiac surgery, anaesthesia, and postoperative care of the sick neonate with congenital heart disease. The 78 contributors to these 68 chapters are mainly of North American origin, and though introduced

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Childhood Illness: the Psychosomatic Approach. By Bryan Lask and Abe Fosson. (Pp 156; £11.95 paperback.) John Wiley and Sons Ltd, 1989. ISBN 0-471-91822-9.

The authors quote Plato (320BC)—'this is the greatest error of our day, that physicians separate the mind from the body'. It's a pretty universal error 2300 years later and Bryan