

factors, incidence, mortality, and diagnosis are followed by a series of brief but extremely well referenced chapters on individual tumour types and tumours of specific tissues or organs, for examples, neuroblastoma, germ cell tumours, and renal tumours. The book is intended mainly for pathologists and handles the problems of classification and macroscopic and histological diagnosis in considerably more detail than those of treatment. For the latter purpose the reader is often referred to other works on paediatric oncology.

The work is very readable and in general up to date, providing an excellent review of the subject. An occasional failing is recognisable. Thus while quoting reports of the occurrence of primitive neuroectodermal tumours in macerated fetuses the author omits to mention more recent evidence that such 'tumours' are usually artefactual. A major criticism is the small size and poor quality of most of the illustrations, some of them being uninterpretable and detracting from, rather than enhancing, the value of the text. A linked problem is the use of a different and, for this aging reviewer, less legible typeface for the legends than for the text. Despite these visual drawbacks the book can be thoroughly recommended as a useful work of reference to pathologists concerned with the diagnosis of paediatric tumours and also merits consultation by paediatricians and paediatric surgeons.

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Living with Haemophilia. 3rd Ed. By Peter Jones. (Pp 256; £19 hardback.) Castle House Publications Ltd, 1990. ISBN 0-7194-0152-6.

The best thing the old General Nursing Council did was to put a question in the final nursing examinations about haemophilia. Since then, nurses regularly attend the Haemophilia Centre for training in hospital and home care, and the whole hospital seems more aware of the disease and its problems. Dr Jones' book is written for the haemophiliac and his family, and describes all they need to know and more about the haemophilias. It should similarly raise awareness about the disease for the layman. This is the third edition. It is comprehensive and comprehensible. The details are written in terms which all can understand and the diagrams are clear and simple. The popularity of earlier editions can be judged by the fact they have been published in six other languages. Over the years I have forgotten how many copies my department has bought to lend to patients, but they are numerous. Once they go, they rarely come back.

How does this differ from earlier editions? The book is now printed with more words to the page so is more informative but only slightly larger. A new first chapter reassures the parents of a newly diagnosed child. The statement that 'he has as much chance of being captain of one of his country's sports teams as his father' may be taken two ways. Other new chapters include information on side effects of treatment such as liver disease and infection, HIV and AIDS, and on haemophilia care in developing countries, and vaccination schedules including hepatitis B. There are many new diagrams and increased information about contraception, factors VIII and IX, von Willebrand's disease, hepatitis, and antenatal diagnosis. Another innovation is the inclusion of photographs of haemophilic boys enjoying a range of physical activities, despite some

obviously bad knees and legs. These are all improvements.

My own experience tells me that the earlier editions served their purpose well, and I have no doubt that this edition will do the same. Its message, as the author states, is 'life first, haemophilia second'. However, in his attempt to reduce the anxieties of parents newly faced with a diagnosis of haemophilia, the author plays down the severity of the disease. For many patients, even with first class management, the disease presents major problems for their enjoyment of life, their ability to work and play, and their prospects. Even so, all families of a child with haemophilia should read and study it. If they do, they will know more about the disease than their paediatricians. This reversal of roles is bad for medical morale, so I can only advise that paediatricians should read it too, and make it compulsory reading for nurses, physiotherapists, teachers, and others who may deal with haemophilic children.

D I K EVANS
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Manual of Infections and Immunizations in Children. Edited by Peter Rudd and Angus Nicoll. (Pp 291; £12 paperback.) Oxford Medical Publications, 1991. ISBN 0-19-262118-1.

Inoculation against smallpox appears to have been first used in the 6th century BC by the Chinese, who implanted bamboo splinters dipped in pustular material into the nasal mucosa of uninfected individuals. The protective effect of cowpox against natural smallpox infection was folk wisdom for many generations before Jenner. Over the last hundred years immunisation has been an even larger contributor to the health of individuals and nations. With the development of gene manipulation by molecular biology, and the ability to produce purified antibody by *in vitro* techniques, its day is only just dawning.

This book then appears at a watershed in the development of immunisation, and provides a bridge linking scientific and academic knowledge on the one hand, with everyday clinical practice on the other. It has been rapidly and professionally put together by the British Paediatric Association Standing Committee on Immunisation and Vaccination.

The book is directed towards all concerned in paediatric primary care, junior hospital staff, paramedical staff, and parents, and is divided into sections. The first of these discusses the general diagnosis and management of common infections in childhood from a problem orientated viewpoint, for example, the child with a rash and the child with vomiting and diarrhoea. The second section provides short summaries of specific childhood infections, with particular detail of recently recognised conditions such as AIDS and Kawasaki disease.

This is followed by a short section on the collection of specimens for laboratory diagnosis and a long and comprehensive section on immunisation, including a very helpful discussion on practical problems: should you immunise a child with diarrhoea or a chest cough when they come to clinic? What about the baby who is said to have had whooping cough or measles? What is the relevance of a history of fits or febrile convulsions?

The book concludes with detailed advice on travelling abroad with a child, a series of

useful appendices, and a bibliography for further reading.

This second edition has been expanded and brought up to date and is beautifully laid out, simple, straightforward, and authoritative. Demanding a place in every GP's surgery, accident and emergency unit, and in every general paediatric ward in the country, it is a model of clarity and accuracy. I only wish all medical texts were half as good as this.

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Paediatric Speciality Practice for the 1990s. Edited by Janet Eyre and Robert Boyd. (Pp 275; £20 softback.) Royal College of Physicians, 1991. ISBN 1-873240-19-8. Available from the Royal College of Physicians of London, 11 St Andrews Place, Regent's Park, London NW1 4LE.

My personal paediatric library is kept up to date by the editors of the *Archives* supplying me with excellent books, ostensibly for review. I'm beginning to wonder though, is this just kindness or a subtle hint? Have the editors heard something that I haven't?

This latest splendid edition to my bookshelf is based on the most recent paediatric conference held at the Royal College of Physicians. A number of distinguished subspecialists review changes in practice over the last five years, and speculate on how these will influence paediatrics in the next decade.

The book begins with community paediatrics, stressing prevention of illness and promotion of good health. The importance of information systems, review of surveillance, and integration of services are discussed. Full implementation of best current practice is seen as the goal over the next few years.

Most subspecialties (neonatology is deliberately excluded) are represented with the sad exceptions of accident and emergency, the largest, and intensive care, the most expensive. The chapters include up to date opinion on aetiology, investigations, and treatment. For example there is a thought provoking review on the aetiology on cerebral palsy, and in addition the author stresses the present and probable future role of surgery and highlights the tremendous importance of counselling performed by physiotherapists, largely untrained for psychotherapeutic work. The chapter on epilepsy illustrates the circle fully turned with the use of magnetic resonance imaging to detect small focal lesions in the temporal lobe with subsequent surgical removal. A useful resumé of risk versus benefit of drug treatment follows.

Opinions are revised on what were sometimes overkill investigations. Thus under 'imaging of the urinary tract', cystography is not even mentioned, and the ESPGAN criteria of three jejunal biopsies for the diagnosis of coeliac disease is being abandoned.

The philosophy of changes in treatment is epitomised by the chapter on paediatric oncology headed 'towards cure at least cost'. For many malignancies current research is aimed at identifying poor prognostic groups for more intensive treatment while reducing treatment for cases with a good outlook.

Current new treatments, such as pancreatic transplant, and somatic gene therapy are discussed with their attendant difficulties, which surely will be overcome in the next 10 years. The book concludes with a thoughtful