This package provides a very good basis for training sessions for general practitioners and other health care workers involved or becoming involved in child health surveillance. It should prove useful for both initial training and for update sessions for more experienced practitioners. The video consists of four parts (introduction, communication skills, the examination, and outcomes) plus as an ‘activity’ 18 slides of situations likely to be found during a surveillance check, where the participants are requested to write down the action they would take. There are two other activities based on sections of the video and very useful handouts, together with an evaluation form to complete the half day session. The package is designed to be highly interactive and to accommodate participants coming from varied levels of experience. It can be used flexibly with modifications to suit local needs.

The quality of the video varies from fair to excellent. Some of the slides used in the 18 situation sections and elsewhere are of poor quality rendering interpretation difficult. There are some inconsistencies in the presentation, inevitable in such an unevaluated and rather controversial area of child health presentation on territory is discussed. In one section ‘the doctor’ who appears to be either a clinical medical officer or already a general practitioner doing surveillance is advised to sit down and discuss her findings with ‘the health visitor’ and with ‘the GP’ (a person who appears in another section of the tape as the link worker). Some may find the slightly patronising and proselytising presentation somewhat irritating especially the rather protracted section on the need for good communication.

Overall, however, the package is well thought out, well presented, and well worth buying for departments undertaking training in child health surveillance.

**BRENT TAYLOR**
Professor of community child health

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**BOOK REVIEWS**

**Chronic Childhood Disease—An Introduc-**
**tion to Psychological Theory and Research.**


Every so often there is a piece of work bringing together research and thinking on a subject and acting as the source of reference for the next few years. In 1965 Vernon and colleagues published a comprehensive survey of literature on the effects of hospitalisation and illness in childhood. Ten years later Pless and Pinkerton not only collected and sifted the literature, the psychology of chronic childhood disease, but began to provide a conceptual model of adjustment and maladjustment of the child with a chronic disorder in his family and society. In the same year the psychologists Rachman and Salkovskis published in a brief but encouraging description of ways in which psychologists had already applied their skills to the problems of medical conditions and treatments. What is the value of this book?


**ROY HOWARTH**
Consultant psychiatrist

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non-dogmatic style with good references and suggestions for further reading. There are a number of helpful illustrations including some colour plates of normal and abnormal genital anatomy.

The first chapter describes the evaluation of the child with advice on how best to examine children and adolescents. This chapter does indeed show that some would consider too invasive for 'routine' use. Particularly helpful are the details given on the variations in hyn- 

Archives of Disease in Childhood 1991; 66: 563

and I have found the dosage schedule easy to 

use in an emergency.

I have few criticisms. A magnifying glass is required to read the nomograms for calculating 

surface areas. The section on parenteral nutrition is not too useful as every hospital has its own regimen. The inclusion of a section on analgesia and sedation would have been very handy.

What about its main rival from Alder Hey which has just appeared as a new fifth edition? The book from Liverpool can still fit in a filo- 

fax and is also cheaper. Unfortunately due to its small size less information is given with no list of emergency drugs. My main worry, however, is the potential source of error in giving 

drug doses as total daily dose as all hospital drug charts require individual doses to be pre- 

scribed. I can claim neutrality but would always recommend the Guy's formulary.

Every paediatrician should carry this book and not rely completely on memory. Paediat- 

cric departments should make sure copies are freely available in the casualty department as 

well as on the ward for occasional paediatric prescribers. At £5 a copy it is a very cheap 

investment in these days of massive 

bureaucracy by the courts.

IAN BALFOUR-LYNN Paediatric respiratory research registrar

Infection in the Newborn. Edited by J de 

Louvos and D Harvey. (Pp 164; £39-50 hard- 


This book serves the important purpose of bringing together neonatal paediatricians and specialists in other fields who share an interest in perinatal infection. The coverage is wide 

ranging, from a stimulating first chapter on the cellular and biochemical pathology of the inflammatory response, and a chapter on post-mor- 

temor findings, the chapters on specific 

types of infection (nosocomial infection, li- 

seria, group B streptococci, viruses in general, 

HIV, sepsis, and meningitis), sections on laboratory tests and treatment possibilities, and finally maternal infection.

In neonatology there is an inevitable pre- 

occupation to treat at the earliest suspicion of infection. However, there are considerable unit to unit differences in the practice in this difficult area. There is an attempt in this text to put local prejudices into a scientific and 

historical perspective. One specific problem is the accurate diagnosis of bacterial infection, and although laboratory diagnostic tests are not foolproof, it is suggested that combina- 
tions of them can be of use in rationalising the starting and stopping of antibiotics. One 

controversy that is touched upon is the choice between a combination of penicillin/ 
amino-glycoside and a newer cephalosporin for early sepsis, and the place of routine lumbar puncture in 'infection screening'. The section on HIV, although it may age quickly, is a 

welcome review and practical guide. Going on to treatment, there is a detailed analysis of evidence for the use of immunomodulating therapy, and a mention of therapeutic manip- 

ulation colonising flora. However, the most 

exciting suggestion is that of 'inflammation 
moulding therapy', which could possibly alter the many secondary manifestations of infection.

There is some repetition of material on bac- 

terial infection, and poor coverage of some 
topic issues in non-bacterial infection. For 

example, the chapter on viruses avoids sub- 
jects such as rubella, cytomegalovirus, and 

hepatitis B, and describes in some detail respiratory syncytial virus infection, which is not strictly a neonatal concern.

Overall, this collection of essays provides a useful update and source of references for infection for the clinician caring for the new- 

born.