The Stress of Multiple Births. Edited by David Harvey and Elizabeth Bryan. (Pp 146; £15 paperback.) Multiple Births Foundation, 1991. ISBN 0-9517709-0-0. X. (Available from the Multiple Births Foundation, Queen Charlotte's and Chelsea Hospital, Goldhawk Road, London W6 0XG.)

‘Like babes in wombs . . . . . . . Urging slowly, surely forward, Horning each other, And waiting ever more, forever more behind’. 

Walt Whitman—Leaves of Grass

Whitman captures in Unseen Buds a stress so often expressed by parents of multiple births. The feeling of the more having to be met by the less. What is so impressive about this collection of essays, is the ‘more understanding and thinking that is given to contain the stress of multiple births. The wealth of experience condensed in this incisive yet comprehensive collection of essays, will not only help and support those familiar with multiple births, but also the unfamiliar. This book succeeds in raising our level of awareness of the stress surrounding this issue, and, in so doing, helps us to cope better with such stress.

The book is divided into five sections, antenatal, newborn, the first 2 years, growing up as a twin, and higher multiple births. The collection of 13 essays starts with ‘Obstetrical aspects of multiple births’ by Ian MacGillivray, and ends with ‘The long term outcome’ by Ann Stewart. Pausing for thought along the journey with ‘Ethical dilemmas’ by Elizabeth Bryan et al. ‘Family relationships’ by Cherry Rowland, ‘Twin relationships’ by Stephen Isaac, and eight other fascinating papers. The scope and content of the essays clearly meet their intentions.

The two editors, David Harvey of Queen Charlotte’s and Elizabeth Bryan of the Multiple Births Foundation, are sensitive throughout to the fact that ‘women least likely to want twins are those at greatest risk of conceiving them’. With their extensive experience they show the intricate interdependence between the physical, emotional, and financial stresses of multiple births. In conclusion, they suggest a number of resolutions (collected into three groups, that is counselling and support, infer-tile treatment and higher order births, and long term studies), to help professionals recognise the special problems concerned with the stress of multiple births.

ALAN LEVY
Principal child psychotherapist


This book arrived in my pigeonhole just as I was about to leave Cambridge for a walking holiday in Madeira. As a consequence I can vouch for the quality of the binding, which survived a six week pattering in a rucksack, and the paper which promised resistant properties to both water and alcohol. The text stood up better than most medical books to being read rapidly over to cover like a novel. The editors have sought contributions from different expert authors writing 20 separate chapters and the topics covered include apnoea (Aranda), antibiotics (De Louvois), anticonvulsant therapy (Ryley), analgesia (Levit), vitamin therapy (Wise) in addition to a useful general revision of pharmacokinetics, the transfer of drugs across the placenta and into breast milk, and the effects of drugs taken by the mother both therapeutic and addictive.

There is no material in this book, although similar information could be found in recent review articles it is undoubtedly convenient to have the facts gathered together. Reference lists are adequate and as up to date as is possible in a textbook, although the same single case from a 1979 Lancet letter referring to the effects of maternal indomethacin appears in two successive chapters, and I found it surprising that I could not find any reference to the meta-analyses of maternal betamethasone and ritodrine. The book is far from being a comprehensive manual of neonatal therapeutics and there are significant omissions and some overlap. There is no material on chronic lung disease—no discussion of dexamethasone, bronchodilators, or diuretic therapy and nothing on pharmacological prophylaxis of peri-natal morbidity. This area of neonatal care is covered but there is no mention of the use of human albumin solution or immunoglobulin prophylaxis of infection.

The balance of the remaining material suffers both from an attempt to cover vast areas in a small number of words and from a failure to reflect the relative importance of the treatments described. Indomethacin treatment for patent ductus arteriosus merits only two pages, for example, whereas there is a considerable amount of space devoted to anti- arrhythmic therapy. Reading the chapter on antibiotic therapy feels like a mental gallop through the field with no space allowed for advice regarding the treatment of specific infections. Similarly the chapters on total parenteral nutrition, hypoglycaemia, and transfusion therapy are too compressed to allow adequate discussion and left this reader feeling unfulfilled. The book does not contain an appendix with dosage regimens. The lack of specific therapeutic advice in several sections would make it unsuitable as the sole text to recommended to junior staff. A good idea and a useful try, but perhaps not the first choice for any book tokens still lurking dog eared in the debris of one’s wallet.

JANET M RENNIE
Director of neonatal services


Authors of a book intended to help candidates prepare for examination questions expect the examination questions to change, and this is the case with the DCH. In my view the second edition of Child Health has not kept up in reflecting the reform of the examination towards a problem orientated approach based on primary care presentation, with a greater content of developmental child health, and a health rather than disease emphasis.

Child Health is a useful book, although the manner the 29 contributors writing 34 chapters that mainly follow disease systems. There are useful additions at the end on ‘ethical dilemmas’ and ‘examination techniques’. Twenty four of the authors are hospital based paediatricians and hence it is not surprising that the majority of chapters devote more space to secondary aspects of disease than