to primary. For example, I could find no mention in the relevant chapters of developmental delay associated with iron deficiency; no mention of district handicap teams; no mention of common sleep disorders; little discussion on asthma management at school, and also inappropriate advice such as 'stool examinations should include culture' in the home management of diarrhoea.

There are also deficiencies in the 'preventive' chapters. There is scanty discussion on the format, content, and evaluation of a surveillance programme that now forms a central part of child health in general practice (though the hard to credit statement is made on p 56 that 'for most children, pre-school surveillance is undertaken in child health clinics organised by the child health services'). The increasingly recognised public health aspects of child health in relation, for example, to accident prevention receive no mention. The contraindications to pertussis given on p 38 are incorrect and do not detail the definition of a severe reaction (which is the only absolute contraindication). I have some carping comments about omissions, too—hyperactivity, the distraction hearing test, torticollis, and blocked tear ducts are not to be found in the book but all may crop up in the examination, and are important problems in clinical practice.

There is much to learn in the chapters on epidemiology by Stuart Logan, on child abuse by Jane Wynne with its clear illustrations, and on genetics by Sarah Bunday, which has valuable data on recurrence risks.

I very much hope that the editors will take a fresh look at the format of the book before the

next edition to ensure that it is fully compatible with the reformed DCH.

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Handbook of Pediatric Imaging. Edited by Lori L Barr. (Pp 224; £80 hardback.) Churchill Livingstone, 1991. ISBN 0-443-08697-4.

'The *Handbook of Pediatric Imaging* guides the general radiologist through a thought provoking review of pediatric radiology'. This quotation from the preface provides a standard with which to compare this text.

In general, there is an uneven allocation of space to topics. It is a necessary editorial duty to control the enthusiasm of contributors for their special interests and to balance the content of the book.

There is a long contribution on dental radiology, mainly accurate and interesting, but out of proportion to other sections of wider interest. The pulmonary problems of the preterm infant receive less space and, due to the method of grouping by findings such as 'hyopneation' and 'multiple cysts', some disease processes are described in several sections. The best description of pulmonary interstitial emphysema does not relate to respiratory distress syndrome, but appears under a section headed 'Mediastinal air'.

This system is of value in preparing candidates for examination where clinical information may be lacking, but does not help with clinicoradiological correlation. In the bone section, Scheuermann's disease has three short

and partly repetitive mentions, inaccurately recorded in the index.

In conclusion, this book is best used as a 'spot' primer for examinations: it is too uneven in content and style to be a major addition to the texts on paediatric radiology already available.

RICHARD KEITH LEVICK
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Atlas of Rare Chest Diseases in Children. Edited by J Rudnik and R Kurzawa. (Pp 192; no price stated, hardback.) Rabka, Poland: National Institute of Mother and Child, 1990. ISBN 83-00-03293-2.

The National Research Institute of Mother and Child in Rabka, Poland have put together a collection of interesting rarities in this book. They have impressive facilities, but the atlas unfortunately reflects their lack of access to modern investigative resources such as computed tomography, magnetic resonance imaging, and fiberoptic bronchoscopy. Bronchograms are used in most of their cases, whereas we rarely perform one, and the contrast medium may soon be unavailable. The illustrations, although lavish, are often poorly reproduced, and the reference list has important gaps. In summary, an enviable collection of material, but it is difficult to know to whom to recommend this book for purchase.

ANDREW BUSH
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honorary consultant
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Correction

Early thrombocytopenia in HIV infection

We wish to clarify any ambiguity in this paper by R M Beattie *et al* published in September (pp 1093-4). In case 1, the last sentence of the second paragraph should read: 'He continued to receive this [intravenous immunoglobulin] every four weeks for six months'. In case 2, the third sentence of the third paragraph should read: 'He is currently on intravenous immunoglobulin every four weeks, daily zidovudine, and alternate day prednisolone'.