BOOK REVIEWS

Clinical Pediatric Oncology. 4th Ed. By Donald J Fernback and Teresa J Vietti. (Pp 720; £70.50 hardback.) Mosby-Year Book Inc, 1991. ISBN 0-8016-3306-0.

Despite paediatric oncology being one of the most rapidly expanding fields in clinical paediatrics, there are relatively few comprehensive texts. This fourth edition of *Clinical Pediatric Oncology* has been extensively revised and attempts to combine both an up to date review of clinical conditions as well as a basic understanding of the pathology involved.

The book is divided into two main sections. The first section covers the epidemiology and aetiology of childhood malignancy, diagnostic techniques, and general aspects of supportive care. The chapter on imaging in paediatric oncology is superbly illustrated while the chapters on molecular oncology and tumour immunology are both excellent, detailed, if somewhat complex reviews of exciting areas of recent research.

The second section of 16 chapters covers specific disease entities, diagnosis, management, and prognosis. Each is well illustrated with appropriate clinical photographs, x ray pictures, and tabulated data which makes each chapter very readable. Finally with significant improvements in survival from childhood malignancies, the last chapter on the late sequelae of cancer and cancer treatment is particularly relevant. It is a concise overview of the many potential problems of the long term survivor and emphasises the necessity for prolonged follow up not only in the patient but of any offspring. As with most chapters it is extensively referenced.

This textbook, though aimed primarily at the paediatric oncologist, would be a valuable reference book for the general paediatrician and those in training. It gives an up to date comprehensive overview of paediatric malignancy from diagnosis to potential problems in the survivor. As with many multiauthor publications there is occasional overlap between chapters, but generally this is minimal.

DENISE M WILLIAMS
Clinical lecturer in paediatrics

Hydrocephalus: Current Clinical Concepts. By R W Leech and R A Brumback. (Pp 212; £46 hardback.) Mosby Year Book, 1991. ISBN 0-8151-5555-7.

The first section of this book is concerned with the basic science of hydrocephalus and deals with the embryological, anatomical, physiological, and pathological aspects in what is quite an elegant synopsis of the scientific

background of hydrocephalus. Although not a rigorous bibliography, it is this section wherein lies the strength of the book.

The second half of the book comprises clinical considerations—presentation of hydrocephalus, evaluation, genetic implications, medical and surgical management, and psychosocial factors. While some of these chapters are discursive and useful, others are more flippant and not particularly practical. The paediatrician most frequently encounters practical management difficulties in children with posthaemorrhagic hydrocephalus, or that associated with aqueduct stenosis or Arnold-Chiari malformation and would value assistance in the sometimes thorny problems concerning monitoring progression of ventricular dilatation, the assessment and relationship to brain damage, the indications for cerebrospinal fluid diversion, and later the major problems of blocked, infected, colonised, and overdrained shunts. My main concerns with this book revolved around the question of the 'current clinical concepts' which is purports to deal with, and yet some of the above problems are barely touched on. For example, there is virtually no information on the important use of ultrasound, Doppler indices, pressure and hydrodynamic measurements, but instead one sees dated illustrations such as air encephalograms, which are said to be a deliberate inclusion to illustrate the difficulties of management in the last two to three decades but would be more relevant for an historical text.

While this is an undeniably laudible attempt to compile a book which deals with all aspects of hydrocephalus from the fetus to the geriatric patient with normotensive hydrocephalus, and which is both a reference for specialists and paraprofessionals, and is also of use to families of patients with hydrocephalus, it becomes an almost impossible task in 200 pages and therefore misses the mark in some of its designated aims.

It is always difficult to get authors to address important practical problems which arise in the hinterland between paediatrics, neurosurgery, neurology, and several other 'ologies'. These authors have attempted a very difficult task and this modest book with a largely American faculty has some interesting and useful facets. One must agree with their final comments that 'although we have come a long way the reader must appreciate that there is still much that we do not know about hydrocephalus'.

R A MINNS
Consultant paediatric neurologist

The Epidemiology of Childhood Hyperactivity. By Eric Taylor, Seija Sandberg, Geoffrey Thorley, and Susan Giles. (Pp 148; £27 hardback.) Oxford University Press, 1991. ISBN 0-19-262172-6.

Hyperactivity, the enduring trait of inattentive, restless, and uncontrolled behaviour, is a common complaint by parents of psychiatrically disturbed children. It can feature as a

symptom in a number of psychiatric disorders but it also forms the core symptomatology for the hyperkinetic syndrome or attention deficit disorder. There has been considerable discrepancy in rates of hyperkinetic syndrome diagnoses in different countries, reflecting the different emphasis placed on the symptom of hyperactivity as being primary or secondary to other psychiatric difficulty. Because of the suggested links between hyperkinesia and neurodevelopmental anomalies, the diagnosis is used more widely by those clinicians who favour a biological understanding of disruptive behaviour and, because of the response to stimulant medication, by those who use pharmacological treatment.

Drs Taylor, Sandberg, and collaborators at the Institute of Psychiatry have for some years been carrying out research in this area. Previous work by them in clinical samples has shown that it is possible to separate dimensions of hyperactivity from other antisocial or disruptive behaviours, and that a group of children with pervasive hyperactivity and inattention can be recognised, characterised by neurodevelopmental delays and a marked response to stimulant medication, as distinct from groups of children with antisocial behaviour associated with family dysfunction.

The study reported in this book is an epidemiological survey of boys in east London; it examines the generality of the authors' earlier findings. Over 3000 boys were screened using teacher and parent rating scales for disruptive behaviour and its components (hyperactivity and conduct or antisocial behaviour). Subgroups of boys with different types of disruptive behaviour were then selected for detailed study, including the use of standardised measures of child symptomatology, family life, relationships, and social background and a battery of psychological tests. Developmental records were scrutinised for developmental problems. The results confirm and extend the previous findings in clinical samples. A group of hyperkinetic children could be identified from children with non-hyperactive conduct disorders, hyperkinesia being a condition of early onset associated with multiple motor and cognitive developmental delays. They also confirm the existence of a mixed group of children with both hyperactive and conduct disorders and they show a tendency for hyperactive children to have more symptoms of emotional disorder than other children.

The work was conducted carefully; the methodology is sound, the analysis thorough and discriminating. The discussion is an authoritative outline of the state of the art as regards research on the basic features of the syndrome and its associations. I found the discussion on why laboratory studies of attention appear to be out of keeping with clinically observed hyperkinetic or overactive behaviour particularly interesting. The book is required reading for anyone wanting to have a sophisticated and scientifically discriminating approach to the nature of the hyperkinetic syndrome.

M E GARRALDA
Professor of child and adolescent psychiatry