

There is a critical approach to relevant literature, but research is not described or discussed in detail. The best chapters from a therapeutic point of view are excellent in giving specific and detailed examples of therapists' actions in particular contexts. Outstanding in this respect are the management overview and the chapter on family therapy and parental counselling by Lask and Magagna's account of individual psychodynamic psychotherapy. Some of the other chapters would have benefited from the use of such detailed examples.

The title of the book identifies its scope more clearly than does the prologue as it is definitely not a book about eating disorders in young children. Although the initial overview lists seven disorders considered relevant including food avoidance emotional disorder, pervasive refusal and bulimia, in practice this volume contains remarkably little about disorders other than anorexia nervosa. It would have been advantageous to show if similarities and distinctions between these different subgroups could have been considered in a systematic way throughout. There is an interesting contrasting of some of the disorders in the chapter on schooling. Bulimia in particular gets very little mentioned except under epidemiology. Overall this book is strongly recommended to practitioners working in this field.

ANTONY D COX
Professor of child and adolescent psychiatry

Neurological Problems in Childhood. By Neil Gordon. (Pp 339; £40 hardback.) Butterworth-Heinemann, 1993. ISBN 0-7506-0898-6.

With the publication of a number of new titles in recent years, there is now a good selection of medium sized and larger textbooks of paediatric neurology. The reader who seeks an introduction to the subject has hitherto not had such a good choice. Dr Neil Gordon's book, which is a completely updated version of *Paediatric Neurology for the Clinician* published in 1976, is particularly suited to doctors in training in hospital paediatrics and community paediatrics, as well as to those in allied professions.

This is a well written, very readable book. It manages to be quite comprehensive within its only 339 pages. There is a particularly good section on educational and developmental disorders. Epilepsy, muscle disorders, and cerebral palsy each has a succinct, well referenced chapter devoted to it. Despite the emphasis on common disorders, a large number of neurometabolic disorders are covered in the chapters on degenerative cerebral diseases and genetically determined conditions.

The omission of any review of neonatal neurology and the small space devoted to clinical genetics detract a little from the book's role as a short, comprehensive text. This apart, it is difficult to find important topics that have been overlooked. Fragile X syndrome is poorly covered, and there is no mention of HIV in an otherwise good section on central nervous system infection. The lack of magnetic resonance imaging is disappointing, but the book is otherwise well supplied

with many clear and appropriate black and white photographs.

I would have no hesitation in recommending this book to doctors training in paediatrics who need a good introduction to paediatric neurology. This book will be more than adequate to assist with preparation for the Paediatric MRCP Part 2. It will continue to serve the reader well, and there are sufficient up to date and key references in each section for it to be a starting point on the quest for more detailed knowledge about particular topics.

CARLOS DE SOUSA
Consultant paediatric neurologist

Children with Disabilities. A Medical Primer. 3rd Ed. By Mark Batshaw and Yvonne Perret. (Pp 664; price not stated, paperback.) Paul H Brookes, 1992. ISBN 1-55766-102-2.

If like me you were a trifle postictally confused after reading about and attempting to understand the different types of seizures, then I would recommend that you read the chapter on seizure disorders in *Children with Disabilities*.

Like all the various topics covered in this reader friendly book, which is intended for parents and educationalists as well as health care workers, the chapter begins with a set of objectives that the reader will achieve upon completion of the chapter, an introduction which puts the subject under discussion in perspective, followed by a clear description of the conditions (dotted with up to date references) the diagnostic procedures, treatment and multidisciplinary management, and ends with case histories ('based on actual and synthesized cases') and a summary. There are many very helpful illustrations, graphs, and charts (black and white) throughout the book.

Children with Disabilities begins at the beginning with 'the cell' and in a delightfully lucid way explains the basics of genetics, embryology, fetal development, etc, so as to give an understanding of where things can go wrong, and gives a comprehensive coverage of a wide range of disabilities in its 29 chapters. Appendix 'A' provides an extensive glossary, Appendix 'B' is on 'syndromes and inborn errors of metabolism'. Being an American book, Appendix 'C' 'resources for children with disabilities' has listed North American organisations only; if it were feasible to provide an addendum with a list of British organisations, it would be excellent. Of course, some areas such as hyperactivity would be dealt with differently in British practice.

For such a good sourcebook perhaps a touch of colour would provide an added incentive to lure the reader but I am mindful that this may be offset by a higher cost.

For junior doctors working with children, reading *Children with Disabilities* would provide an excellent and a relatively pain free priming dose before they venture onto more technical texts.

A STANTON
Consultant community paediatrician

Synopsis of Pediatric Emergency Care. Edited by Jagannath Surpure. (Pp 432; £32.95 hardback.) Butterworth Heinemann, 1933. ISBN 1-56372-011-6.

Not long ago it was difficult to find a textbook dealing only with paediatric emergency care. Interested readers had to ferret out material from larger paediatric textbooks or look for paediatric nuggets in adult books. Now, the field of paediatric emergency care is well established as an entity and consequently there is a growing body of paediatric emergency medical literature. Broadly speaking there are two types of books; one takes a practical 'how to do it' approach. These manuals tend to be precise, rather dogmatic, with the main emphasis on rapid initial diagnosis, management and treatment - algorithms abound. The other type of textbook is less action orientated and more comprehensive of single diagnoses. These aim I assume to be used more in study than as a practical guide on the 'shop floor'. Jagannath Surpure has edited a book that falls somewhere between the two. The book has 43 authors, mainly from Oklahoma, and is divided into 12 parts. The first five parts cover resuscitation, acute airway management, circulation, poisoning, and trauma/ortho-paedics. The next five parts deal with emergencies that occur in systems (for example central nervous system, gastrointestinal, etc). The last two parts cover miscellaneous (for example, febrile child, abuse) and environmental emergencies. The book is 432 pages in length. Inevitably there are transatlantic differences in drug names (adrenaline/epinephrine is *the* drug in resuscitation), spelling, and in some cases differential diagnosis.

Page 355 suggests children with fever and petechiae, where the differential diagnosis may be Rocky Mountain fever, but who have a normal lumbar puncture, white blood count and temperature less than 40°C, have a reduced risk of bacterial infection. We would not wait to find out, but would assume meningococcal septicaemia and treat until proved otherwise.

The chapter on sexual abuse has an emphasis towards forensic evidence and says little about who should examine, when and where. The multiagency approach encouraged in this country is missing. Some of the tables are small (page 289) and difficult to read, others are excellent. Chapters on airway emergency, respiratory disorders, and trauma are uncontroversial as they stick to widely used guidelines from the Advanced Pediatric and Advanced Trauma Life Support schemes. The resuscitation algorithms for ventricular fibrillation, electromechanical dissociation and asystole, differ only in minutiae from the European ones.

I was surprised that drowning did not get more than a couple of lines. Each chapter has a list of useful references.

Would I buy it? Well would I use it for practical management? I think not, as there are other clearer guides for that. Would I refer to it in study? Maybe, but then I am more likely to go to bigger texts or journals for in-depth up-to-the-minute knowledge. It is good value for money, a nice size of book to handle, but this time I would give it a miss.

ELIZABETH MOLYNEUX
Consultant to the accident and emergency department