covered and provides a large number of references for additional reading. It is also useful to clinicians when considering risk factors for a particular disorder and critically evaluating interventions.

What becomes apparent after reading this book is that we can usually describe patterns of disease, although this is sometimes complicated by lack of a consistent definition or denominator, but that we cannot identify or influence many of the associated risk factors or separate the confusing interactions that so often occur. This has limited our progress in the primary prevention of many childhood disorders.

Despite this, I challenge readers unconvincing of the relevance of epidemiology to 'real medicine' not to be converted by this book. Perhaps, as suggested in the foreword, they will come to appreciate the elegance and enormous potential of epidemiology, as applied to childhood disorders'.

GABRIELLE LAING
Senior registrar in community paediatrics


The Alder Centre opened in Liverpool in 1989. It was a pioneering project, with a remit to support anyone affected by the death of a child. The centre offers a range of services including a telephone helpline, a drop in facility, groups, and counselling. Celia Hindmarch, the author of this book, was the first manager, and senior counsellor at the centre. She has drawn on her experiences there and has developed the themes and the lessons learnt from families into this comprehensive and helpful text.

The book brings together a wide range of issues that face families and professionals when a child has died. The approach is practical and drawn from experience. There are references to the literature but not a comprehensive review. A variety of case histories and quotes from families are included. These are often poignant and provide constructive illustration to the text.

The first section of the book covers context and theory. Most of us in paediatrics are familiar with some causes of death in childhood, such as prematurity, acute illness, or cancer. Here it was interesting to read about the particular problems each situation poses and how these compare, and also instructive to consider those causes of death which are less familiar, such as suicides, accidents, and murder. The features of conventional grief and mourning are well described. This is followed by a useful discussion of the special aspects of grieving when a child has died and the effects on different members of the family.

The central focus of the book is guidelines for those whose work brings them into contact with the bereaved. General principles are described, which are relevant to any worker, based on the importance of listening to what the families want rather than presuming what they need. Then more specific issues are addressed aimed at a wide variety of different professionals including police, funeral directors, and clergy as well as medical and nursing staff. I was particularly impressed by the realistic discussion of suicidal thoughts in bereaved parents and the suggestions for assessment of suicide risk. Finally there is an overview of the types of support and resources available and guidance about choosing the most appropriate.

Overall the book offers a wise and useful approach. Helpful advice is combined with sensitivity and the book reminds us that bereavement work tends to make everyone feel inadequate, because it is impossible to take the families’ pain away. However it also encourages us that ‘experts’ are rarely needed; anyone reading this book could gain the information and confidence they need to help families appropriately.

ANN GOLDMAN
CLIC consultant in paediatric palliative care


It is said that all violinists can trace their lineage to Eugene Ysaye (1858-1931) who taught in Brussels towards the end of the nineteenth century, although the Berlin School of Joachim (1831-1907) can be considered a rival. When we come to paediatric endocrinologists, all serious players can trace their lineage to Lawson Wilkins (1894-1963). He practised paediatric endocrinology at the Johns Hopkins Hospital in Baltimore from whence a string of pupils emerged.

The first edition of this book entitled The Diagnosis and Treatment of Endocrine Disorders in Childhood and Adolescence was published in 1950, the second in 1957 and the third, completed by Dr C Migeon, appeared two years after Wilkins’ death. This fourth edition is edited by Blizzard and Migeon, children of Wilkins, with the assistance of Michael Kappy; it is a pleasure to own this book and, of course, a privilege to be asked to write a review about it.

The editors believe that ‘a major factor contributing to the success of (Wilkins’) book was the atlas which was at the end of most chapters’. The pictures in the atlases in this edition quite often date from Wilkins’ own collection and this frankly rather dated chamber of horrors (easily identifiable naked patients with gross physical abnormalities) signals that this is a book written and edited by the children of Lawson Wilkins rather than by his grandchildren and great grandchildren. I do not know whether the editors and publishers were so keen to issue this book in the centenary year of Wilkins’ birth that they deliberately held it back, but how is it that the latest references in most of the chapters are from 1990, although there are some from 1991 and 1992 in the senior editor’s chapter on growth? It is possible that the editors were wrestling to achieve all the manuscripts (a frustrating process with which I have the greatest sympathy) but it has to be said that the account of paediatric endocrinology given here, sound though it is, has for the most part the feel of the retroscopes rather than a harbinger of what is to come.

That said, and with certain notable exceptions, specifically the early chapters on the organisation and regulation of the endocrine system, clinicians will find here a sound account of the principles and practice of clinical paediatric endocrinology from highly respected clinicians, only one sixth of whom come from outside North America. The book has an old fashioned American feel (and none the worse for that). It represents good value for money.

C G D BROOK
Professor of paediatric endocrinology