Foley catheter technique is suggested for foreign bodies trapped in the oesophagus, whereas in Britain this would not be recommended and preference would be given to oesophagoscopy under anaesthetic. I enjoyed the superb line drawings, which are clear, uncluttered, and instructive.

Small contributions cover monitoring, vascular access, nutrition, ventilatory and respiratory support needs. The importance of critical care nurses is emphasised. A chapter entitled The Aftermath of Childhood Injuries covers the problems of disability, psychological consequences, and organ procurement.

A section on speculations and hopes for the future of trauma care makes interesting reading. Twenty-four surgeons were asked their views on the two most important reasons for recent improvement and two hopes for the future. Answers were varied, but included improved training, life support courses, management protocols, and paediatric trauma centres as reasons for recent improvement. The future for some contributors looks bright (there will be new mediator antagonists to aid recovery, synthetic oxygen carrying blood substitutes, better prehospital care). Others are more pessimistic and worry that trauma care will become less specialised, devolving to smaller units with less expertise.

To sum up - I like this book; big, heavy, glossy paged, and well referenced. The sort of book it is a pleasure to read, easy on the eye, and seductive to touch. The contents do justice to the presentation. The sort of book you don’t buy (too expensive), but persuade your library to buy, borrow frequently, and return reluctantly.

ELIZABETH MOLYNEUX
Consultant in paediatric accident and emergency medicine


I suspect all of us have sometime craved for a book that helps us to sort out our diagnostic problems: one that points us in the direction of a few apposite tests, which will guide us to the hitherto elusive diagnosis. (I personally think that when one is in a tight corner with a sick child, the wisest course of action is to consult a colleague whose judgment one has learned to trust, but he may have been sent on a management course or be out of the country!)

Douglas Addy’s book aims to be such a guide. With a page size of 9-5” by 7-5”, and weighing 1 lb 6 oz (625 g), it hardly slips into the pocket, although at just £27.50 it doesn’t make too big a hole in it. Its 20 chapters are all by well known experts from the UK with a slight, but very understandable, predominance of the home team from Birmingham. All the major paediatric subspecialities are covered, including those in which general paediatricians may be insecure, such as ophthalmology, ear, nose, and throat, clinical chemistry, and gastroenterology.

The editor and contributors have striven to keep in mind that the book is about investigations, whatever that means. Dame June Lloyd, in her foreword, emphases that the most important investigations are a careful history and a skilled physical examination.

There is a risk of giving lists of possibilities, or tests, for any clinical situations, but sometimes even long lists, if systematically presented, can be very useful as aide-memoires. Punts and Booth manage this particularly well in their chapter on gastroenterology, even making lists of 44 causes of protracted diarrhoea and 32 causes of recurrent abdominal pain seem digestible.

Some authors convey their enthusiasm for their subjects better than others: the chapters by Wraith (metabolic disease), Tarlow (infective), Klugman (child abuse), Kelly (liver disease), and Polley (child burns) all have a vigour that makes for easy reading, and Rigby’s section on cardiology is a model of conciseness.

Much of the neonatal chapter (Stewart and Turner) contains information that can be found in the many excellent, small, pocketable, handbooks, but it is right that for the sake of completeness that it be included.

Sarron and Mott’s contribution on oncology is good too, although the recommendation that the urine of children with opsomyoclonus should be examined for catecholamines will, I fear, bewilder more than it enlightens, in this age when schoolboys learn Latin, and still fewer study Greek. My Dorland’s Illustrated Medical Dictionary fails to mention it, and even the current Nelson Textbook omits the term ‘opsoclonus Has, like drinking plain water, the term ‘dancing eyes’, gone out of fashion?

But this is a book review, not a retirement speech, I can’t mention everybody, but all the contributors must pass muster. Booth has this point: At this point I have a confession to make: more than a decade ago, a (different) publisher invited me to provide a text on ‘investigations in paediatrics’. I was up to my eyes in work and with a young family. I reluctantly refused. I can now confidently state that the world of paediatrics has survived my refusal: Doug Addy has done far better than I could.

His book should be kept to hand on the ward. I hope the next edition will have a section on dermatology; that will make a good book even better.

R A F BELL
Consultant paediatrician


All medical students have at least ‘A’ level chemistry before they start preclinical training and they learn biochemistry for at least a year, yet within a year or so of the second professional examination, many appear to have lost all but the vaguest traces of this fundamental subject.

When I entered paediatrics a quarter of a century ago, what struck me most was its eclecticism; there was hardly any subject that I had touched upon in medical school that was not occasionally relevant. Biochemistry was clearly much more than that; whether in the acute management of a vomiting baby, a virilised toddler or an unconscious 10 year old, a knowledge of basic biochemical pathways was then, and remains, a sine qua non to good clinical practice.

The title of this large book edited by Dame Barbara Clayton and Dr Joan Round boldly proclaims its ambitions, and has a distinguished group of contributors to achieve those aims; which are partly to guide the clinician through those biochemical pathways relevant to paediatric practice, to explain the strengths and weaknesses of biochemical tests, and to give the biochemist the paediatrician’s point of view. This is a second edition, 10 years after the first, and it contains many new chapters, reflecting growth particularly in fields where clinicians who did his 2nd MB more than a decade ago would now think most of us – is most in need of guidance, including peroxisomal, mitochondrial, and lysosomal disorders.

It is firmly based on clinical practice, starting with instructions on how best to get blood out of babies. A chapter on the new genetics comes next and then the chapters follow the usual pattern of paediatric specialties, beginning with neonatology. The book is no exception, for example the section on neonatal hypocalcaemia overlaps that on the chapter devoted to bone mineral metabolism, but that is no disadvantage, as it makes the book more useful as the work of reference it is: this is not a book for bedtime reading.

All the chapters are good, and given the star studded list of contributors, authoritative. It is almost invidious to select chapters for special praise, but the neonatal sections from Glasgow (Wharton, Scott, and Turner) and Paris (Poggi, Billette de Villemeur, Munnich, and Lebey) stand out: they have come across no clearer description of the management of neonatal hypocalcaemia anywhere and Alex Mowat’s chapter on liver disease positively exudes his enthusiasm for his subject.

The section on malignant disease from Alan Craig (Newcastle) and Jon Pritchard (Great Ormond Street) is not only readable but so brimming with good clinical sense that all doctors treating children with malignancies should read it. Incidentally this chapter is almost the only one that ventures to use molecular formulas in the description of metabolic pathways: surely paediatricians are so scientifically literate that they can cope with the new steroid molecule: the description of the types of congenital adrenal hyperplasia would have been made both clearer and more interesting by their use.

Charles Brook contributes a characteristically robust chapter on growth problems, although many may be surprised by his statement that the diagnosis of Turner syndrome, ‘...in terms of chemical pathology, this is best done by measuring the gonadotrophin concentrations’ (my italics). That may be technically true, but a mention of chromosomal analysis in order of magnitude, putting it alongside clinical biochemistry. On the same page we are told, ‘The measurement of prolactin is an important guide to pituitary pathology’. So it is, but this reader sought in vain for the normal values for this hormone anywhere in the book.

J W Honour’s chapter on endocrinology seemed to me to suffer from the lack of a clinical correlate: blood changes are measured by ‘Dextrorotia’, not ‘Clinisticks’ (sic), and while adrenal destruction may follow infection with ‘influenza, pneumococcal or haemolytic streptococcal infection’, surely the meningococcus deserves a mention. While we are told that, ‘No child with any allergic condition should be (ACTH) tested’, the next paragraph instructs us to do so. Only test on children who are ‘too sick to warrant a query’. This is a rather worrying omission in the section on measuring blood renin and aldosterone concentrations, where we are advised that, ‘The patient should have a normal dietary intake of sodium and have been given potassium supplements’. Somebody forgot the word ‘not’ here; perhaps it isn’t as grave an omission as that of the printers of the notorious edition of the Bible who omitted the same word from the...