care are also considered in detail, dealt with from an American perspective. This book is recommended to the aspirant intensivist, provides useful material, and at times, controversial views on current paediatric management.

IAN MACONNOCHIE
Research Fellow

Childhood and Adolescent Diabetes.

A new comprehensive textbook on childhood and adolescent diabetes has been long overdue and Dr Chris Kelner and his many coauthors have produced what must approach the definitive text for 1995. The text and clinical approach is predominantly British with 35 of the 46 chapters written by UK authors. The contributor list is impressive and lengthy, totalling 70 different contributors, 46 UK based and 24 prominent investigators from the United States, Australia, Denmark, and Israel. Contributions come not only from scientists and clinicians but also from the ranks of highly experienced specialist nurses, dietitians, and those involved in the general welfare of the child with diabetes.

Diabetes has for a long time been the Cinderella of paediatric endocrinology, looked upon by the endocrine scientists as too clinically based to be interesting. This book serves to redress the balance and puts paediatric diabetes on a firm scientific base. It achieves a good balance between the hard endocrine and the deranged metabolic state of diabetes, the immunogenetic aetio-pathogenesis, and the pharmacology and the art of diabetes management as the family/child/clinician interaction, the psychology, the practical aspects of care and support.

The book is divided into six sessions though each is without a clear subheading. The first covers the basics of energy homeostasis and important chapters on normal physical and psychological growth and development through childhood and adolescence and their relation and interaction with diabetes. The second section outlines the history and current knowledge of the aetio-pathogenesis of diabetes. The third section, which is perhaps the most conventional section, brings to the reader a wealth of clinical knowledge and experience on the management of diabetes from a wide variety of experienced clinical practitioners and contains important sections on eating disorders and other psychological aspects. Clear guidelines on many management aspects are given without being too didactic and allowances made for the debate between various management options. Part five provides details of the interaction of the child with diabetes and its family and surroundings. Parts five and six provide fascinating chapters on current knowledge on screening, prevention, complications and their avoidance, and also new strategies for future treatment and management. The book finishes with two appendices of the St Vincent and ISPAD declarations.

It is an essential read for all those involved in childhood diabetes management. With such a large number of contributors, overlap is inevitable but has been kept to a very acceptably minimum by the editor. The result is impressively uniform, easy to read, and very well referenced. Progress in the immunogenetic aspects of this disease is rapid and inevitably it will date quickly. I trust the authors are already working on the next edition.

IAN G JEFFERSON
Consultant paediatrician

Intestinal Immunology and Food Allergy.

In the preface to this volume Hugh Sampson anticipates that the reader will gain an appreciation of those ‘...views and recommendations which are based on substantial scientific information, and [of those] which remain highly speculative’. It is soon evident (if we didn’t already know) that despite advances in immunology and numerous clinical studies, speculation in the field of ‘food allergy’ is rife.

The chapters provide succinct overviews of two subjects fundamental to any understanding of the pathogenesis of food allergy – the ontogeny of mucosal immunity, and the mucosal uptake of macromolecules. Then follows a review of the zero studies of neural/mucosal interactions. This is narrow in its focus, and leads only to a conclusion that ‘...under some circumstances stimulation of nerves can ... promote the equivalent of allergic manifestations ...’. The next chapter is in more rational sequence, being intended as a discussion of the characteristics of food allergens. Unfortunately, this largely focuses on observations from cross reactions between allergens. We are told of cross reactions between birch, pear, and peach allergens, but the clinical correlates of such observations, if any, are not mentioned.

A chapter on intestinal hypersensitivity makes clear our limited understanding of the immunopathology of coeliac disease, let alone even more poorly characterised gut disorders. The double-blind placebo-controlled food challenge (DBPCFC) is central to the investigation of food allergy, and a chapter on this subject provides clear and practical advice. The essential point is that just a few foods (nuts, milk, egg, wheat, to, fish, and shellfish) are responsible for the vast majority of DBPCFC confirmed reactions. Hugh Sampson reviews the non-intestinal manifestations of food hypersensitivity in some detail, and emphasises the high incidence and variety of allergic reactions in patients with atopic eczema. Then follows a somewhat difficult and confusing chapter on the controversial role of food allergy in infant ‘colic’. Here, the problems of defining the clinical entity, let alone identifying an allergic aetiology, are all too obvious.

The second half of the book focuses on efforts at prevention and treatment. There are excellent discussions of the phenomenon of ‘oral tolerance’ – the induction of systemic antigen specific non-responsiveness by enteral administration of proteins. Finally, a series of chapters addresses the complex area of clinical trials aimed at preventing allergic disease in childhood. Attempts have been made to reduce allergen exposure by maternal dietary restriction during pregnancy and lactation, breast feeding, the use of protein hydrolysates, and the delayed induction of solids. In contrast, some studies have attempted to induce oral tolerance by early exposure to potential allergens. Although a consensus was not apparent, the general view emerged that breast feeding, and possibly maternal/infant dietary restrictions, may delay or prevent food allergy. Even the unsatisfactory design of many clinical studies, controversy will certainly continue in this area. The absence of objective clinical and immunological endpoints is a particular problem.

Inevitably this is a difficult book, bringing into sharp focus the fundamentally different challenges which face laboratory and clinical investigators. In his concluding remarks, Alain de Weck describes how his coeditor has never attended a meeting about allergy ‘...so peaceful, so polite, so nice!’ This is not a textbook for the busy clinician seeking a succinct overview of the facts.

M S MURPHY
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One assumes a book on keeping a clinical confidence could be aimed at health professionals. The objective could be to enable them to develop their skills in professional practice within the framework of the law. The introduction describes for whom the book is intended but I found the description of the intended reader less than helpful, and if it is aimed at health professionals it is deficient in achieving its aim.

What is very useful is the gathering together of a number of sources, from statute, guidance and case law, dealing with the issue of confidentiality in a wide variety of circumstances. These range through issues such as AIDS, suspicion that a crime has been committed, child confidentiality, and mental incapacity. It also supplies a helpful bibliography. It is instructive that the book gives little else than gather information. There is no component on the discussion of any difficult issues arising out of the various sources. Specifically, in dealing with some important issues arising out of case law, the book makes the telling point that we need to know which case the decision. In dealing with the issue of child confidentiality the summary is so brief as to be positively misleading. Discussing the extremely important decision of the House of Lords in Gillick v Norfolk and Wisbech Area Health Authority, the authors rightly state that the actual decision was concerned with the giving of contraceptive advice. However, despite it being widely accepted that the remit of the decision is not confined to this single issue, the book subheads the discussion: ‘People Under 16 and Contraception’, and gives the impression that the Gillick decision has this narrow application. Furthermore, it does not even go on to consider the question of refusal of treatment by a minor.

The ‘guidance’ is often so vague as to leave the reader entirely unclear as to what is being said. For example, in discussing sharing information among colleagues this advice is provided: ‘...to state that any information that may be shared in an individual situation will be kept confidential. If the situation is brought to the attention of another member of a health care team, it is again up to the individual clinician to make a decision as to what information he is willing to disclose’. Even more bafflingly, when discussing the keeping of medical records and sharing information in a...