- 1 Bamford JM, Saunders E. *Hearing impairment, auditory perception and language disability*. 2nd Ed. London: Whurr, 1991.
- 2 McCormick B, ed. *Paediatric audiology 0-5 years*. 2nd Ed. London: Whurr, 1993.

Congenital Limb Deficiencies in Hungary. By A Czeizel, J Evans, I Kodaj, W Lenz. (Pp 420; \$54 hardback.) Akadémiai Kiadó, 1994. ISBN 963-05-6631-1.

Every month or two there is an article in one of the Sunday newspapers about the clustering of limb defects. The most recent scare concerned coastal areas. There was an extraordinary picture of several Russian children, all of whom had a deficiency of part of an arm – strangely enough all on the same side. All the children, we were told, came from an area to the north of Moscow. Most episodes of clustering go unreported and they are probably widely scattered. I remember, at a genetic outpatients clinic in the north of London, having to cope with five sets of parents who had met each other at the limb replacement centre in Roehampton and then discovered that their children had all been born within a six month period in a geographically small area in north London. They were clamouring for more research to be done and I lamely said that research in this area was difficult to do, an excuse which did not satisfy them. They left the clinic murmuring about pollution and why wasn't the government doing something about it.

The whole area of the causation of limb defects is confusing. The problem was recently highlighted by the explanation given in the press that the reason why thalidomide sufferers had given birth to children with the same limb defect was that somehow the drug had got into the genes and was making itself felt in the next generation. Much more likely

is that the wrong diagnosis had been made in the first place and that the limb defect was one of the known autosomal dominant conditions which can mimic the type of malformation well described in thalidomide days.

In order to look at trends, what is needed in the first place are good baseline figures for all the different types of limb malformations and there have been only a few studies which can be reliably referred to. The one outstanding study was that of Birch-Jensen in 1949, and the present study headed by Andrew Czeizel and his coauthors (including Professor Lenz, the acknowledged expert on thalidomide embryopathy), has addressed this task by studying limb defects over a 10 year period in Hungary. It is a register based study looking at malformations in general, and it has avoided the mistakes of other studies by differentiating between known genetic syndromes and single limb malformations and not counting each malformation in a single person as a separate entity. Professor Czeizel is a well respected expert in the field of malformations and ascertainment and diagnosis are reliable in his hands. Each single malformation is looked at in terms of the pregnancy history, possible teratogens, demographic features, family history, and many other parameters. There is a wealth of information in the book and it is one to refer to rather than to read. This is a book for the library shelf rather than for the office. Finally, I must confess that I was tempted to review this book only after looking at Professor Lenz's chapter on the history of limb defects. There are some extraordinary pictures and drawings dating back to the 16th century and Professor Lenz has suggested some diagnoses. Nothing changes, or does it, which is why Professor Czeizel has written this book.

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Secrets in the Genes. Edited by Peter Turnpenny. (Pp 226; £12.95 paperback.) British Agencies for Adoption and Fostering, 1995. ISBN 1-873868-16-2.

Practitioners in the field of adoption and fostering may find this book useful to stimulate discussion. It has been produced to inform care workers in all disciplines about aspects of genetics which may affect their clients. With recent advances in genetic diagnosis and prognosis, adoption workers may face searching questions from putative carers and from children themselves. The editor states that the book is not intended to be read through but to be 'dipped' into as a source of referral in particular situations. This is certainly true in that much of it is repetitive.

Three main sections try to cover the knowledge needed by different disciplines. The first gives examples of common questions often asked of health professionals, for example, how hair colour or intelligence are determined; the answers given are clear if a little simplistic. This section also attempts to deal with ethical considerations such as who has the right to the knowledge – this is discussed again in the final section. Section two provides an introduction to basic genetics and molecular inheritance of common disorders. The third section deals with screening and issues of confidentiality. There is a tendency throughout this book to present the same information, using different perspectives for different professionals. It could be used as a source of reference for brief explanations – detailed information would need to be obtained elsewhere. There is a useful glossary of index words for use as quick reference, and also a list of regional genetic centres.

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