

methodological problems of establishing the prevalence of disability in childhood. Failure to thrive appears, with variable degrees of authority, in three separate chapters.

Unfortunately, as a result of these limitations, I find it hard to see in which niche this book belongs. The style of presentation is too heavyweight to engage the interest of students, but is mostly not detailed enough to provide a reference text for practitioners. I would have liked it more if each chapter had drawn on the specialist insight of the contributor to produce thought provoking ideas, even if some subjects were not covered at all.

Being asked to review this book offered me the opportunity to offend, at one stroke, 52 eminent contributors. This has not been a welcome task. I wish I could have praised the book more, but ultimately I found it unsatisfying. Maybe the next edition will more effectively hit the mark.

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**Pediatric Sonography.** 2nd Ed. Edited by Marilyn J Siegel. (Pp 578; \$148 hardback.) Raven Press, 1994. ISBN 0-7817-0214-3.

What is the creaking you can hear so often walking down a hospital corridor these days? Perhaps the grating of the aging radiologist's apophyseal joints or the groan of the middle aged paediatrician's degenerating spine? It is much more likely to be the poor book shelves endeavouring to resist the constraints of gravity on an ever increasing 'volume' of diverse medical books. (Old George down the corridor has just got his third book on improbable diseases of the left adrenal.) I am not, as you may surmise, a great lover of medical textbooks, or keeping up with Dr Jones. I decided to approach this review in the same spirit as I might have viewed a rather unpromising evening at the theatre; perhaps an endless Jacobean tragedy or an earnest 20th century drama translated from the original Spanish. I had the idea that I could slip out after a crafty pint of interval Murphy's. As it was I willingly 'sat it out' to the final curtain, so why the enthusiasm?

First things must come first. How often does a textbook seem to let you down when you really want to know 'that certain something'? Information should be available: the commonly encountered conditions must have a depth of cover and the text must flow. I looked, for instance, at the section on neonatal cerebral haemorrhage and was pleased. It was a text that I could use when I want to revive the flagging memory, an aid to understanding the conditions and classifying them in a pragmatic fashion.

To say that text should inspire might provoke a coughing fit, but why should that be? There were some sections in this book that were a revelation. The account of ascitic flow would have graced an adult surgical book (though unaccountably this fascinating subject is often totally neglected). Similarly the text on the shoulder was rather better than in many an 'adult' book. Remember, if you can, the excitement of that 2nd MB lecture that gave an enticing view of what was to come and sent you home happy through glistening wet streets. All of us at some time have been fascinated by medicine and why should we not ask of a book that it stirs that memory; it should not be too much to expect.

So is this edition a volume too far? I certainly picked it up with a sigh. I did not seek conversion; it was thrust upon me by a light, uncluttered style. As one would expect there was something new to say about a reasonable number of things. Now where is the number of that friendly chap in the works department?

PETER CORNAH  
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**Pediatric Neuroimaging.** 2nd Ed. By A James Barkovich. (Pp 684; \$183 hardback.) Raven Press, 1994. ISBN 0-7817-9-0179-1.

There are few fields in medicine where the introduction of magnetic resonance imaging (MRI) has had such an impact on our understanding of disease processes as in the paediatric brain. The rapidity of this development is highlighted by the author in his introduction by the large number of new references cited.

While the majority of the book is concerned with the value of MRI, ultrasound in the neonatal period and computed tomography in certain circumstances are well covered. However, its strength is that throughout it correlates imaging appearances with clinical and pathological findings.

The chapter on normal brain maturation and development is particularly important. It provides both radiologists and paediatricians with reference standards for the rapid changes seen on MRI in the first 18 months of life.

Pathological processes are dealt with in a series of chapters covering toxic and metabolic effects, destructive lesions including hypoxic and ischaemia injury, congenital anomalies, and neoplasms. At each stage there are precise definitions of statements made and the interpretation and usage of these in the literature – not always the same. This provides a clear and concise understanding of what is meant by the various terms and titles given to appearances on imaging. The phakomatoses and the rare vascular diseases of the nervous system are dealt with in separate chapters. There is a useful chapter on hydrocephalus and disorders of cerebrospinal fluid flow dynamics including the complications of treatment, particularly valuable as it probably represents the single commonest indication for a paediatric brain scan that many general radiologists may be called upon to interpret.

The author and his colleagues are to be congratulated on producing a superb volume which will become a standard reference in paediatric neuroimaging. It should be available to both neuroradiologists and general radiologists when they come to interpret computed tomography or MR images of the brain in children and will be an invaluable source for paediatric neurologists and paediatricians.

This will not be a book that gathers dust in our department.

ANDREW J MOLYNEUX  
Consultant neuroradiologist

**Nutrition in Child Health.** Edited by D P Davies. (Pp 240; £19.50 paperback.) Royal College of Physicians of London, 1995. ISBN 1-86016-018-2.

One of the advantages of being asked to review a book for *Archives of Disease in Childhood* is that the reviewer is allowed to keep the book. Accordingly, I was delighted to be invited to review this particular volume as I had already decided to buy it. Now having read it, I can say that it has even exceeded my

expectations. Here in one small volume are covered the majority of topical issues in childhood nutrition. The nature of the subject, of course, is wide ranging and we find the nutritional issues explored across the range from those of the preterm infant to those of the adolescent. New research findings and the hypotheses generated from them are reviewed, and make this book a valuable learning resource in childhood nutrition. Recent data on the constituents of human breast milk and their relevance to the developing brain, together with the concept of early nutrition in programming various pathophysiological processes in later life are of particular interest. The nutritional aspects of managing specific diseases are covered and include renal disease, cystic fibrosis, and a useful contribution on children with cerebral palsy. For those of us who need guiding principles to help them through the quagmire of childhood food allergy and food intolerance, Professor Tim David's chapter (a 'taster' for his recent book on the subject) will make memorable reading. The national and international perspective is provided by an account of the nutritional issues pertinent to children in *Health of the Nation* and an overview of the nutritional needs of children in developing countries, which highlights the growing awareness of micronutrient deficiency in these areas.

This book is well written and authoritative, with contributions from acknowledged leading exponents in the various fields covered. Its practical size and format and easy readability should make it attractive to a wide range of health care professionals with an interest in the nutritional aspects of child health.

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**An Aid to the Paediatric MRCP Viva.** Edited by Alan Cade, Arun Shetty, and Tracy S Tinklin. (Pp 160; £16.50 paperback.) Churchill Livingstone, 1995. ISBN 0-443-05246-8.

Soon after my MRCP written examination my consultant threw me this book. Naturally I was grateful for his concern and generosity, but then found I was expected to provide an expert opinion. No matter, despite its gaudy yellow and mauve cover the book sold out in both Oxford and London in the following month, which illustrates the demand for such a text.

The book gives sensible advice about viva technique and provides a synopsis of subjects within the broad areas covered in the viva, many of which are not in conventional textbooks. It does this by providing model answers to frequently asked or topical questions. The model answers are written in the first person, and while initially I found this disconcerting to read, I found myself borrowing and practising slick phrases. The chapter on viva technique was the most valuable; general advice about structuring the answer, citing common examples first and giving phrases to substitute for 'I don't know' helped me prepare for ambush questions. The information used to prepare the book seems to be anecdotal, rather than based on a survey of examinees like a similar book for the adult examination. It would be useful to have included a longer list of questions as an appendix so one could practise the techniques.

Examiners may also find this book of value, but their reading may result in more hazardous questions or even higher expectation; for them I suggest a higher retail price.

The acid text – an uncontrolled trial proved successful (n=1).

M BARBOUR  
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**Clinical Paediatrics for Postgraduate Examinations.** 2nd Ed. By Terence Stephenson and Hamish Wallace. (Pp 212; £16.95 paperback.) Churchill Livingstone, 1995. ISBN 0-443-05226-3.

There will always be a market for a book which claims to assist success in examinations. Thus I predict that this book will be eagerly selected for purchase, but then will only add to the burden of lists and details to be memorised. This is my major criticism of the book: it gives nothing different, no spark to the ultimate drudgery of exam revision.

The aim of the book, however, is to summarise clinical methods, including differential diagnoses, at the level of expertise required for the MRCP and DCH clinical exams. In this it succeeds. It is a difficult task to be simultaneously all encompassing and succinct. The disadvantage of achieving this aim is that the text becomes small and the reading dry.

The book gives general instruction about the mechanism of the MRCP and DCH examinations, some general advice about

examining children (some of which seems superfluous, but I guess has to be stated: 'Never hurt a child ...'), and tables of typical long and short cases recently encountered in the exam. The bulk of the book describes examination techniques and lists clinical signs for each system. These chapters also contain more detailed sections describing conditions common in long and short cases, for example cystic fibrosis, chronic inflammatory bowel disease, the floppy baby, and the ex-preterm neonate. The layout includes a wide margin for extra notes.

A gap in the market is successfully filled by this book. It is indeed a 'pocket companion' for polishing exam revision. There is a more detailed Australian book available, aimed at a higher level for the FRACP exam. I found the Australian book easier to read and learn because of its wider layout and the inclusion of memorable cartoon diagrams, but then it doesn't fit in my pocket.

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**MRCP Part I Paediatric MCQ Revision Book.** By Ian Maconochie and Jo Wilmhurst. (Pp 231; £14.50 paperback.) PasTest, 1995. ISBN 0-906896-39-8.

The paucity of paediatric multiple choice

revision books for the MRCP examination makes this book valuable for the exam candidate. An added advantage is that, as a recent edition, the practice questions encompass recent advances in molecular and clinical technology which are prevalent in the exam.

The book is published by PasTest, a company running numerous intensive study courses for postgraduate medical examinations. From candidates attending the courses and subsequently sitting the exams, the company obtains information regarding past questions. Thus it is able to update and modify questions consonant with the maturation of the exams. Indeed on reading this book, the level and scope of questions seem well researched, well written, and appropriate – frighteningly lifelike. There are more than 300 questions, arranged by subject and followed by solutions, which include succinct and helpful explanations. For maximum terror a complete practice exam of mixed questions is also included.

As mentioned in the book, the MRCP part I exam is highly competitive because of its fixed pass rate. Practising as many appropriate multiple choice questions as possible is the best way to acquire the required competitive edge. Don't tell your friends about this book.

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