BOOK REVIEWS

Handbook of Paediatric Emergencies

Edited by G. A. BALOWIN

A Little, Brown Medical title, Edinburgh, 1989. 500 pp. £19.95

This is a small soft-back book, written by many of the consultants at the Children's Hospital in Vancouver. It has approximately 500 pages and 41 chapters.

The book provides extremely comprehensive coverage of all aspects of emergency paediatrics. This includes resuscitation of the newborn child, general resuscitation, medical and surgical emergencies, trauma and various other categories.

Despite the many different authors, each chapter has a very similar style and there is no unnecessary overlap in the content.

The book is written in the form of short paragraphs with bold headings. This makes it quite easy to refer to a particular aspect of the conditions described.

Some of the chapters contain very detailed descriptions of practical procedures such as intravenous access, intubation, chest tube insertion, etc. These provide very detailed lists of equipment needed and diagrams of the procedure and would be useful reading for a student who had never witnessed these procedures previously.

The book is generously sprinkled with figures and diagrams and there are several flow charts of management, which provide a clear indication of pathways of management. There are also several charts of paediatric values at different ages. These are extremely useful, as often this information is quite difficult to obtain elsewhere.

For the British reader one must bear in mind some of the differences in practise between those described in the book and those followed in this country. For instance, in the chapter on respiratory failure it is recommended to give the child a lignocaine infusion prior to intubation, which is rarely done here. There are one or two other controversial points, i.e. the recommendation is for crico-thyroidotomy as a primary procedure in case of difficulties in intubation, whereas it is likely in this country that a tracheostomy would be preferred.

A greater proportion of the chapters deal with the seriously ill child; the chapters on minor trauma, etc. are briefer and less comprehensive.

Each chapter has a list of key points at the end, which are often quite useful reminders about priorities and difficulties in management.

It is difficult to determine exactly whom this book is aimed at. The descriptions of practical procedures are very basic and would only be of use to a student, whereas some of the more complicated management decisions are those that

would be discussed by a very senior paediatrician. However, the book does contain a large amount of information, is well presented and contains some useful tables and diagrams.

At its current price of approximately £20 it is good value and I would recommend it as a purchase for any accident and emergency doctor or paediatrician involved in emergency care.

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Emergency Transport of the Perinatal Patient

Edited by MHAIRI G. MACDONALD

Associate Editor: MARILEA K. MILLER

Little Brown and Company: Boston/Toronto, 1989. 244 pp. £26.50

Up until 20 years ago much of the activity within special care baby units in the United Kingdom focused on keeping small babies warm, gavage feeding, monitoring and treating jaundice and hypoglycaemia. Most babies with progressively severe respiratory distress or recurrent apnoeic attacks died in spite of attempts to oxygenate them. Few realized the impact assisted ventilation would have when its use became increasingly popular in the 1970's. It stimulated scientific and technological advances in the field of blood gas monitoring, parenteral nutrition, and more recently in the neuropathological aspects of neonatal intensive care, including the widespread use of ultrasound imaging of the brain, and in some centres magnetic resonance, and near infra red spectroscopy. These advances have been paralleled by developments in fetal medicine, both diagnostic and therapeutic.

Most district maternity hospitals do not have a full range facilities for intensive care of the newborn. Only 1–3% of all newborn babies require intensive care and for many reasons it is sensible to concentrate these resources. Within most of the regional health authorities in England and Wales there are one or more large maternity hospitals which have taken on the role as regional referral centres to which sick newborn babies can be transported. Most of these centres also accept antenatal referrals of high risk pregnancies when a need for neonatal intensive care can be anticipated.

Under the editorship of Dr Mhairi MacDonald, with associate editor Dr Marilea Miller, and 31 contributing authors from the United States *Emergency Transport of the Perinatal Patient* addresses a wide range of issues relating to the regional organization of perinatal care. The clinical and technical aspects of maternal and neonatal transfer comprise about half of the text, the remainder being devoted to important sections on administrative, legal, ethical, and psychological issues.