

Dr Morley comments:

I appreciate the chance to comment on the letter from Dr Davis and Professor Sibert. They seem to have slightly misunderstood my paper, which was to share concerns about the difficulties and pitfalls with the published criteria for making a diagnosis of Munchausen syndrome by proxy and to suggest that the label is now unhelpful. Nowhere did I suggest criteria that could be used to protect children. I pointed out the difficulties with some of the present criteria that are being used. It is therefore inappropriate for them to say that children following my criteria may not be protected from abuse and could even die as a result. They suggest the term 'Munchausen syndrome by proxy' should be replaced with 'factitious illness spectrum disorder of childhood'. I don't think this is any better than Munchausen syndrome by proxy. I fail to see why we cannot describe exactly what is happening, that is, the mother is fabricating diarrhoea, or apnoea, or fever, or fits; or the mother is suffocating or poisoning her child.

With reference to the letter of Donald and Jureidini, I am sorry they feel I was overly defensive of parents and doctors. My intention was to point out the difficulty of making the diagnosis of Munchausen syndrome by proxy using some of the published criteria.

I agree with them that it takes two sides for Munchausen syndrome by proxy to take place – a mother fabricating or inducing illness and a doctor who misunderstands the problem. The doctors are involved in the creation of Munchausen syndrome by proxy by not recognising what is going on early and intervening to prevent it. I am sorry that they want to persist with the diagnostic label Munchausen syndrome by proxy, particularly as they cogently point out many of the difficulties with using this eponymous label.

subjects with no immediate relevance to what you or I would do in the clinic. This heterogeneity enhances the book but could be disconcerting to non-specialist readers, who may simply wish to know what to do in a given clinical situation.

Although it resulted in a minor degree of repetition, it was a splendid decision to include five chapters on surgical treatment in paediatric endocrinology. I guess no two surgeons would ever agree in detail about operative technique, but there is surely a consensus that operations on children should be carried out only by surgeons who have adequate experience of the particular procedures. The highlighting of how important surgeons are to children with endocrine disorders, by including these chapters, must help protect children from those doing occasional operative procedures.

Another good decision was to include a chapter on neuroradiology and many illustrations of abdominal ultrasonography. But I would recommend that, however good the key to a figure, there should be a small line drawing to the side of a scan clearly demonstrating the features; what is glaringly obvious to the radiologist can look to me like a part of the lunar landscape.

It was hard work carrying it around in order to read it between patients. But it meant that I had the book available in clinic, and so occasionally I could sneak a look at the next or previous patient's condition for enlightenment. It was not very useful.

Despite the title, this is not a book which can or should be used as a practical guide or clinical handbook. It is an excellent reference work which can be used as a take-off point for further study. Each chapter is exceptionally well referenced, with Magelone Forest winning a prize in her chapter on adrenal deficiency for including the most references (n=574)!

Charles Brook is to be congratulated on drawing together a tremendous international team who have produced a major text on paediatric endocrinology. I may occasionally disagree with some of the views of the editor but they are always expressed with simplicity and clarity. Charles Brook has had a major influence on the development of paediatric endocrinology in this country. The new edition of his book will undoubtedly continue to influence the study of paediatric endocrinology in other countries.

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SPRING BOOKS

Clinical Paediatric Endocrinology. Edited by Charles G D Brook. 3rd Ed. (Pp 807; £149.50 hardback.) Blackwell Science, 1995. ISBN 0-632-03632-X.

What a delightful surprise it was to find a copy of this book in my post, a gift from the editor. The only disadvantage was that I had to read all 800 pages in the summer's heat before composing a review; I recall a quotation that reading a book before review served only to bias the reviewer. However, I have stuck to my task.

Since the first edition of this text, the molecular biology revolution has struck and Charles Brook and his coauthors have tried to deal with its impact. This has been achieved by introducing completely new chapters which outline methodology and by modifying more standard areas of the text. This works very well and the result is readable, informative, and enjoyable.

A multiauthor textbook is inevitably a series of individual essays; those essays in this book are of two varieties, those with a traditional approach to clinical subjects, such as short stature and congenital adrenal hyperplasia, and those which deal with

Baillière's Clinical Paediatrics: Paediatric Gastroenterology. Edited by B S Kirschner and J A Walker-Smith. (Pp 235; £27.50 hardback.) W B Saunders Company, 1994. ISBN 0-7020-1866-X.

There seems to be an inverse law of usefulness which applies to textbooks: the larger a book is, the less likely it is to leave the bookshelf. There are very few exceptions to this rule, *Nelson Textbook of Pediatrics* is one, but very few of them are about paediatric gastroenterology. The one book in this field that I can honestly claim to have read with unalloyed pleasure is John Walker-Smith's medium sized monograph on diseases of the small intestine in childhood, so when I saw that he was one of the coeditors of this small volume (235 pages) in Baillière's Clinical Paediatrics series, my expectations rose.

The book consists of 11 chapters on some of the major topics of clinical paediatric

gastroenterology; all are by experts in their fields, all but one from either the UK or the USA, the exception being Martin Stern from Tuebingen. The multiauthor format has meant that the contents are up to date, even if they inevitably vary in style. Each chapter is independent of each other, with the basic science being included, and can be read in a reasonably short time.

The editors emphasise that this volume does not aim to compete with the standard textbooks of paediatric gastroenterology, but '... to select specific areas which would be of particular interest and importance to practitioners who care for children and adolescents'. Thus there are major omissions: while coeliac disease is discussed in the chapter by A D Philips and J A Walker-Smith entitled 'The role of small bowel biopsy in diagnosis', this important condition does not have a chapter to itself; similarly, while there is an excellent chapter on 'Oral rehydration therapy and its underutilisation', by Mamun Shahrier, there is no systematic section on infectious diarrhoeal disease.

If it does not claim to be a textbook, this little book contains much more useful guidance than many that do. Graham Clayden's somewhat immodestly titled chapter 'Optimal management of chronic constipation' gives a beautifully clear exposition of a problem that blights the lives of many children, and E Schmidt-Sommerfeld's section on gastro-oesophageal reflux gives similarly practical help, although UK readers may be surprised not to see any mention of alginate.

The casual browser who scans through the index of this book is likely to significantly underestimate its value, as several chapters have titles which give little clue to the gold nuggets contained therein. For example B S Kirschner's contribution, 'Recognizing inflammatory bowel disease', is much more than a chapter on the diagnosis of these serious disorders, it contains a crisp review of their management, and is sufficiently up-to-date to mention the recently described association between perinuclear antineutrophilic cytoplasmic antibody (p-ANCA) with ulcerative colitis and primary sclerosing cholangitis. Likewise Deirdre Kelly's succinct review of liver transplantation goes far beyond 'When to transplant the liver in childhood'.

J Timothy Boyle's article on abdominal pain certainly deserved a less turgid title than 'A new look at recurrent abdominal pain in children by subdivision of patients into symptomatic subgroups: simplifying the role of endoscopy in the diagnostic evaluation'. Other topics well covered are gastrointestinal motility studies (Milla), food allergy (Stern), gastrointestinal bleeding (Zien and Perrault), and home parenteral nutrition (Bisset and Meadows).

If any general paediatrician wants a quick refresher course in paediatric gastroenterology, this collection of essays will do very nicely, and the MRCP candidate who has already read the appropriate section of one of the general textbooks of paediatrics will gain more per unit hour of reading from it than anything else I can call to mind. If it is not in the hospital library, £27.50 would be well spent on it.

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Childhood Asthma and Other Wheezing Disorders. Edited by Michael Silverman. (Pp 516; £75 hardback.) Chapman and Hall Medical, 1995. ISBN 0-412-56900-0.