ministers of religion in handling the period immediately after death are covered. Much of this discussion centres on an unpublished study from the Foundation for the Study of Infant Deaths of 713 unexpected infant deaths, 470 of which were cases of sudden infant death. I hope that this study will also be published because it is a major source of information relevant to all who are concerned in any infant death. I was amazed at certain facts from this study and they make essential reading for all those concerned above and those in the Department of Health, who find it acceptable to provide a death grant of £9, representing 6% of the average cost of an infant burial. Though we are unable to prevent such deaths, it is just after the death that parents may be given some help, and the report from the foundation gives the good and the bad features of present practices.

The final part of this book looks towards the future. In the excellent sections on predicting which infants are at risk and attempts at preventing sudden infant death the defects are pointed out in the scoring systems that are *not* confined to the unexplained group of sudden infant deaths. The defects highlighted in the health visitor intervention programme—namely, ending a controlled trial before a significant result had been obtained and including sudden infant deaths that were explained—are important since this programme carries a suggestion that sudden infant death syndrome is due to parental mismanagement, in truth a rarity. The authors'

views on the use of apnoea monitors are well thought out and concisely presented.

The authors' conclusion that it may be more important to determine the mechanisms that are responsible for sudden infant death rather than attempt at this stage to prevent it will be appreciated by both parents and researchers. This is a most important publication at this stage in our knowledge. It is essential reading for paediatricians, family doctors, health visitors, researchers, policemen, and coroners and will provide the consolation for parents who have lost infants that in all but a few cases nothing could have been done to prevent their child's death and the hope that the disease processes that are responsible will be identified.

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Devastation in SE Asia

W C NOBLE

"What follows must (thus) be viewed against a background of few known facts and much speculation." This caveat in the introduction to one paper might well serve as a key text for the whole of *Herbicides in War*, which presents summaries of papers given at a symposium in Ho Chi Minh City on the botanical, zoological, and human problems resulting from the extensive use of herbicides during the second Indochina war (Vietnam war) of 1961-75. The existence of problems is not in doubt; it is the magnitude of the problems and the solutions that are unknown.

Although not the first war in which herbicides were used, the Vietnam war was the scene of their most extensive use. About 55

million kilograms of active herbicide in 72 million litres of spray seem to have been used over about 1.7 million hectares, or about 10% of South Viet Nam. Some areas were sprayed more than once, and about 200 000 hectares received three or more doses. Multiple applications were needed to achieve complete defoliation of the upper and lower tree canopies.

In botanical terms the result inland was widespread destruction of crops and forest and their replacement by poor grassland; regeneration has been held back by fires, usually of human provenance, which favours grassland at the expense of tree seedlings. The sudden dumping of nutrient as a result of defoliation resulted in

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nutrient and mineral loss, giving rise to impoverished soils. In coastal areas destruction of mangrove swamp has resulted in erosion, soil loss, and subsequent loss of coastal fisheries as crustacean habitat has been destroyed. Clearly, replanting such vast areas would be an impossible economic drain.

Zoologically there has been a general loss in the richness of the fauna, bringing some species near to extinction in the area, principally from the loss of habitat. Rodents and some ungulates have increased because of the extension of the grassland. Hunting such animals as remain has increased, particularly as a result of the arsenal of weapons left at the end of the war.

It is the human pathology that is most difficult to assess. The agents selected as herbicides were 2,4-D (2,4-dichlorophenoxy acetic acid), 2,4,5-T (2,4,5-trichlorophenoxyacetic acid), and dimethyl arsinic acid. In addition, smaller amounts of CS gas and the insecticide malathion were sprayed. Although there are some reports of acute medical problems following exposure to spray, the nature of the spray is generally unknown. Acute symptoms seemed more or less temporary and included dizziness, headaches, vomiting, diarrhoea, and upper respiratory symptoms such as cough and laboured breathing. Some deaths, especially of infants, were also associated with exposure to spray. Assessing the results must take into account that whereas 2,4,5-T was believed to be harmless, it contained as a contaminant relatively small amounts of dioxin, well known (and publicly so since Seveso) as a toxic agent. Even so, the

relatively small amounts of contaminant added up to about 170 kg. Dioxin and dimethyl arsinic acid might account for the immediate medical problems. In the longer term dioxin has been shown to be carcinogenic and teratogenic in laboratory animals; it is also mutagenic. There are indications that there has been an increase in primary hepatic carcinoma in civilians who were exposed to sprays. There may also be a war related increase in spontaneous abortions and molar pregnancies, but this is less certain.

In reading all of the book I was struck by the lack of previous experience on which to base conclusions. Not only was there no evidence of the long term effects of herbicide exposure on a particular habitat, there was no local "control" or "prior" data with which to compare after effects. There is no hard evidence on the proportion of forest that was originally covered with climax vegetation untouched by "slash and burn" agriculture, nor are there precise health records for the human population that was exposed to the variety of toxic agents.

Nevertheless, it is important that we should learn of what little is known and that we should learn from the effects of extensive use of chemical agents both on the habitat and on the humans who live in that habitat.

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