busy practitioners with standard-of-care reviews" for this fascinating but daunting branch of medicine.

Child and adolescent neurology is divided into three sections. The first deals with tools for diagnosis—history, examination, and investigations. The second and longest section contains chapters on a range of neurological diseases and disorders, such as the epilepsies, neuromuscular disease, and normal and disordered prenatal development of the nervous system. The approach is detailed and academic but not exhaustive. It aims to be pithy, and can sometimes be cryptic. It is salutary to realise the number of conditions for which a genetic basis has been discovered, but to be told the acronym of the gene involved without indication of the pathogenetic mechanism adds little. The third section deals with common problems such as coma, headache, and ADHD. Advice is usually sensible, sometimes controversial, and occasionally banal ("Patients with epileptic seizures may benefit from antiepileptic drugs"). Throughout the book there are boxes containing "nosologic diagnosis features", "pearls and perils", "key clinical questions", and advice about when to refer. The editor makes a feature of the nosologic tables, which aim to define a single discriminator for each condition, and devotes an appendix to explaining his approach. Unsurprisingly, this is successful when applied to inborn errors of metabolism, often not so good elsewhere. Most chapters are generously illustrated and have a selected bibliography annotated with indications of the main findings of research papers and pointers to the particular strengths of textbooks. There is in addition a complete list of citations. Generally the more recent references are up to 2003 with a few from 2004.

Current management in child neurology is also divided into three parts. Section 1 is headed "Clinical practice trends" and includes epidemiology, neurological examination, and a chapter on the internet in child neurology containing many useful addresses. Section 2 is "The office visit", with separate chapters on various aspects of childhood headache, epilepsy, behavioural problems, school readiness, developmental delay, and other complaints and conditions. The final section is on "The hospitalised child" and includes trauma, meningitis and encephalitis, status epilepticus, and other conditions, ending with brain death. An accompanying CD contains all the information contained in the book and is fully searchable with appropriate software. There are 98, generally short, chapters by 134 authors, each with "suggested readings"—selected and often impressively recent references, many from 2004, one or two even from 2005; and also a list of web based "practitioner and patient resources". The brevity of some chapters is achieved by subdivision. There are, for example, six chapters on various aspects of migraine, all by different authors. There is some repetition of information and some recommendations are controversial or anecdotally based. The target readership might perhaps be better defined. Medical students may find the information over-specialised and detailed. Although correct, more experienced doctors may find it tedious to be so frequently exhorted to take a history and examine the patient.

The editors of both volumes, as well as the vast majority of contributors, are from the United States. Does this mean the books will

be useful only to the American subspecies of paediatrician? There is certainly an American bias—in the drug names, in the more community orientated chapters, and in the distinction between office based and hospital based practice. In the UK at least, this does not translate directly into outpatients and inpatients or into community and acute care. It appears from some of the advice that the pace of consultations may be more comfortable there than here, and that the demarcations between paediatricians, neurologists, and psychologists do not fall in quite the same places. There are, of course, differences in epidemiology. Nevertheless, much of the medicine is generally applicable, and I found myself putting some of it into practice within a week.

So both books are interesting and useful. But the European reader in particular might want to taste before buying.

M Wheeler

Brook's clinical paediatric endocrinology, 5th edition

Edited by Charles Brook, Peter Clayton, Rosalind Brown. Oxford: Blackwell Publishing, 2005, pp 576, £165.00 (US\$290 (approx.)); €240 (approx.), hardback, ISBN 1405126558

Most areas of clinical practice have a long-standing tradition of reference textbooks which have been consulted by clinicians in search of advice about the investigation or management of a particularly tricky clinical problem. In this day and age of rapid advances in our understanding of molecular biology, most disciplines are developing at a dramatic rate and it is perhaps time to question whether there still remains a place for textbooks such as *Clinical paediatric endocrinology*. This perhaps is the explanation why only four years have elapsed since the publication of the previous edition. I must firstly confess a conflict of interest, being a longstanding fan of Brook's *Clinical paediatric endocrinology*, but does the new edition justify its continued existence?

In this publication, Charles Brook has been assisted by new editors whose interests in our understanding of the scientific basis of endocrine practice is reflected in excellent introductory chapters on hormone action, genetics, genomics, proteomics and bioinformatics and the clinical application of hormone measurement. These chapters will help bring the non-molecular biologist clinician "up to date" with the terminology and biology of endocrine physiology, an important prerequisite for practice in this field. Thereafter, is a series of chapters mostly rewritten by new authors which provide an entertaining mix of comprehensive reviews of the differing hormone systems of interest to the practicing clinician and monographs in specific areas at the exciting "cutting edge" of endocrine research such as monogenetic obesity and the endocrine consequences of critical illness. Of particular note compared to the previous edition is a new chapter to assist the clinician faced with a child with abnormal stature and obvious dysmorphic features.

Also, reflecting the impact of the "Barker hypothesis" on our understanding of the aetiology of illness in adult life, there is a chapter entitled "Endocrine programming and the fetal and early-life origins of adult disease". A weakness of the previous edition was the surprisingly small space devoted to the increasingly important subject of obesity. This has now been put right with two full chapters devoted to this topic, including a comprehensive overview of the metabolic consequences and their management. Finally, for those faced with uncertainties about how to investigate a child with an endocrine disorder, there is an update of a chapter on tests and normal values.

I have few criticisms of this book. It seems odd to have separated the chapters on development of the reproductive system and ambiguous genitalia and calcium metabolism and bone metabolism. The transition of care of children from paediatric to adult services is currently a "hot topic" in endocrine circles and it is disappointing that there is no section which addresses the potential models which could be used to overcome this potentially difficult area of clinical practice. However, these are relatively small quibbles in what is otherwise a comprehensive publication.

So, in summary, has the latest edition of *Brook's clinical paediatric endocrinology* as it is now called, succeeded in justifying its continued existence? For those seeking a readily accessible reference manual to introduce them to an aspect of paediatric endocrinology or to point them in the right direction in the management of a difficult endocrine problem in childhood, the answer is undoubtedly "yes". The editors and their authors, all of whom are recognised leaders in their field, are to be congratulated on their achievement in producing an interesting and readable overview of paediatric endocrinology. However, they have set themselves a hard task to maintain this level of excellence on a four year recurring basis to keep abreast of the advances in the discipline.

J W Gregory

Principles and practice of pediatric sleep medicine

Edited by S H Sheldon, M H Kryger, R Ferber. Elsevier, 2005, £40.99 (US\$70 (approx.)); €60 (approx.), hardback, pp 368. ISBN 0721694586

Paediatric sleep medicine in the United Kingdom is still in its development as a subspecialty compared to other countries, particularly North America. Whereas our practice in this area is largely related to disordered breathing in sleep, sleep physicians in the United States manage a wider range of problems, such as circadian rhythm or arousal disorders. This book addresses sleep medicine from this perspective, and is the paediatric version of a much larger adult sleep medicine textbook.

The book is written by recognised authorities from North America, and is composed of some 28 chapters, each of which is relatively short