

Reviews of Recordings

Neurological examination of the newborn. Recording by DR K. S. HOLT.
The College Medical Recording Service and Sound Library.

This is a clear and simple description, by tape and excellent colour slides, of the essentials of an examination which can be conducted by any general practitioner or midwife without the use of special techniques or apparatus.

Much emphasis is given to the necessity of familiarity with the normal responses and every test is clearly illustrated by photography. Deviations from the normal are then explained. Some indicate prematurity. Others can warn the practitioner, even in the first few days of the baby's life, of the presence of central nervous system lesions whether caused by congenital or acquired disease or by trauma.

The address, delivered in a clear strong voice, is orderly and precise, yet never dull. Adequate pauses are made for viewing the transparencies. This tape should be heard and the films seen by every practising obstetrician.

This is teaching at its best, attractive in presentation, easy to digest, giving lasting satisfaction and whetting the appetite for more.

Recent advances in renal disease. Recorded by DR OLIVER WRONG.
The College Medical Recording Service and Sound Library.

Although this recording at first gives the impression that a teacher is talking to a junior hospital doctor, it quickly becomes alive and interesting—even exciting in parts—to a general practitioner. Acute glomerular nephritis following infection by β -haemolytic streptococcus group A (type 12) becomes an indication for throat swabbing all contacts, examining their urines for albumen and red cells, and discovering unsuspected sub-clinical cases of the disease with the object of preventing chronic trouble.

The nephrotic syndrome is described and its treatment discussed. Acute pyelonephritis receives special mention as being found in five per cent of all pregnancies, but preceded by bacteruria before pyuria. Dr Wrong recommends laboratory examination of 'clean-catch urine' samples, as a routine precaution and states that a bacterial count of more than 100,000 per ml. indicates potential infection and should be treated with sulphadimidine which is effective as a preventive.

Dr Wrong goes on to discuss hypertension due to kidney disease, and renal calculi. He recommends sodium bicarbonate (6 G/day) to alkalinize urine when this is required. He finishes his talk by pointing out the value of a sodium supplement to a patient who has uraemia, when the failing circulation may be so improved that the kidneys are better able to perform their function and the uraemic state lightens.

This is a valuable recording.