

price of the book it seems unlikely that it will have a wide appeal for British general practitioners and students, in spite of the magnificent colour plates.

Paediatric Prescriber. PINCUS CATZEL, M.B., B.CH., M.R.C.P., D.C.H., R.C.P. & S. Oxford. Blackwell Scientific Publications, 1959. Pp. v + 244. Price 16s.

No. Do not pass this book by because you do not treat children, for it is safe to say that anyone who prescribes for anybody will find it of value, and some will find it invaluable. The reason is that in every case the adult dose is given as well as the dose for children of varying ages. The comments are freer than is possible in an official formulary like the B.N.F. but they are always helpful and usually very sound, though one might not always agree on which is the stronger or better preparation. The comments on toxic effects, dangers and antidotes are especially useful. In nearly every case, the form in which the drug is available is given, together with the strengths and the makers' names, though Burroughs Wellcome may not be pleased to see *migril* described as a pill. But such lapses are very few, and I did not detect a single mistake in the great number of detailed dosages given.

The book is pleasingly produced, handy in size, and all the drugs are classified according to their pharmacological action. It is both comprehensive and selective, though I am surprised that *somnos* is not mentioned along with chloral hydrate, for it is a most useful variant for children, while the solid modifications, *welldorm*, might also have been mentioned. Its practical and judicious character may be gleaned from the following two quotations, which are typical of the whole: "Blood should be regarded as a dangerous drug".

Phensuximide. Prop. (P.D.). Available as capsules (500 mg.). Used in *petit mal*. It is less effective than *troxidone*, but it also appears to be less toxic. Toxic effects include nausea, vertigo, drowsiness, headache, drug fever and rashes. Microscopic haematuria occurs. Periodic blood and urine analyses should be done. Dose (all ages): Start with 0.5—1 g. daily and increase by 0.5 g. every 2—3 weeks. Max. dose 3 g. per day. *Chlortetracycline* (*Aureomycin*) is said to potentiate *Phensuximide*.

Altogether this is a book to be acquired and used by every general practitioner and most housemen, while physicians and surgeons would also find much of value in it.