

of administration of inotropic agents in the first week of life in LBW infants.

There is still uncertainty about the effect of prenatal steroids on various extrapulmonary outcome variables. As the positive effect of maternal administration of steroids on neonatal respiratory distress syndrome has been repeatedly demonstrated, a randomised controlled trial approach to assess the effect of prenatal steroids on these extrapulmonary outcome variables is no longer ethical or feasible. However, prospective collection of these variables, as was done by both groups mentioned above, is still of clinical relevance, especially if we take into account that the large randomised controlled trial studies were performed in the 1980s and 1990s and therefore potentially only in part reflect the populations admitted to our present day units.

**K Allegaert, A Debeer**

University Hospital, Gasthuisberg, Belgium

Correspondence to: Dr Allegaert; karel.allegaert@uz.kuleuven.ac.be

doi: 10.1136/adc.2006.095943

Funding: the clinical research of KA is supported by the fund for Scientific Research, Flanders, Belgium by a clinical doctoral grant (A 615-KV-G1).

Competing interests: none declared

## References

- 1 Vural M, Yilmaz I, Oztunc F, *et al.* Cardiac effects of single course antenatal betamethasone in preterm infants. *Arch Dis Child Fetal Neonatal Ed* 2006;**91**:F118–22.
- 2 Dimitriou G, Kavvadia V, Marcou M, *et al.* Antenatal steroids and fluid balance in very low birthweight infants. *Arch Dis Child Fetal Neonatal Ed* 2005;**90**:F509–13.
- 3 Allegaert K, Debeer A, Cossey V, *et al.* Dopamine is not an independent risk factor for reduced amikacin clearance in extremely low birth weight infants. *Pediatr Crit Care Med* 2006;**7**:143–6.

## BOOK REVIEWS

### Intensive care of the fetus & neonate, 2nd edn

Edited by Alan R Spitzer. Published by Elsevier, 2005, £99.00, pp 1472. ISBN 1560535121

As I was on the look out for a good reference book on neonatology, this book crossed my path at just the right time. As a basic reference text it did not disappoint. I was particularly impressed with the good grounding it provides in fetal medicine as well as covering neonatal intensive care. Although on the whole I like the book a lot, it does not quite meet my expectations in terms of the comprehensiveness of its subject matter.

The book starts well with an interesting and informative history of fetal and neonatal intensive care. It then moves on to chapters covering fetal development, assessment, diagnosis, and intervention. These chapters, along with the subsequent sections on maternal factors influencing neonatal outcome and management of the high risk pregnancy, are a fantastic resource for those who, like me, are somewhat rusty when it comes to the intricacies of fetal

medicine. I enjoyed reading these chapters and am likely to refer to them repeatedly.

Logically enough, the text moves on to give a good, robust coverage of neonatal resuscitation and newborn examination. Following this, the lion's share of the book is concerned with neonatal intensive care. This is introduced by a rather hotchpotch mix of chapters on radiology, thermal regulation, and the evolving role of nurse practitioners, which have been squeezed in before the major chapters covering body systems. As an aside, this is not the only place in the book where the topic order might be felt to be slightly unusual or counter-intuitive.

The chapters on body systems give detailed coverage of all of the more common and important neonatal conditions. They also give important consideration to related topics such as different modes of ventilation (which are given a chapter each), follow up of the high risk neonate, nutrition, fluid and electrolyte physiology, and transfusion therapy to name a few. To complete the book, there are sections on surgical management of the neonate, which concentrate on general surgical care issues and urological problems, followed by a brief look at some epidemiological and ethical considerations.

At first glance, the book seems to be fairly comprehensive, but, on closer examination, I felt that there was less mention of several organ systems than I would have liked: there are no chapters specifically covering neonatal dermatology or orthopaedic problems, for example. I was also surprised to find several conditions notable by their absence. To confirm this impression, I looked up a random selection of conditions that I had encountered in the neonatal intensive care setting in the last five years. Conditions from this list that I did not find in the book included Edward syndrome (trisomy 18), CHARGE syndrome, epidermolysis bullosa, and osteogenesis imperfecta.

On the whole I really liked this book and feel it will be a useful addition to my reference collection. It probably caters better for those looking for a broad overview of fetal and neonatal intensive care than for those who want a more fully comprehensive text that includes less common neonatal problems.

C L Smith

### Congenital and perinatal infections: a concise guide to diagnosis

Edited by Cecilia Hutto. Published by The Humana Press, 2005, £70.00, pp 328 (hardback). ISBN 1588292975

Having been taught from an early and impressionable age that the first answer to most questions in neonatology is "infection", it is discouraging that, despite many years of advances in neonatal intensive care, the diagnosis and treatment of infection remains a considerable challenge. This is particularly true of the extreme preterm infant, whose improved survival is accompanied by an increase in nosocomial infections. Many units throughout the world have seen an extension of the antimicrobial repertoire as organisms become increasingly resistant to conventional broad spectrum antibiotics.

I approached this book with interest after a rash of congenital and acquired infections locally. The book is divided into two sections, the first tackling the sometimes baffling array of serological, immunological, and molecular tests simply but thoroughly. An excellent chapter on placental pathology reminds the reader of how much information this often overlooked organ can yield.

The second part of the book deals with specific infections, and the chapters are presented in a standard format which makes dipping in and out easy, despite the almost wall to wall text. The emphasis of this book is on diagnosis, but there is also considerable information on epidemiology, transmission risks, and clinical features of each infection. However, from a clinician's perspective, it is frustrating that the authors chose not to include the areas of management and outcome as they are "well detailed in many other sources".

Although the epidemiological emphasis is on the United States, the author extends appeal to the developing world, and chapters include the diagnosis of malaria, syphilis, and tuberculosis. In contrast, common bacterial infections are given little coverage, except a good chapter on group B *Streptococcus* and the controversies surrounding screening and treating. Disappointingly, the coliforms are dealt with in a single short paragraph, and coagulase negative *Staphylococcus* does not receive a mention, despite being the most common neonatal pathogen across the developed world. Moreover neonatal tetanus, which accounts for 7% of all early neonatal deaths world wide, is ignored. Instead two chapters are dedicated to the epidemiology and diagnosis of congenital lymphocytic choriomeningitis and dengue virus, of which there are only a few small case series in the literature.

The book is heavy on text with a few tables, and only two conditions are illustrated with poor quality black and white photographs. Priced at £75, colour photographs would have been welcome, particularly as the emphasis throughout is on laboratory diagnosis in conjunction with clinical signs.

The strength of this book is the diagnostic expertise and would undoubtedly be found most useful by microbiologists in the perinatal field. It provides good information on epidemiology, range of appropriate tests, risks to mother and fetus, and spectrum of clinical features. Such detail would be invaluable for those developing a perinatal microbiological service. However, this book will fall short in many perinatologists' eyes in not providing guidance on treatment and information on outcome, both of which could have been handled reasonably succinctly at the expense of some of the more exceptional diseases.

J-C Becher

## CORRECTION

doi: 10.1136/adc.2005.090670corr1

M E Abdel-Latif, B Bajuk, J Oei, *et al.* (*Arch Dis Child Fetal Neonatal Ed* 2006;**91**:F251–6). The author list for this paper should be: M E Abdel-Latif, B Bajuk, J Oei, T Vincent, L Sutton, K Lui, and the NICUS Group.