posture; and further that this change parallels all facets of a child's mental development. The authors then link praxia, gnosia and body image and by applying Piaget's theory seek to establish that their own scales of gesture are directly proportional to these three functions, drawing attention to copying in a mirror image fashion as opposed to later awareness of laterality although dominance may interfere with this development.

The gestures used were in two series, the first of 10 using the arm and then 10 using the hands and the second of 16 using the fingers; thirdly the child was asked to produce opposites. Five hundred and seventy children in state schools in Paris were examined initially, but after exclusions by age and also left dominance, 489 remained in the trial. Some had I.Q. tests but numbers and quotients are not given, 101 only were studied in the performance of opposite gesture, and 100 premature infants (now children of 4 to 6) and also some children with neurological disease were also studied.

Results (points obtained for each item) were expressed in a percentile scale (quartile). For the age groups of 3, 4 and 5 years a "motor age" could thereby be assigned, and conversely each gesture could be given a value proportional to its complexity depending upon the percentage of its correct performance. Where the results were compared with those obtained by other tests (for example right and left orientation, naming parts of the body, drawing a body, assembling a model) correlation was poor in general (somewhat higher for the age of 3) over three-quarters being below 0.5; the lower correlation being obtained between the "finger gesture" part and the others.

Correlations have not yet been calculated between "opposite" results and the other scales of laterality. These poor correlations raise the problem of the validity of all these scales and the authors' tests as well. However this method of testing is independent of other knowledge although the responses may influence each other.

The links between gnosia and praxia and body image have not been fully substantiated and although the authors have illustrated Piaget's hypothesis, its extension to particular functions of the mind needs probably further investigation.

On the whole, this is a very meticulous study specially the long part dealing with the qualitative analysis of results. Probably further studies, specially of the "opposite" items, could help in detecting children with specific laterality or even diplexia difficulties. This is the authors' aim.

Agnes Garfield.

Monographies de psychologie médicale appliquée à la neuropsychiatrie infantile. By L. Moor. Paris: L'Expansion Scientifique Française. 1962. Pp. 138.

The phenomenon of re-importation which is well known in commerce also occurs in the field of ideas and technique. The first part of this book is devoted by Mlle Moor to a review of tests suitable for or standardized on a French population. The country of Binet and Simon now draws heavily in the clinical psychological examination of its children on tests of American origin, not all of which are wholly appropriate for use in France. Indeed the transatlantic impact affects the language of the psychologist producing curious hybrids such as "Pour le culture-free test de Cattell"!

The author is properly critical of too naïve an acceptance of American procedures. In regard to Rogers' "test of social adaptation" she found no significant difference between the scores of a group of grossly maladjusted children and a control group of normals. Further, the normal French children when given a choice for desert island companions tended to choose members of their own family, which is scored in America as evidence of social maladaptation!

The second half of the book, devoted to clinical applications, is probably of more interest to the English reader. A series of interesting experiments and observations are reported. In dyslexic children Dr. Moor finds that the Porteus Maze scores may be higher than others and may be a guide to future progress. She demonstrates the fatiguability of unstable children, and prescribes short lessons. In the feeble-minded she was only able to find a "global" defect—in contrast with recent work on imbeciles by O'Connor. (Her theoretical tenets are somewhat old-fashioned; for her, perception and intelligence appear to be entirely distinct concepts.)

In investigating young hemiplegic children, Dr. Moor found that they did not suffer from aphasia if the lesion was present before the age of 3 years. She concludes that dominance is not fully organized before this age. She was unable to demonstrate a difference in the intelligence of those young patients with a right and those with a left hemiplegia.

The work emanates from the psychological laboratory of the Faculty of Medicine of Paris, of which Dr. Moor is head.

BRIAN H. KIRMAN.

Kinderpsychiatrie in der Praxis. Edited by E. Rossi. Basel: S. Karger. 1963. Pp. 85. DM.12. This small volume is number 9 in a series which