

of human infants and their parents (mothers mainly, but it is good to see fathers are not forgotten). The general quality of the papers is high and it is difficult to select individual ones for special comment. I found especially interesting MacFarlane's demonstration of the ability of six-day-old babies to detect by smell the milk of their own mothers, and the work of Kennell and his colleagues showing how deliberately increasing mother-child interaction in the first hours of the baby's life appears to be still affecting the relationship up to two years later. Applying some of the results reported here could almost certainly improve the satisfaction of being the parent of a young baby. The work to date cannot yet explain the mechanism of the long-term effects, nor how these effects relate to later frank psychopathology in either the child or its parents. Dunn particularly suggests that we have to be cautious about assuming that early difficulties must inevitably have harmful long-term effects. Nevertheless, the work reported here has brought us to the point where we have a clearer idea of the questions that need to be and can be answered. This book is a straightforward account of what must have been a stimulating and fruitful symposium. It is beautifully produced and appears to have been rapidly published, with very up-to-date references. The publishers claim that it will interest psychiatrists, developmental psychologists, and all those who care for mothers and infants at or after birth. This claim is fully justified.

STEPHEN WOLKIND

The Hyperactive Child. Edited by DENNIS P. CANTWELL. 1975. New York: Spectrum Publications Inc. Pp 209. Price £7.15.

Every new book which uses the descriptive term of hyperactivity as if it were a diagnostic entity confirms the belief that such a condition exists. This is not merely a semantic issue: the consequence of making a diagnosis of hyperactivity is usually the prescription of powerful drugs. Two hundred thousand children in the United States are currently receiving such drugs.

Cantwell's book contains a number of contributions by different authors. There is discussion of the diagnostic evaluation and the natural history and prognosis of the syndrome, and in another section there are discussions of 'neurophysiologic' studies and biochemical research. Medication is described in detail by Barbara Fish, who traces the steps through which the child progresses from Benadryl to chlorpromazine. It is small comfort that children do not usually need doses that are high enough to give serious toxic effects, such as on the liver, eyes and skin, which occur in adults.

Cantwell states that next to nothing is known about the long-term effects, good or bad, of the medications. Even more important is the statement that overactivity is a normal response. And yet, the symptoms by which it is identified consist of little more than behaviour which irritates parents.

In one of Cantwell's own contributions he describes as symptoms the complaints that parents make about children's unusual amounts of energy, and that they wear out shoes, clothes, bicycles, etc faster than other children. For good measure, he adds: 'fidgetiness, inability to sit still for any length of time, talking a great deal, and inability to keep his hands to himself.' It is no wonder that hyperactivity is the most common 'syndrome' currently referred to child psychiatric clinics in the United States. If it is a normal reaction, why is it treated as if it were a recognized syndrome with pathology in the brain tissues?

In spite of a number of cautionary statements which go some way to restore a sense of proportion, the total impact of the book gives support to those who accept complaints about children's behaviour as being the equivalent of symptoms of some organic disorder or constitutional anomaly. It would appear that the battle against the improper use of the descriptive term 'hyperactivity' has already been lost.

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NEUROPSYCHIATRY

The Psychological Effects of Concussion. By D. M. A. GRONWALL and H. SAMPSON. Auckland University Press/Oxford University Press. 1974. Pp 118. Paperback. Price £2.50.

The view has often been vigorously expressed that the post-concussional syndrome of headache, giddiness, difficulty in concentration, irritability and affective symptoms is due primarily to a wish for financial gain. Psychiatrists, who tended to believe what their patients told them, were never very happy with this robust dismissal of subjective symptoms. Increasing evidence from blood-flow studies and otological investigations supports an organic cause, as does the existence of patients whose symptoms persist despite their having no claim for compensation, or after settlement of such a claim. Dr Gronwall and Professor Sampson now report investigations which show a relatively persistent cognitive deficit after head injury. Appropriate controls for young patients with mild and severe concussion have been studied with the Paced Auditory Serial Addition Task (PASAT). In this test a recorded list of numbers is read to the subject who adds pairs of numbers such that each number is added to its predecessor. At