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- 6 Keifaber RW, Bach RD, McDowell JA. Nonsurgical treatment of *Haemophilus influenzae* pericarditis in an adult. *Am Heart J* 1984;108:168-9.
- 7 Duke M, Donovan TJ. *Haemophilus influenzae* pericarditis with cardiac tamponade. *Am J Cardiol* 1973;31:778-80.
- 8 Sheikh MU, Lee WR, Koh DS. Serial echographic development of apparent hypertrophic cardiomyopathy with biventricular outflow obstruction: documentation in *Haemophilus influenzae* pericarditis during hypovolaemia. *Am Heart J* 1981;102:1069-71.
- 9 Buckingham TA, Wilner G, Sugar SJ. *Haemophilus influenzae* pericarditis in adults. *Arch Intern Med* 1983;143:1809-10.
- 10 Baker AS, Eavey RD. Adult supraglottitis. *N Engl J Med* 1986;314:1185-6.

Correction

Diaphragm strength in patients with recent hemidiaphragm paralysis

In the paper by Dr CM Laroche *et al* (February 1988) errors occur on pages 172 and 173. In table 3 the figures in parentheses in the last two lines are SDs and should be under the cm H₂O not the % predicted columns. In table 4 the mean and SD figures should each move one column to the right.

Notice

J Levy scoliosis research scholarship 1988

Applications are invited for the J Levy scoliosis research scholarship from physicians, surgeons, and those in allied specialties, including those in training. The scholarship is intended for the use of graduates of British medical schools while working in orthopaedics or allied subjects in the British Isles. The scholarship is worth £15 000 and is to further research into scoliosis and in particular methods of early detection and prevention. The closing date for applications is 31 August 1988. Applicants should apply, stating clearly how they intend to use the scholarship and giving a curriculum vitae, to Mr John Dove FRCS, secretary and treasurer of the British Scoliosis Society, 31 Quarry Avenue, Hartshill, Stoke-on-Trent ST4 7EW.

Book notices

Lung Function in Children and Adolescents. A Zapletal, M Samanek, T Paul. (Pp 228; £79.60.) Basel: Karger, 1987. ISBN 3-8055-4495-2.

There are many reports on the results of lung function tests in healthy children and it would be entirely reasonable for a potential reader to ask whether there was a need for yet more normal data. I would claim that the data in this book by Zapletal and his colleagues are different from previous reports and do make a significant new contribution. The number of children and adults included is not particularly large—173. What is different is that the children were studied

with virtually all the techniques available for studying pulmonary physiology in cooperative children. These include all the standard measurements on standard spirometry, flow-volume curves, helium and plethysmographic static lung volumes, lung compliance, total pulmonary and airways resistance, gas diffusion, work of breathing, and physiological deadspace. Some data are included on the work of breathing in a small group of healthy young adults. Although this book does not provide all the information needed to set up the lung function techniques considered, Dr Zapletal and his group, who have perhaps contributed more to our knowledge of normal data on children than anybody else, have provided all the data on the methods used to define the exact circumstances in which these studies were carried out. Possible sources of error are fully described, the means and 95% confidence limits calculated, and the relationships of one measurement to another explored in considerable depth. The reference section is extensive and the latter half of the book contains 284 tables giving lung function data related to height, body surface area, and static lung volumes. I am sure that all those concerned in all but the most basic lung function measurements in children will find this book an invaluable reference source.—ADM

Essentials of Thoracic Surgery. Raymond Hurt, Michael Bates. (Pp 270; £24.50.) London: Butterworth, 1986. ISBN 0 407 00358 4.

This book of 300 pages provides a clear, comprehensive, and yet concise guide to thoracic surgery. There are introductory chapters which cover anatomy, physiology, development and congenital abnormalities. Other chapters review preoperative investigations and the techniques of endoscopy. The style of the book is didactic and certainly not all thoracic surgeons would agree with all methods of management, but such an approach produces a uniform and very readable text. There is no condition met by thoracic surgeons which is not covered in this book, which includes a chapter on subphrenic abscess. In many areas the book excels in providing clear, practical guides such as the techniques of thoracotomy and rigid oesophagoscopy. An outstanding feature is the high quality of the radiographs, which is unusual in a book of this size. It is, however, disappointing not to find clearer details of the management of chest drains and the handling of a postoperative air leak. Some discussion of methods of improving respiratory function before thoracotomy in those with marginal function would be welcome. At the end of the book there are sections on coronary artery surgery and