BOOK REVIEWS

Lymphogranuloma Venereum, by R. V. Rajam and P. N. Rangiah. Monograph Series ; No. 1. Supplement to *Indian Journal of Dermatology and Venereology*, Bombay, Vol. 21, No. 4.

Although no less than 9,721 new cases of lymphogranuloma venereum attended Prof. Rajam's department at the Madras General Hospital between the years 1933 and 1953, it is well to remember that the subject of this monograph is not necessarily a tropical disease and that in the past outbreaks have frequently occurred in temperate climates. Like syphilis, however, it is largely a disease of townfolk, and with the advent of many thousands of immigrants from territories where the disease is comparatively common it is likely that more cases than heretofore will appear in the clinics of our larger towns and cities. Thus the appearance of this monograph is timely and, though it is detailed, not to say exhaustive, it is eminently useful and practical. Past work is carefully reviewed (there is a bibliography of no less than 203 references), the various stages and manifestations of the disease are well described, and a clear account is given of the diagnosis of the infection and of its response to treatment.

The epidemiology of lymphogranuloma venereum presents baffling problems for, as happens in chancroid, asymptomatic female carriers of the virus abound in districts where the disease is common.

Though the photographs are well chosen and cover most of the manifestations of the disease, some of them are inevitably dated and it is hoped that these will be either "improved" or replaced in future editions. A copy of this monograph should be read and retained for reference by every practising venereologist.

G. L. M. McE.

Congenital Syphilis. (Lues connata.) By J. Oehme. 1956. Pp. 114, 51 figs. Thieme, Leipzig. (DM.26.)

The scheme for combating congenital syphilis in Leipzig introduced by the author in 1946 has proved successful. Altogether 238 children—of whom 155 were infants—have been treated for this infection at the Children's Hospital of the University in Leipzig during the period 1946–1954. From 1947 onwards, however, the number of new cases has decreased steadily; from 39 in 1947 to ten in 1954.

The scheme is based on the routine blood testing of all pregnant women, and it is thought necessary to treat every woman who has had syphilis during each subsequent pregnancy with a "prophylactic course" of 12 mega units penicillin irrespective of the duration of her infection, the amount of treatment already received, and whether her previous children are healthy. A persistently negative result of the blood tests is not

regarded as a contraindication, because 32 children with congenital syphilis were born to sero-negative mothers. Further, every child whose mother was not treated sufficiently for syphilis during pregnancy has to undergo a "preventive course" of penicillin as soon as possible after birth (600,000 units per kg. body weight), even although the child is completely healthy. So far 271 children have been treated in this way without any untoward effects. Apart from the fact that side-effects of penicillin treatment might become manifest later in life, one wonders whether it was possible in every case to convince the parents that their children were really free from syphilitic infection. The author himself admits that his scheme probably entails a large amount of "unnecessary" treatment, but he is of the opinion that the scheme is justified for the sake of prophylaxis and prevention.

The value of x-ray examination of the extremities in the early diagnosis of congenital syphilis is discussed at great length. Control examinations in more than 700 healthy infants—420 of them born to syphilitic and the remainder to non-syphilitic women—convinced the author that only the signs of the rarely encountered syphilitic osteomyelitis are pathognomic. Signs of periostitis and osteochondritis are not typical of congenital syphilis, because similar "pseudoluetic" changes can be seen in a large number of infants whose mothers were treated during pregnancy with bismuth (already previously reported by Caffey) or with arsenic; occasionally the same signs appeared in infants whose mothers had received penicillin. Signs of periostitis or of osteochondritis may also occur in infants with haemolytic disease, and in infants whose non-syphilitic mothers had toxæmia, diabetes, or a virus infection during pregnancy. This section dealing with radiological changes of the extremities is very well illustrated.

All children born to syphilitic mothers are kept under observation for 4 years and the high rate of permanent reversal of positive sera is taken as a proof that, for infants under one year, one course of penicillin is sufficient. In older children, penicillin treatment is followed by five combined courses of arsenic and bismuth. The pathological changes of the cerebrospinal fluid, which were found in eighty (68 per cent.) infants out of 117, were regarded as being of no clinical or prognostic importance. A warning is given not to use cord or retroplacental blood for serological tests, but the "spill-over" of maternal reagin to the child is not discussed. Most syphilologists will feel that in Leipzig the syphilitic mother and her children are overtreated and will only find the section on radiological changes of interest. This book shows, however, that in Germany, as in this country, much attention is given to the prevention of congenital syphilis.

A. F.