Syndrome of the month

The Syndrome of the month series in this Journal has proved both popular and durable since its inception in 1986, and over 60 conditions have been covered in the intervening years. Indeed, such has been its success that the former editors of the series, Dian Donnai and Robin Winter, have collated the articles (with others of relevance) into a book, shortly to be published by Chapman and Hall.

Professors Donnai and Winter have more recently gone on to found their own journal, *Clinical Dysmorphology*, and it seemed appropriate for us, as the new editors of Syndrome of the month, to take stock of the content and direction of the series. Clinical genetics has continued to expand rapidly over recent years, and concomitantly the quality of reference material available has improved markedly, in the form of some excellent textbooks¹ and computer databases.^{2,3} Hence there is a lesser need for "straight" descriptions of the better known syndromes. On the other hand, as clinical knowledge becomes more sophisticated, new disorders are delineated and the "lumping" or "splitting" of previously recognised syndromes is clarified. Our rapidly accelerating ability to identify the molecular defects underlying genetic disease allows a whole new level of classification, as well as providing fundamental insights into pathophysiology. Increasing use is being made of molecular cell biology, embryology, and animal models to shed light on human disease processes.

We hope that Syndrome of the month will be able to explore these growing points in medical genetics. We wish to encourage diversity and originality. We would therefore particularly welcome articles that address disorders from a fresh or integrated perspective, whether

it be clinical, molecular, or developmental (or possibly all three!). This might often take the form of an original observation made by the author(s), put into context by a wider review, and could (for example) describe a new or expanded syndrome delineation, provide an analysis of phenotype/genotype correlation in a particular disease, or discuss a pertinent experimental/animal model. Clinical photographs will remain an important element of the series and we would emphasise the importance of obtaining high quality pictures: too often a good review has been marred by poor illustrations.

We would welcome all proposals for possible contributions and encourage prospective authors to contact one or other of us for further guidelines before submission.

IAN YOUNG

Department of Clinical Genetics,
City Hospital,
Hucknall Road,
Nottingham NG5 1PB, UK.
Tel: 0602-627728
Fax: 0602-627711

ANDREW WILKIE

Institute of Molecular Medicine,
John Radcliffe Hospital,
Headington,
Oxford OX3 9DU, UK.

Tel: 0865-222619

Fax: 0865-222500

1 Gorlin RJ, Cohen MM, Levin LS. *Syndromes of the head and neck*. 3rd ed. Oxford: Oxford University Press, 1990.

2 Winter RM, Baraitser M. *London dysmorphology database*. Oxford: Oxford Medical Databases, 1994.

3 Bankier A, Marquet J. Possum: a computer/laser videodisk system for syndrome diagnosis and learning about syndromes. *Am J Hum Genet Suppl* 1991;49:28.