

LETTER TO THE EDITOR

Prenatal exclusion testing for Huntington's disease

Brock *et al*¹ advocate the use of common sense rather than sticking rigidly to the rules, a position I would normally applaud, but not in the context of prenatal exclusion testing for Huntington's disease. If it is common sense to give people good news they have not asked for because it would save CVS and unnecessary terminations, then it must follow that it is also common sense to give people bad news they have not asked for. If someone *knows* they carry the gene then this will have an effect on their plans to have children and we would be depriving them of the chance to make a properly informed decision. If people have decided not to make use of available information on themselves, then this decision must be respected. It is arrogant and dangerous for any of us to think that we know what is best for them, however tempting that may be. Have Brock *et al*¹ taken into consideration the fact that some people have bad reactions to good news, or feel they would lose some advantages by no longer being at risk? It may be unavoidable in some cases for clinicians to know more than their patients, especially where other family members are coming forward for testing, but at other times they could ensure that the laboratory only gives them the information they ask for, and this could save a number of ethical dilemmas.

SHIRLEY DALBY
Association to Combat
Huntington's Chorea,
Family Services,
108 Battersea High Street,
London SW11 3HP.

¹ Brock DJH, Curtis A, Mennie M, Raeburn JA. Options for prenatal testing for Huntington's disease using linked DNA probes. *J Med Genet* 1990;27:68-9.

BOOK REVIEWS

Garrod's Inborn Factors in Disease. C R Scriver, B Childs. Oxford Monographs on Medical Genetics 16. (Pp 248; £25.00.) Oxford: Oxford University Press. 1989.

The heart of this book is a facsimile reprint of Sir Archibald Garrod's last book originally published in 1931. This is sandwiched between a prologue, 'Garrod in context' and an epilogue 'Genetic predisposition after Garrod' together with two bibliographies, one of Garrod's writings and the other of articles about him. (Gowland Hopkins wrote no fewer than three obituaries.)

The term 'inborn error of metabolism' coined by Archibald Garrod has now become so commonplace that it is difficult for us to remember how startlingly original was his thinking. At the time, disorders such as alkaptonuria were still thought to be caused by a gut infection that disturbed the metabolism of tyrosine. It was Garrod's careful studies of families with patients with alkaptonuria and other metabolic disorders that led him to the concept of an inborn error. These studies also raised the question of why do some people develop certain diseases. Garrod proposed that the predisposition was often genetically determined and he referred to it as chemical individuality. This book is an exposition of his hypotheses and he uses a wide range of diseases to illustrate his ideas, including infections and immune deficiencies, metabolic disorders, atopy, and dysmorphic syndromes. His analysis of the problems and the anticipation of future developments is astonishing. He recognised that all genetic information was encoded on the chromosomes, predicted that the chemical basis of the variation would be expressed in proteins, and that the effect of the genetic defect would either be the failure of a normal process or secondary to the accumulation of toxic metabolites.

In the concluding chapter Garrod casts some doubt on his hypotheses stating that "in fifty years a still more ample knowledge will doubtless displace many of our conclusions". The advances in molecular genetics

have, of course, amply confirmed rather than refuted his work. This is a fascinating book, well written in graceful prose, and the extra chapters help to put the whole work into its context. I can warmly recommend it as it provides a remarkable insight into Garrod's genius.

J V LEONARD

Handbook of Normal Physical Measurements. Judith G Hall, Ursula G Froster-Iskenens, Judith E Allanson. (Pp 504; £25.00.) Oxford, New York: Oxford University Press. 1989.

The book is described as an easy to use pocket book, which provides a collection of reference data on physical measurements for use in clinical assessment of children and adults with dysmorphic syndromes. This is a rather dry description of what is a very user friendly book with reference data and much more. Each section begins with a useful definition of the measurement of the particular body part, and the best way to obtain this. Diagrams and helpful hints are included as necessary, followed by appropriate graphs, tables, and references. Many sections include a brief embryological summary.

There is a wealth of information, not just on linear measurements of body parts, but on birth marks, dermatoglyphics, bone age, prenatal measurements, placentaion, and growth charts for certain genetic disorders.

My guess is that every clinical geneticist will obtain a copy for personal use, all hospital and community paediatric units ought to have one, and that it will be very widely used as word spreads of its existence.

One criticism—it doesn't fit into my pocket; nevertheless, to borrow a phrase from at least one of the authors "it's a real neat little book".

DIAN DONNAI

Molecular Probes—Technology and Medical Applications. Ed Alberto Albertini, Rodolfo Paoletti, Ralph Reisfeld. (Pp 316; £112.50.) New York: Raven Press. 1989.

This volume contains papers presented at the three day International Sym-