Journal of

MEDICAL GENETICS

Notice to Contributors

Papers, which should be in triplicate and in the Vancouver style (*Br Med J* 1982;**284**:1766–70), should be sent to the Editor, *Journal of Medical Genetics*, BMA House, Tavistock Square, London WC1H 9JR. Papers from the USA can be submitted to the North American Editor, Dr P M Conneally, Department of Medical Genetics, James Whitcomb Riley Hospital for Children RR129, Indiana University Medical Center, Indianapolis, Indiana 46223, USA. Submission of a paper will be held to imply that it contains original work which has not been previously published. The signature of each author is required on the covering letter. Permission to republish must be obtained from the Editor.

Papers should conform to one of the following categories.
Original contributions on clinical or laboratory aspects of medical genetics in man and on related animal studies.
Case reports or family reports with particularly instructive clinical or genetic features: to be no longer than 1000 words, with no more than three figures, one table, and eight references.
Short reports: to be no longer than 500 words with a clinical photograph and partial karyotype, if appropriate, and no more than three references.
Review articles will generally be by invitation, but suggestions from authors wishing to prepare a review article will be welcomed.
Short communications and *Technical notes* will also be considered.
Letters to the Editor in relation to papers and to other relevant topics will be welcomed.

Publication of papers thought to be of special importance may be expedited.

SI units should be used. All contributions should be accompanied by an abstract or structured abstract giving the main results and conclusions. Typescripts should be double spaced with wide margins. One page proof will be sent to the author submitting the paper and alterations on the proof, apart from printer's errors, are not permitted. Reprints may be ordered when the proof is returned.

Figures should be kept to a minimum and should be numbered consecutively in Arabic numerals. Legends should be typed on a separate sheet. Photographs should be on glossy paper and diagrams should be drawn on stout white paper. Photographs of karyotypes do not reproduce well. Chromosomes should be cut out and stuck onto stout paper. Any lettering should be indicated on a separate transparent overlay.

Tables should not be included in the body of the text, but should be typed on separate pages and numbered with Arabic numerals. A legend should be provided.

References should conform precisely to the style current in this Journal. Authors are responsible for the *accuracy* and *completeness* of their references as these will not be checked by the Editorial Office.

Some notes on nomenclature can be found in *J Med Genet* 1991;**28**:72.

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reports surgical complications and management with a section on spinal disorders followed by the techniques and results of leg lengthening. The final papers deal with social and psychological aspects of the disorder.

The first third of the book and the final papers on social and psychological aspects are principally of interest to paediatricians, clinical geneticists, and basic scientists interested in the skeletal dysplasias, and there were many distinguished speakers at this conference. However, there are papers dealing with the principles rather than details of surgery which make interesting and useful reading for the non-surgical specialist. (These 'details' are now four years out of date and would need to be read today with this fact in mind.)

It is uncommon to find this multidisciplinary approach and the book should be on the shelves of clinical genetic libraries as an example of what can be achieved. Many of the problems discussed here are relevant also to other types of skeletal dysplasia where short stature is a major feature.

The book is neatly produced, with illustrations of which some are excellent and nearly all adequate for their purpose.

RUTH WYNNE-DAVIES

Epidermolysis Bullosa: A Comprehensive Review of Classification, Management and Laboratory Studies. Eds G C Priestley, M J Tidman, J B Weiss, R A J Eady. (Pp 198; £20·00.) Crowthorne, England: Dystrophic Epidermolysis Bullosa Research Association. 1990.

This paperback contains the proceedings of a meeting held in January 1989. There are 43 chapters and 53 named contributors, providing a very wide review of many different scientific and clinical aspects of epidermolysis bullosa. The book is clearly printed with scattered black and white illustrations.

The main difficulty with using and reviewing this book is that attempts by the editors to impose some logic on the order of the chapters is frequently sabotaged by subjects suddenly appearing at inappropriate times. Reviews are muddled in with clinical reports and different aspects of counselling are scattered throughout the book. If you persevere, however, you will be rewarded by several excellent scientific reviews of the state of laboratory research and many practically helpful guides to different aspects of clinical management.

All involved in the medical and nursing care of patients with epidermolysis bullosa may benefit from the specific advice given about the management of dental problems, dysphagia, and constipation. The importance of adequate nutrition is stressed. Special problems of anaesthesia, physiotherapy, and management of eye problems provide useful practical tips. The review by Tidman on the occurrence of malignancy in epidermolysis bullosa gives an important message, reminding doctors and others caring for these patients to be aware of this potential complication. I particularly enjoyed Atherton's thoughtful account of the meaning and medical responsibilities of counselling and his reviews on neonatal management and the lack of progress in effective systemic treatment.

The case reports published are of variable quality. Some are very short, but enlivened by the discussion transcripts. There are some excellent scientific reviews, in particular a closely referenced article by Fine on the significance of basic membrane related antigens in epidermolysis bullosa and that by Bauer *et al* on the role of proteinases. The two chapters by Paavonen *et al* on the measurement of creatine kinase and lactate dehydrogenase could have benefited from a more detailed discussion of the importance of this area in the understanding of epidermolysis bullosa. The final chapter is the proceedings of a session entitled 'Recent advances and future opportunities', providing a compact but useful 'state of the art' summary.

Chapters on the classification of epidermolysis bullosa, counselling, prenatal diagnosis, and the role of the geneticist in epidermolysis bullosa provide information of specific relevance to the clinical geneticist.

DEBRA should be congratulated on organising the conference on which this book is based and the editors for making the information given at the conference widely available.

ANDREW Y FINLAY

NOTICE

The 8th International Congress of Human Genetics

This Congress, sponsored by the American Society of Human Genetics, will be held on 6 to 11 October 1991 at the Washington Convention Center in Washington, DC. The deadline for receipt of abstracts is 1 April 1991. For abstract and registration forms or additional information, contact: M Ryan, Meetings Manager, ICHG, 9650 Rockville Pike, Bethesda, MD 20814, USA. (Tel (301) 571–1825; Fax (301) 530–7079).