
This booklet records a lecture given at the Institute of Orthopaedics, and repeated at other institutes of the British Postgraduate Medical Federation, to help its students in the preparation of papers. Of great experience, Dr Beet gives much guidance in searching the literature, arrangement, quotations, illustrations, references, presentation and style. This useful introduction to a large subject is commended to all prospective medical writers.—H. Jackson Burrows.


Miss Dunson's book, "The Educability of Cerebral Palsied Children," is written primarily for those directly interested in this highly complex educational problem, but it has an appeal to a much wider professional and lay circle. In considerable detail, Miss Dunson has reviewed the etiology, classification and complications of cerebral palsy with particular reference to the influence that the two main forms have on intellectual development. The high incidence of mental retardation among those with cerebral palsy, coupled with the frequently associated defect of speech, sight and hearing, and occasionally also of emotional stability, retards normal scholastic progress, so that the task presented to the teacher is often formidable.

In a report of this type and scope, it would be unusual if several controversial points did not arise. There are several conclusions which will not receive a universal acceptance. 1) Miss Dunson suggests that the dual-purpose schools have failed to justify their claims. Is such a conclusion justifiable on the evidence produced? Failure by one, or even two, schools to show appreciable improvement in their pupils may justify a demand for the trial of different methods, but hardly a condemnation of the entire project. In all dual-purpose schools, the staff must be selected with due regard to personality and temperament as well as to educational attainment, since the work of a school can be ruined by lack of collaboration or understanding between teacher, therapist and scholar. It is only when interest, sympathy and understanding exist between pupils and staff members that the best results will be obtained. The child with cerebral palsy is sensitive to atmosphere, so that strife, or lack of interest in the staff, breeds similar indifference in the pupil. 2) The view that "Among cerebrally palsied children, formal education is unlikely to produce any very satisfactory response, if begun much before the age of about nine years" will not be accepted by many teachers, nor will the experienced orthopaedist agree that physical instruction should hold the centre of the platform until the child is nine, to be replaced in part, or in whole, thereafter by academic pursuits. To accept such a conclusion is to ignore the decided physical improvement that does occur pari passu with intellectual progress, even in the absence of all physiotherapeutic care. Several years ago Perlstein drew attention to the non-physical benefits of physical therapy, and, more recently, Carlson has shown that in a somewhat similar manner there are benefits to be obtained from education that lie outside the academic field. The treatment of cerebral palsy is prolonged and calls for many remedies, each contributing its quota to the betterment of the child, one taking precedence over another only where special needs demand it. 3) Many speech therapists of wide experience hesitate to dogmatise so decidedly on the influence of laterality and eye dominance in its effect on the development of speech and training. Other dual-purpose schools in Britain have not been able to support these views of Miss Dunson which were first suggested by Phelps. It would have been of interest to know on what number and series of tests Miss Dunson determined laterality and how long each case was observed. She rightly divides eye dominance into three groups of right, left and intermediate; yet, when handedness is considered, she ignores an ambidextrous group. This is surprising, because handedness and the ability to concentrate and so benefit from instruction are so often related: the child with a "butterfly attention" is frequently ambidextrous. Although Miss Dunson's figures indicate the number of children reviewed under each section, she does not state clearly in the text the basis of selection. As the number of cases varies from chapter to chapter, one assumes that in each the children were selected for the specific disability reviewed. Percentages calculated on such a selected group do not give a true indication of the frequency of each specific disability in the cerebrally palsied