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# DISEASES OF INFANCY AND CHILDHOOD

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## PREFACE TO SECOND EDITION

PREPARATIONS for a second edition of this book were far advanced in 1939 when war brought to nothing contributions representing months of hard work. Difficulties in publishing prevented another start until some years after the end of the war, and by that time some of the distinguished contributors to the first edition felt unable to rewrite their sections for the third time. The others settled down yet again to the task of revision, and fresh authors rewrote sections which had been planned by their predecessors—perhaps a more difficult task than starting anew. By the end of 1950 most of the manuscripts had been submitted, corrected, and transcribed into galley-proof, when the sudden and unexpected death of Leonard Parsons brought the work once more to a halt. Because it was unthinkable that the years of labour which the writing had entailed should be wasted, it was decided that publication should proceed, and that the book should be dedicated to the memory of the man who had been its inspiration.

With proof reading so far advanced it may reasonably be wondered why there should have been such a long delay in bringing the book into being. Unforeseen difficulties quickly became apparent. Leonard Parsons gave contributors a large measure of liberty in planning and writing their articles, and then by using his extraordinarily wide knowledge and the powers which made him such a successful editor, he would mould the various parts into a unity. If there is unevenness in the standard of articles in the medical section of this edition it is because we have lost his guiding hand. We knew little of his plans for the book; they existed in his mind alone. One voluminous and profusely illustrated manuscript, an outstanding work on paediatric haematology, was a book in its own right. How it fitted into Leonard Parsons's scheme we did not know, but in our view it was quite disproportionate to the scope of a general paediatric textbook, and reluctantly we decided to reduce the contribution to a shadow of its former glory.

While this task was being completed, in 1952, long-suffering contributors were invited yet again to correct their sections. Once more the passing of the years had thinned the ranks of writers, and fresh authors were brought in to fill the gaps. Since the 1952 correction the editors have taken advantage of the publishers' willingness to allow, until as late as possible, alterations necessary to ensure an up-to-date text. Fresh knowledge is accumulated all the time and, since even the medical journals find it difficult to keep abreast of the times, it is scarcely to be expected that this book will in all respects be up to date when it reaches the book-shelf. But basic principles do not change and there is an enduring quality of greatness in many of the contributions which form this book.

The text has been written very largely by clinicians and it is intended for clinicians. The preface to the first edition pointed out that 'In any book which is a compilation of articles written by various authorities, some degree of overlapping is difficult to avoid. The editors . . . have deliberately encouraged this feature where they felt that differing but

essential aspects of the same subject have been presented by different authors.' This policy remains unchanged, and, because it is often necessary to read the views of several contributors in order to obtain a complete picture of a subject, it is essential for the reader to make full use of the index.

Finally, it is a pleasure to pay our tribute to all those who have helped us. If names have been omitted from the list we ask forgiveness, for we owe so much to so many. First we thank the contributors, and those whose task it has been to revise the work of others. Their patience must have been tried to the uttermost by delays and repeated demands for revision, but they have never grumbled and have given consistently of their best. The publishers have shown wonderful forbearance as change has been succeeded by change; they have cheerfully accepted suggestions and corrections at every stage. In particular the gentle obstinacy and wise counsel of Mr. G. T. Hollis, M.A., Medical Editor of the Oxford University Press, prevented us from translating into immoderate haste an anxiety to get things done. Professor A. C. Frazer and Professor J. M. Smellie revised Leonard Parsons's article on Steatorrhoea, and in the task of editing the article by Drs. Smallwood and Baar we received untold help from Professors F. M. B. Allen, N. C. Capon, W. F. Gaisford, W. Vining, and A. G. Watkins, and from Doctors E. C. Allibone, W. H. P. Cant, S. D. M. Court, J. D. Gerrard, A. Maitland Jones, S. Oldham, R. M. Todd, O. Wolff, and B. W. B. Wood. Miss M. Pennington and Miss F. M. L. Parkes gave invaluable secretarial help.

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IN MEMORIAM  
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THE sudden death of Leonard Parsons in 1950 when this second edition was in an advanced stage of preparation came as a grievous loss to British paediatrics, and caused further delay in the appearance of these volumes which had already been held up by six years of war and the difficulties of publication in the succeeding years. To him this book was a labour of love and never far from his mind.

He was one of the foremost of the small band of paediatricians who, in the years between the two wars, by their studies and research into child life, were responsible for a completely changed outlook on the problems of child health and nutrition. A new specialty was born at their hands. This new knowledge was rapidly absorbed into the national life by a public faced by a dropping birth-rate and the memory of the ravages of war. Child life became infinitely precious after the careless abundance of the Victorian era.

A short time after qualification in 1903 he became house physician at the Hospital for Sick Children, Great Ormond Street, and came under the influence of Still, then engaged in studying the problems of coeliac disease and congenital hypertrophic stenosis of the pylorus. This contact and the inspiration he thus received seemed to focus his main energies on to the clinical problems of childhood, and gave a bent to his life's work which grew with the passing years.

He was a tremendous worker, and was most painstaking and meticulous in all that he undertook. His steady application enabled him to carry on with his clinical work in hospital and in practice, to undertake research, and to set out the results of his work in numerous papers and lectures. At the same time he accepted wide responsibilities of an administrative nature. This was especially so from 1939 onwards, when the war and the post war period made great claims on his energies and revealed qualities hitherto hardly tapped.

As Hospital Officer in the Emergency Medical Service he was *persona grata* to the whole profession in the Midland region, and his personality and wisdom were invaluable in settling the many difficult problems arising from the disturbance of those difficult times. After a period as sub-Dean he became Dean of the Faculty of Medicine of the University of Birmingham, a post which he held till his death in 1950. Here he was faced with all the difficult problems falling to the head of a great medical school in the

period of unrest and rapid growth in the years immediately succeeding the war.

These duties gave him a wide range of administrative experience and made him known and trusted amongst those who worked with him in bringing about fundamental changes in the medical services for children which hitherto lacked cohesion and received insufficient attention in the curriculum.

The ideal which he had in front of him is best seen in his attempt from 1930 onwards to form an Institute of Child Health in Birmingham. This involved the fusion of the curative and preventive services provided by the University, the Children's Hospital, and the City Council, and was the subject of prolonged negotiations until its successful emergence in 1945. The Council of the Institute, which represents the three bodies principally interested, is responsible for co-ordinating a complete children's health service for the City. In this scheme he saw his ideal brought to life in his home city, and it was the first complete scheme in the country.

He paid several visits to the United States of America and to Canada from 1925 onwards. He delivered the Rachford Memorial Lecture at the University of Cincinnati in 1931 and the Blackadder Memorial Oration before the Canadian Medical Society in 1946, and became well known in the world of international medicine. He was Vice-President of the International Paediatric Congress at Stockholm in 1930 and his growing eminence did much to enhance the reputation of British paediatrics.

The recognition of his prominent position in our national life by the bestowal of a Knighthood in 1946 was widely acclaimed by his friends and colleagues, and his pleasure in it arose from their sincere approbation of the honour.

Of the many signal honours that came to him, however, none gave him greater pleasure than his election as a Fellow of the Royal Society in 1949. It is a rare distinction for a medical man to achieve, and he felt rightly that it honoured not only his Medical School, but the whole profession.

His was truly a life of service, and the personality of the man shines through all his work and makes it great and memorable, not only for his contributions to clinical medicine, but also for his services to medical education and the happiness and well-being of the community. Speaking as one who knew him intimately from his student days to the time of his death, I find it easier to recognize the truth of the picture of his personality and character drawn by another than to set it down myself. One may live too near a man to get his outstanding qualities into true perspective. Under these circumstances I am constrained to end with the words of another colleague, Professor Smellie, because I cannot better them: 'He had a gentleness, a kindness, and a tolerance that remained unblemished and was never altered by the many awards and recognitions of his eminence. He remained a simple and a humble man, in some ways shy and retiring, and he never sought publicity. He never allowed himself to be ruffled or hurried,

but remained calm and imperturbable whatever the circumstances might be. His high moral character, his earnestness of purpose, and his scrupulous honesty and open-mindedness endeared him to all and won many to his side. At the same time Parsons had vision and imagination, and his opinions were always practical although fundamental principles were uppermost in his mind. He had determination to accept nothing but the best, and having so made up his mind, he would strive to achieve the objective and could be a forcible and powerful opponent to compromise. His mind was clear, quick, and lucid ; he had a very retentive memory and his powers of concentration were nothing short of remarkable. He had a flexibility of intelligence, vigour, and energy which were intrinsic features of his genius. He was a deeply and earnestly religious man, and would never stoop to any action that might even appear to be mean, underhand, or unjust.<sup>1</sup>

SEYMOUR BARLING

<sup>1</sup> Smellie, *Archives of Disease in Childhood*, 1951, xxvi. 125.

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