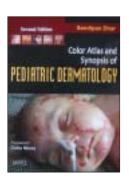
## Color Atlas and Synopsis of Pediatric Dermatology

## Sandipan Dhar

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Since its publication in 2003, this primer on pediatric dermatological diseases had immensely benefited a very large number of practicing dermatologists, dermatologists-in-training and practicing pediatricians. I myself found it extremely useful as a quick reference guide to a variety of common pediatric dermatological problems that I experienced in practice.

The book under review is its second edition and is even better. There are three new chapters and sixty new entities. All in all, there are 552 color illustrations providing significant clinical detail, and some new ones are seen in this edition. The accompanying text is crisp and concise. This lovely book, indeed, epitomizes pediatric dermatological diseases as they are prevalent in India and reflects the large amount of first-hand clinical experience that the author had amassed over the years practicing as a pediatric dermatologist. The print and paper are of excellent quality.

What I truly liked about the book is its Indianness, with a bit of Indian English thrown in here and there for good effect (deliberately, I suppose!). Sample: in maximum cases the baby often die. I am particularly pleased with the emphasis that was given to the varied presentations of clinical entities in the non-white skin of the kids we often see. Example: The hypopigmented macules of polymorphic light eruption as a presenting sign of this disorder in children. Although there is a mention of post-inflammatory hypopigmentation as a manifestation of infantile seborrheic dermatitis in the pigmentary disorders chapter, I wished this was called

to attention in the former section. Indeed, cutaneous hypopigmentation is very often a presenting sign of the disease in young children in India (especially, in the South) and is frequently the reason why the children are brought, the inflammation of the dermatitis neither perceptible nor apparent.

Celia Moss could not be more right (she wrote the foreword for this book) when she noted that in India, where the child population is huge, pediatric dermatology as a specialty hardly exists. It is time that we all realize this. Pediatric dermatology is a dermatological specialty and not a pediatric specialty. The Medical Council of India does not recognize pediatric dermatology as a special field of expertise and fails to allot it the specialty status that it richly deserves. I may not be far from truth if I say that there is no organized development of the specialty anywhere in India and there are no professorial departments in any one medical college. We should all help those who are striving hard to take the specialty forward. A time has come for us to sit and ponder, and sensitize not only our own 'brethren' but also people who matter so that the growth of pediatric dermatology in India keeps pace with that in the west. It is precisely against this backdrop that the arrival of this new edition of Dhar's book on pediatric dermatology is a small but a decisive stride in the right direction and I would love to see more books like this in the future.

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