
Diego Wyszynski has done an admirable job of assembling a collection of reviews of various aspects of the etiology and treatment of oral clefts. This 500-page monograph is divided into three sections: “Basic Principles” (embryology, clinical features, epidemiology, and genetics); “Treatment” (surgery, speech care, dentistry, otolaryngology, etc.); and “Public Health Issues” (prevention, insurance coverage, ethical issues, and education). As with all edited monographs, some essays are more scholarly than others; a few are rather poor. Nevertheless, this book achieves its stated intention of “addressing issues that are relevant to clinicians, researchers, and family members.” Of particular value to clinicians and well-informed family members is the section on treatment. The treatment of patients with oral clefts, from birth to adulthood, requires a well-coordinated team effort. This section does a good job of conveying the global nature and specific details of this comprehensive care. Thus, chapters 24–34 are highly recommended, as are chapters 36–39 in the section on public health issues.

One important misstep in this presentation is the lack of succinct clarity regarding our present knowledge of oral cleft etiology. In 1949, Curt Stern, writing in his text Principles of Human Genetics, noted: “Harelip and cleft palate are developmental abnormalities which have a genetic basis. In many pedigrees, they depend on the cooperation of specific alleles at several autosomal loci, and, in addition, require the presence of mostly uncontrolled environmental factors.” In 2002, there is little else we can add. F. Clarke Fraser, in his foreword to Wyszynski’s monograph, cogently tells us why: “Epidemiologic studies are hampered by the fact that, for an uncommon multifactorial trait, it is virtually impossible to assemble groups large enough to allow statistically valid comparisons of potentially significant factors such as prenatal events, susceptibility genes, social class, and race.” Unfortunately, one is left to conclude that much of what is contained in chapter 3 and chapters 16–22 is much ado about very little. I hope that, someday, this will be different. Today, at bottom, we must rely entirely on the information in Carmella Stadter’s chapter (31) on genetic counseling and empiric risk calculation. This message is lost amid the genomic hype. In a book “addressing issues … relevant to clinicians … and family members,” this should have been in neon.

On balance, this monograph has more to recommend it than not. It should be on the shelf of all those with a need to know about clefts.

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The second edition of Connective Tissue and Its Heritable Disorders has been vastly expanded, in comparison with the first edition, as is consistent with the rapid progress in the field over the last 10 years. The authors of individual chapters are all leaders in the field, and the book has been well edited to give it a consistent structure. This is a very dense book, with a relatively small font size, that is not designed for those seeking a quick review of the field but rather for those interested in all the facts as well as the controversies. It is relatively well illustrated, although many complex pathways are discussed without figures that would have made the relationships easier to understand for all but the mavens of the field.

The first third of Connective Tissue and Its Heritable Disorders covers the basic biology of connective tissue in great detail, although I found the treatment of the regulation of growth and development to be superficial compared with the review of the collagens. Chapters on clinical disorders constitute the remainder of the book. In addition to chapters on disorders traditionally placed under the heading of “connective tissue,” such as osteogenesis imperfecta, Ehlers-Danlos syndrome, Marfan syndrome, cutis laxa, and pseudoxanthoma elasticum, there are chapters on epidermolysis bullosa, disorders of keratinization, Alport syndrome, defects in skeletal morphogenesis, and many other disorders. Those familiar with The Metabolic and Molecular Bases of Inherited Disease (MMBID) will recognize the format of the chapters in this book, with a summary of the important points at the beginning.