

## REVIEWS OF BOOKS : BOEKRESENSES

### ANALGESIA IN CHILDBIRTH

*Inhalation Analgesia in Childbirth.* By E. H. Seward, M.A., D.M. (Oxon.), F.F.A.R.C.S., D.Obst. R.C.O.G. and R. Bryce-Smith, M.A., D.M. (Oxon.), F.F.A.R.C.S. Pp. viii + 58. 11 Figures. 7s. 6d. Oxford: Blackwell Scientific Publications, 1957.

*Contents:* Introduction. 1. The Pain of Labour. 2. The Basis of Pain Relief. 3. Intermittent Inhalation Analgesia. 4. Conduct of Analgesia. 5. Nitrous Oxide. 6. Trichlorethylene. 7. Analgesia with Trilene. 8. Comparison of Trilene and Nitrous Oxide. 9. Contra-Indications. 10. Causes of Failure. 11. Nitrous Oxide/Air Apparatus. 12. Trilene/Air Apparatus. Appendix I. The Testing of Gas/Air Machines. Appendix II. Specifications for Trilene Inhalers. Appendix III. C.M.B. Rules Relating to Analgesia. Index.

This is a new publication intended primarily for midwives which will also be of value to obstetricians, particularly those concerned with the teaching of midwifery students, and of interest to all anaesthetists.

It is a concise, well-written book with adequate diagrammatic illustrations. In these days when so much is written on 'Natural Childbirth' and hypnosis it is pleasing to have a guide to the use of well-known and well-tried analgesic drugs, which are of general application and which can be expected to give relief to almost every co-operative parturient woman.

The use of drugs given by injection and inhalation are both well presented. It is to be hoped that the day is not far distant when every maternity home will be provided with at least one piece of analgesic apparatus which is in working order and in constant use. This will ensure that midwives will pay attention to the details which are so essential to success. So often one finds that a piece of apparatus is condemned simply because those concerned are not prepared to go to the trouble of learning about its capacities and limitations and this book should fill a real need with respect to analgesic apparatus in obstetrics.

C.F.

### SIR GEORGE BUCKSTON BROWNE

*Sir George Buckston Browne.* By Jessie Dobson, B.A., M.Sc. Pp. viii + 143. Figs. 28. 25s. net plus 11d. Postage abroad. Edinburgh and London: E. & S. Livingstone Ltd. 1957.

*Contents:* Preface. I. Introduction. II. Henry Browne of Manchester. III. George Buckston Browne. IV. Student Days. V. Private Practice with Sir Henry Thompson. VI. George Buckston Browne and His Patients. VII. Holidays and Recreation. VIII. Activities in Retirement. IX. Down House. X. The Buckston Browne Research Farm. XI. The Last Years. XII. Sir Buckston Browne As a Surgeon—An Appreciation. By Sir Hugh Lett, K.C.V.O., C.B.E., F.R.C.S. Sir George Buckston Browne's Publications. Index.

This is an autobiography within a biography and as such provides a very complete picture about a remarkable man. The story unfolds to give a clear insight into the character which together with unremitting hard work and attention to detail made him one of the leading urinary surgeons of his day. The passages relating to London consulting practice in Victorian times, the Down House and the Buckston Browne Farm are especially interesting.

This book should be read by all those interested in the histories of medicine, urology and the Royal College of Surgeons.

R.S.

### PERIPHERAL CIRCULATION IN HEALTH AND DISEASE

*Peripheral Circulation in Health and Disease.* By Walter Redisch, M.D., F.A.C.P. and Francisco F. Tangco, M.D., B.S. with a special selection by R. L. de C. H. Saunders, MD., F.R.S.E. Pp. + 154. 25 Plates. \$7.75. New York: Grune & Stratton, 1957.

*Contents:* Preface. Introduction. Part I. Basic Aspects of Peripheral Blood Flow. Part II. Pathologic Alterations in Peripheral Blood Flow. Part III. Physiologic Responses to Disturbances in Blood Flow. Part IV. Management and Therapy. Part V. The Anatomic Basis of the Peripheral Circulation in Man. Index.

This little volume of 132 pages contains an unusually well-organized survey of the known facts pertaining to peripheral vascular disease and the treatment thereof.

In part one the peripheral vascular anatomy and the factors governing blood flow are described. The concept of vasomotion, and the mechanism involved are critically reviewed. There follows a chapter on the clinical approach, together with the more specialized manoeuvres used to evaluate blood flow in the extremities. Part two deals with the underlying pathology and the essential outlines of the disease entities in this field. Part three is devoted to the physiological adjustments attending on acute and chronic vascular occlusive processes. Part four presents an up-to-date summary of the medical and surgical measures available in the management of these conditions.

The final section by Dr. R. L. de C. Saunders and his associates incorporates their recent original work on the finer vascular supply to muscle, mainly in man. Using stereo-microradiography and radio opaque media with particles no larger than red blood corpuscles, they demonstrate the vascular pattern down to capillary level. Their findings are factual and illuminating. The quality of illustrative photographic reproduction is superb throughout.

This book offers interesting reading and rewarding study to wide sections of the medical profession

J.D.S.

### HAEMOLYTIC DISEASE OF THE NEWBORN

*Die Pathogenese Des Morbus Haemolyticus Neonatorum.* Von Priv. Doz. Dr. Gerhard Martius. Pp. 70. DM 9.60. Stuttgart: Georg Thieme Verlag. 1956.

*Inhaltsübersicht:* I. Geschichtliches zur Pathogenese des Morbus haemolyticus neonatorum. II. Bisherige Untersuchungen über den Antigen-Antikörper-Austausch zwischen Frucht und Mutter. III. Zur Methodik des Antigennachweises. IV. Eigene Untersuchungen zur Frage des Antigenvorkommens im Plazentargewebe. V. Untersuchungen zur Frage des Antigenvorkommens im Blutsrum. VI. Histologische Untersuchungen von Plazenten erythroblastotischer Kinder. VII. Besprechung der Ergebnisse. VIII. Zusammenfassung. Literaturverzeichnis.

This book has great statistical significance. The author gives a very interesting resumé of the years and work done prior to the

eventual discovery of rh-factors. It also describes in great detail the various methods employed in tracing the causative factor of haemolyticus neonatorum. It discusses the histological pattern which is usually encountered in such placentas in conjunction with the haemopoietic imbalance noticed in these new-born babies. Diapedesis, oedema, necrosis, and haemorrhage are responsible for the macroscopical changes seen at birth. The placenta *per se* is thought not to participate in the act of rh-sensitisation.

The experimental findings are tabulated in a practical and well-controlled manner, and are easy to follow. The author discusses the influence of haptens and its important role in primary sensitization, with the resultant clinical abnormalities which occur with the next pregnancy. The antigen/antibody reaction in the placenta is considered to occur intravascularly, and the macroscopic changes are thought to be a sequel.

The author concludes with a summary of the different chapters followed by a discussion and interpretation of the aforesaid experimental findings.

D.J.H.

#### THE MALABSORPTION SYNDROME

*The Malabsorption Syndrome.* Edited by David Adlersberg, M.D. Pp. iii + 252. Figures. \$5.50. New York and London: Grune & Stratton, Inc. 1957.

*Contents:* Foreword. Introduction. The Physiology of Intestinal Absorption. Disturbances in Protein and Lipid Metabolism. Water and Electrolyte Upsets. Alterations in Vitamin B12 Absorption. Pancreatic Secretion Studies. Pathologic Studies. Biopsies of the Small Intestine. Clinical Aspects. Blood and Bone Marrow Manifestations. Haemorrhagic Manifestations. Neurologic Manifestations. Osseous Changes and Fractures. Roentgen Findings. Management. Malabsorption Following Extensive Small Bowel Resection. Index.

This rather unusual monograph is virtually a reprint of a recent issue of the Bulletin of the Mount Sinai Hospital of New York. It is a series of collected articles by staff members of that hospital, each set of articles utilizing in general, but not entirely, the same set of patients. Dr. Adlersberg is the chief author and 'editor' of the volume, but there seems to have been little attempt to produce continuity of thought or uniformity of terminology. (For instance the terms 'sprue' and 'osteoporosis' are given different connotations in different chapters). It seems to the reviewer that good individual articles are one thing, but an easily comprehended book or monograph is quite another. The very subject of the work is in doubt—plainly the main subject being what we call 'idiopathic steatorrhea'. Some authors keep to this subject solely, others discuss also tropical sprue, even post-gastrectomy states, ulcerative colitis, pancreatitis, ileitis, and other malabsorption syndromes. The last chapter purports to introduce and discuss an entirely different topic—that of massive resection of the small gut, but it gets all mixed up with exclusions, regional enteritis and so on. Surely it would have been better to consider in detail the 'idiopathic' malabsorption group of coeliac disease (which is hardly mentioned), idiopathic steatorrhea and tropical sprue or else to discuss the whole range of malabsorption disorders, including lymphomas, loop syndromes, Whipple's disease and so on.

There are two 'guest authors' from Britain, and these two present the most interesting chapters in the book. Margot Shiner discusses the new technique of jejunal biopsy, and Trevor Cooke the defects in water and electrolytes in idiopathic steatorrhea. The importance of potassium deficiency in causing the weight loss, change in bowel motility and tetany in this syndrome are of great interest. The chapter on pathological studies presents the interesting results of jejunal biopsy though there is unnecessary overlap between this chapter and that on the biopsy technique.

The section on treatment indicates clearly the place of steroid therapy in the sprue syndrome. Unfortunately the authors have had little experience of gluten-free diets. Treatment of the very troublesome symptom of tetany is nowhere properly described; a few tablets of calcium lactate alone are not likely to be very successful.

Despite the above rather carping criticism, there is obviously a need for a monograph on this topic, and the physician will find much of importance on all possible complications of the idiopathic malabsorption syndrome contained in it. The production and paper is excellent, although the index is very skimpy.

P.J.

#### BRONCHO-PULMONARY DISEASES

*Bronchopulmonary Diseases—Basic Aspects, Diagnosis and Treatment.* By 142 authors. Edited by Emil A. Naclerio, M.D. Pp. xxi + 956. 719 Illustrations. 24.00 dollars. New York: Paul B. Hoeber, Inc. 1957.

*Contents:* Section I. Embryology, Developmental, anomalies and Anatomy. Section II. Physiology and Pathology. Section III. Diagnosis. Section IV. Roentgenology. Section V. Heart and Lung Diseases. Section VI. Edema and Hemorrhage. Section VII. Embolism, Infarction and Thrombosis. Section VIII. Upper Respiratory Tract and Pulmonary Disease. Section IX. Cough. Section X. Bronchitis, Broncholithiasis and Bronchial Fistula. Section XI. Allergy. Section XII. Pulmonary Manifestations of Systemic Diseases. Section XIII. Congenital Diseases. Section XIV. Hernia (Pneumothorax) of the Lung. Section XV. The Pneumonias. Section XVI. Emphysema. Section XVII. Pneumoconiosis. Section XVIII. Pulmonary Mycoses. Section XIX. Parasitic Diseases. Section XX. Foreign Bodies. Section XXI. Atelectasis. Section XXII. Postoperative Pulmonary Complications. Section XXIII. Fundamental Considerations in Pulmonary Surgery. Section XXIV. Pulmonary Tuberculosis. Section XXV. Bronchiectasis, Abscess and Cystic Diseases. Section XXVI. Tumors, Benign, Malignant and Metastatic. Section XXVII. 'Coin' Lesions and Solitary Tumors. Section XXVIII. Traumatic, Chemical and Radiation Injury. Section XXIX. Pleuropulmonary Diseases. Section XXX. Preservation of Lung Tissue. Section XXXI. Fundamental Considerations in Management. Index.

This enormous volume with its multi-author contributions is the latest addition to the modern American trend in medical publication. The reviewer questions very seriously whether this is the best method of presentation of advances and modern up-to-date views of selected authorities in the varying fields of clinical medicine. It would seem that monographs on selected subjects serve the purpose much more fully. Understandably, where there are 142 authorities contributing there must be quite a variation in the style and quality of the articles. It is perfectly true that in this volume the subject of bronchopulmonary diseases is covered most fully and adequately and can certainly serve as a reference book to physicians and surgeons interested in Diseases of the Chest. There are some excellent articles on Pathology by David Spain, on Allergic Manifestations in the Respiratory Tract by Joseph Harkavy, and many good contributions in Radiology of the Chest and interpretations by many authorities. The sections on 'Coin' lesions and solitary tumors, as well as on tumors, bronchiectasis, abscess and cystic diseases are particularly informative. A feature of this volume is the excellent bibliography. It is however rather irritating to the reviewer to see such few references to British authors and experts in the field of bronchopulmonary diseases, authorities who in many cases have made such outstanding contributions to the knowledge and understanding of Diseases of the Chest, to say nothing of treatment both medical and surgical.

A theme that runs through most of the contributions is the increasing realization that for successful treatment in Diseases of the Chest close co-operation between the thoracic surgeon and the internist is required. Both must be open to suggestion and constructive criticism with a feeling of mutual respect for each other's opinions.

As with all Hoeber-Harper publications the paper, print and illustrations leave nothing to be desired.

The book is expensive and can have but a limited appeal to those interested in Chest Diseases.

A.L.

#### RADIOGRAPHICAL TECHNIQUE

*Medizinische Röntgentechnik.* Lehrbuch für medizinisch-technische Assistentinnen, Ärzte und Studierende. In Zwei Teilen. I. Medizinischer Teil: Skelettaufnahmen und Organuntersuchungen. Zweite, Erweiterte Auflage. Von Prof. Dr. H. Schoen. Bearbeitet von Dr. D. Schoen. viii + 347 Seiten. 534 Abbildungen. DM 29.70. (Mengenpreis ab 10 Expl. DM 26.70). (II. Physikalisch-technischer Teil 2. Auflage erscheint Anfang 1957). Stuttgart: Georg Thieme Verlag, 1957.

*Inhaltsverzeichnis.* Vorwort zur 2. Auflage. Vorwort zur 1. Auflage. Allgemeine Richtlinien. I. Skelett. Tränenwege, Kontrastdarstellung. II. Zähne. III. Darstellung der Gelenkhöhlen. IV. Weichteile. V. Vasographie. VI. Nasen-Rachen-Raum, Kehlkopf und Trachea. VII. Durchleuchtung. VIII. Herzuntersuchung. IX. Lungeneinstellungen. X. Verdauungstrakt. XI. Harnwege. XII. Männliche Genitalorgane. XIII. Geburtshilfe und Frauenheilkunde. XIV. Fisteldarstellung. XV. Myelographie. XVI. Encephalographie. XVII. Ventrikulographie. XVIII. Pneumoradiographie. XIX. Fremdkörperlokalisierung. Übersicht der Kontrastmethoden. Verzeichnis der in Deutschland Üblichen Röntgenkontrastmittel. Die wichtigsten Strahlenschutzregeln für die Röntgendiagnostik. Verzeichnis der Nachschlagwerke.

After a few pages of introduction, radiography of the extremities is fully described. A feature of this book is that each position shows

a photograph of the position of the patient, the same position on a skeleton and a photograph of the completed X-ray film.

No exposure factors are given, as the author explains in the foreword, due to the fact that so many different types of machines and film are available that it would be extremely difficult to give accurate exposure factors. Radiographic positions of the spinal column are well demonstrated and include oblique views of the cervical and dorsal spine.

All the usual positions of the skull, nasal sinuses, and teeth are fully shown and are easy to understand from the illustrations. The chapter on arthrography is extremely interesting. Arthrography of the temporo-mandibular joints, shoulder joints, and all the other major joints are described and very good X-ray photographs are demonstrated.

Discography (Nucleography) is fully explained and the technical details and various methods of vasography are described in great detail.

The chapter on the examination of the heart should be of particular interest to the radiographer, as the different positions for various pathological conditions are explained.

A chapter on the radiological examination of the lungs including bronchography is given. The chapter on the gastro-intestinal tract includes sections on cholangiography and cholecystography. Pyelography, obstetrical and gynaecological radiography are well demonstrated.

The book is written in an easy style and should be of value to both radiographers and radiologists.

H.C.P.

#### CLINIC FOR SPASTICS

*Spastics in Cheyne Walk.* Edited and compiled by Joan Saunders and Marjorie Napier. Pp. xiv + 156. Illustrated. 20s. net. London: Pitman Medical Publishing Co. Ltd. 1957.

*Contents:* Foreword. Editors' Note. Prologue. 1. The Little Hospital by the River. 2. The Planning of the Centre. 3. The Layout of the Centre. 4. A Day at the Centre. 5. What is Cerebral Palsy? 6. Cerebral Palsy Centres. 7. The Almoner. 8. The Clinical Psychologist. 9. The Physiotherapist. 10. The Speech Therapist. 11. The Occupational Therapist. 12. The School Teachers. 13. The House Mother. 14. The Secretary and her Assistant. 15. The Physician. Epilogue. Appendixes.

In a well-composed and well-edited booklet an account of a home for young spastic children under 5 years of age is given. Cheyne Walk Children's Hospital was erected in 1888 for the treatment of chronic disablements. The hospital underwent a number of changes and its function as such came to an end during the last war when it was used as a day-nursery for the children of war workers. Its buildings suffered severely from bombing raids.

A description is given of the determined struggle to build up a suitable spastic clinic in recent years. In planning the centre, all possible facets of the problem have been thoroughly considered. It is interesting to notice with what care the establishment has been put together so as to produce an environment ideally suited to training the child to carry out all the acts of normal daily routine living. The contact with the parents is firmly established and they are made to feel, from an early stage, that the whole service is efficiently designed to train the children towards normality, as nearly as it can be obtained, in each particular case.

A sad note is struck by the fact that a certain amount of selection of cases, according to Intelligence Quotient assessments, must be made. This is economically understandable and is the inevitable problem faced by all such spastic clinics.

The wealth of important detail in respect of the layout of the centre and treatment of patients, which is arranged in ideal manner in this excellent book, would be of the greatest value to any unit contemplating building a similar spastic clinic almost anywhere in the world. The example and experience of Cheyne Walk should be a 'must' on the bookshelves of the members of such units.

C.E.L.A.

#### NA-OPERATIEWE KOMPLIKASIES

*Die Postoperativen Frühkomplikationen.* Ihre Behandlung und Verhütung. Von Doz. Dr. K. Wiemers und Dr. E. Kern, mit einem Geleitwort von Prof. Dr. H. Krauss. xii + 264 Seiten, 52 Abbildungen in 69 Einzeldarstellungen, Gr. -8°, Ganzleinen DM 38. Stuttgart: Georg Thieme Verlag. 1957.

*Inhaltsverzeichnis:* Geleitwort. Vorwort. A. Zur Pathophysiologie der postoperativen Phase. B. Die speziellen postoperativen Frühkomplikationen. C. Die Technik der notwendigen Maßnahmen. D. Literaturhinweise. E. Sachregister.

Hier is 'n boek van relatief klein formaat wat tog die hele veld van na-operatiewe komplikasies dek. Dit bevat genoeg besonderhede om volledig en goed verstaanbaar te wees. Die materiaal is duidelik en logies gerangskik.

In die eerste deel bespreek die skrywers die patologiese fisiologie van die na-operatiewe fase. Komplikasies van die asemhalingstelsel en sirkulasie sowel as vog- en elektrolietbalans word behandel. Laasgenoemde is saaklik en duidelik gestel. Hierdie eerste deel van die boek is baie waardevol veral met betrekking tot die dele wat volg, aangesien dit die fisiologie van die na-operatiewe periode, beklemtoon.

Onder die volgende hoof word die komplikasies van verskillende operasies bespreek bv. 'n thorakotomie, long- en hart-operasies. Sommige van die kleiner komplikasies na hart-operasies word genoem nie, maar die belangrikste is daar. Verder word die komplikasies wat volg op 'n laparotomie, operasies op die endokriene organe, bene en brein behandel. Die behandeling van tetanus en brandwonde word bespreek. Daar kan egter nie met die skrywers saamgestem word dat alleen brandwonde oor 20% in volwassenes en 15% in kinders as gevaarlik beskou moet word nie. 'n Nadeel is die afwesigheid van gegewens waarvolgens die vogniname per persentasie oppervlakte gebrand, uitgewerk kan word. Die laaste hoofstuk onder hierdie deel behandel die komplikasies wat volg op operasies op kinders, grysaards en swanger vrouens. Ook in hierdie deel word die normale fisiologie telkens beklemtoon. Die derde afdeling gaan oor die metodes van behandeling van komplikasies. Die eenvoudiger spoed-eisende operasies soos bv. die behandeling van hartstilstand, word goed bespreek.

Dit is moontlik dat die skrywers in hierdie boek 'n té wye veld probeer dek. Sommige komplikasies word net in 'n paar sinne genoem sonder dat daar ruimte is om die oorsake en voorkoming daarvan te behandel. Tog sal hierdie boek van groot waarde wees vir na-gradse studente in chirurgie, en die algemene chirurg sal dit met genot lees. Net jammer dat dit in Duits is; indien hierdie boek in Engels was sou dit 'n baie waardevolle en gewilde boek vir Suid-Afrikaanse Chirurge gewees het.

D.B.

#### PROGRESS IN GYNAECOLOGY

*Progress in Gynecology.* Volume III. By J. V. Meigs, M.D., and Somers H. Sturgis, M.D. Pp. xii + 780 Figs. \$15.50 New York and London: Grune and Stratton Inc. 1957.

*Contents:* Preface. Prefaces to Volumes I and II. I. Growth and Physiology. II. Diagnostic Methods. III. Functional Disorders. IV. Inter-Relationships of Endocrine Glands. V. Sterility and Reproduction. VI. Infections. VII. Benign Growths. VIII. Malignant Growths. IX. Operative Technics. X. Preoperative and Postoperative Care. XI. Appendixes. XII. Index.

Volume I of this work appeared in 1946 and volume II in 1950. Meigs and Sturgis have edited all three volumes which have aimed at giving a survey of progress in the subject since World War II. Each volume deals with what were current advances at the time, the subsequent publications omitting the fundamental earlier contributions but adding what was new or in fulfilment of what had gone before.

Volume III shows an improvement on its predecessors and there is the promise that this publication will soon reach a high level of information and instruction for the expert rather than for the ordinary run of gynaecologist. The system is admirable, and the content is invaluable to the student of gynaecology. In volume III there are about 60 chapters, i.e. considerably less than in the other two. There is the point naturally that the editors decide which are the new concepts and facts that should be brought to the fore, and there the reader has to rely on them just as he has to do in respect of their choice of expert contributors. The matter is accordingly based on arbitrary thought. It has to be emphasized, however, that in addition to American authors there are several European and British authorities who contribute.

Meigs and Sturgis have made an undoubted contribution to gynaecology. This field is becoming consolidated and very much more important than obstetrics. It is, therefore, a matter of good fortune that there is now a publication on current advances in gynaecology uncomplicated by the subject of obstetrics. The reviewer hopes that the editors realise how important their future task is, and that they will feel justified in devoting even more to the project. To the gynaecologist at all stages of development these works are indispensable.

O.S.H.