REVIEWS OF BOOKS : BOEKRESENSIES

ANAESTHETICS

A Manual of Anaesthetic Techniques. By William J. Pryor, M.B., Ch.B. (N.Z.), F.F.A.R.C.S. (Eng.), D.A. (Eng.), M.F.A., R.A.C.S. and a foreword by J. H. T. Challis, M.R.C.S. (Eng.), L.R.C.P. (Lond.), F.F.A.R.C.S. (Eng.), D.A. (Eng.). Pp. viii+ 224 + 77 illustrations. 27s. 6d. Bristol: John Wright & Sons, Ltd. 1956.

Contents: I. The Anaesthetic Room. II. Equipment. III. Mechanical and Physiological Aspects of Anaesthesia. IV. Agents used in Anaesthesia. V. Pre-operative Conditions requiring Special Care in Anaesthesia. VI. Intubation. VII. Premedication and Basal Narcosis. VIII. General Anaesthetic Techniques. IX. Machines used for Controlled Respiration. X. Special Anaesthetic Techniques. XI. Anaesthesia in Children. XII. Geriatric Anaesthesia. XIII. Dental Anaesthe sia. XIV. Emergency Anaesthesia and Resuscitation. XV. Anaesthetic Emergencies and Difficulties. XVI. Post-operative Care: Complications and Treatment. XVII. Spinal Analgesia. XVIII. Local Analgesia. XIX. Intravenous Therapy. XX. Hypotension. XXI. Antihistamines in Anaesthesia. XXII. The Explosion Risk. XXIII. The Expanding Role of the Anaesthetist. Index.

The author in an easy direct and comprehensible style has succeeded in producing a most valuable book on the practical aspects of Anaesthesia. It is a book primarily written for the beginner but should prove of great value to those concerned with the teaching of Anaesthesia and also as a book of ready reference to the busy anaesthetist. All the fundamentals of all aspects of anaesthesia are more than adequately handled.

As stated in his preface to this work, the author has wisely given the anaesthetist a choice of well-tried methods in the section dealing with technique, placing emphasis on the ability of the operator to employ any given method rather than the technique itself.

The whole work is concise, yet nothing of importance has been omitted and this book should provide a healthy stimulus to wider reading on those special aspects of Anaesthesia which are the province of the specialist anaesthetist.

L.M.v.d.S.

ENDOCRINOLOGY

Year Book of Endocrinology—1955-1956 Series. Edited by Gilbert S. Gordan, M.D., Ph.D. Pp. 367. 82 Figures. \$6.00. Chicago: The Year Book Publishers, Inc. 1956.

Contents: Introduction. The Pituitary Glands. Adenohypophysis: Adenohypophysis and Diabetes Mellitus, Hypopituitarism, Growth Hormone and Acromegaly, Pituitary Tumors. Neurohypophysis and Water Metabolism: Familial Diabetes Insipidus. The Thyroid Gland. Tests of Thyroid Functions. Transport of Hormonal Iodine. Triiodothyronine and Triiodothyroacetin Acid. Endemic Goitrogens. Hyperplastic Hypothyroidism. Hypothyroidism. Myxedema Coma. Hyperthyroidism. Exophthalmos. Thyroid Cancer and Thyroiditis. The Parathyroid Glands, Calcium Metabolism and Metabolic Bone Diseases. Parathyroid Function Tests. Hyperparathyroidism. Pseudohyperparathyroidism. Hypoparathyroidism. Steophthalmos. Thyroid Gancer and Thyroiditis. Hypoparathyroidism. Osteomalacia, Osteoporosis and Albright's Syndrome. The Adrenal Glands. Adrenal Medulla. Adrenal Cortex: Adrenal Corticolds, Addison's Disease, Adrenal Virilism, Cushing's Disease and Cushing's Syndrome. The Reproductive System. Gonadal Dysgenesis, Hermaphrodism and Pseudohermaphrodism. Pregnancy and Gonadotrophins. Ovarian Virilization. Estrogens. Hormonal Influences on Lipids and Atherosclerosis. Male Hypogonadism. Androgens. Carbohydrate Metabolism. Hypoglycemic Action of Sulfonamide Derivatives in Diabetes Mellitus, by L. Arthur Mirsky. Insulin and Insulinase Inhibitors. Insulin Preparations. Juperinsulinism and Hypoglycemia. Glucagon. Diabetes Mellitus. Complications of Diabetes Mellitus. Endocrine Treatment of Neoplastic Diseases. Carcinoma of the Breast. Carcinoma of the Prostate.

This very welcome annual has reappeared with its usual excellent review of the year's most significant papers in the field of endocrinology. It is remarkable that so much material has been compressed into a volume containing less than 350 pages. Yet the abstracts are both accurate and easily readable. Credit must go to the editor, Dr. Gordan, whose pithy and pertinent comments reveal his expert understanding of this expanding subject. The volume is quite up-to-date, reference being made to articles published quite recently.

The annual considers each endocrine gland individually and covers all important advances in physiological, experimental and clinical aspects. In addition there are chapters devoted to the role of hormones in breast and prostatic carcinoma; to the blood lipids and atherosclerosis; and to non-endocrine metabolic bonedisorders. Apart from the abstracts there are two special articles of importance. The first is by McCullagh, who deals with aldosterone and adrenal tumours. The realization of this hormone's significance rates as one of the major advances of recent years; the full implications have yet to be appreciated. In another article Mirsky discusses the available literature on the new insulin-sparing sulphonamide derivatives. While it is clear that these have considerable limitations, they do hold some promise of future oral therapy in diabetes mellitus. This prompt report will be welcomed by all who have to deal with diabetic patients.

Today no physician—or general practitioner—can afford to ignore the endocrine field. There can be no better or simpler means of keeping abreast than by perusing this volume. It is very strongly recommended to all readers.

R.H.

NEUROLOGY AND PSYCHIATRY IN CHILDHOOD

Neurology and Psychiatry in Childhood. Volume XXXIV. Proceedings of the Association December 10 and 11, 1954. New York, N.Y. Pp. xii + 504. 63 Illustrations and 21 Tables. 88s. London: Baillière, Tindall & Cox, Ltd. 1954.

88. London: Baillière, Tindall & Cox, Ltd. 1954.
Contents: Part I. Infections of the Central Nervous System. I. Treatment o Progenic Meningitis. Hattie E. Alexander. II. Tuberculous Meningitis. Ralph V. Platou and John H. Arnold. III. Present Status of the Problem of Vaccination Against Poliomyelitis. Jonas E. Salk. IV. Encephalitides and Postinfectious Encephalopathies. Horace L. Hodes. Part II. Developmental and Traumatic Aspects. V. Intracranial Hemorrhage in Infancy and Childhood. Donald D. Matson. VI. Developmental Defects of the Skull and Spine Associated with Lesions of the Central Nervous System. Edgar A. Kahn. VII. Injury of the Central Nervous System Incurred During Fetal Life. Samuel P. Hicks. VIII. The Formation, Flow, and Absorption of Cerebrospinal Fluid: Newer Concepts Based on Studies with Isotopes. William H. Sweet, Gordon L. Brownell, John A. Scholl, David R. Bowsher, Philippe Benda and E. E. Stickley. IX. Hydrocephalus. Dorothy S. Russell. X. Hemispherectomy in the Trea ment of Convulsive Seizures Associated with Infantile Hemiplegia. Joseph Ransohoff and Sidney Carter. Part III. Functional and Degenerative Disturbances. XI. The Cerebral Atrophies and Encephalomalacias of Infancy and Childhood. Abner Wolf and David Coven. XII. Myasthenia Gravis in Infants and Childron. Rhett P. Walker. Part IV. Roemgenographic Aspects. XIII. Some Radiological Features of Traumatic Lesions in the Growing Skull. John Caffey. XIV. The Contour of the Skull in the Presence of Increased or Diminished Intracranial Pressure. Edward B. D. Neuhauser. Part V. Psychiatric Aspects. XVI. The Epidemiology of Behaviour Disorders of Childhood. Benjamin Pasamanick. XVII. The Psychiatric Approach to Posttraumatic and Postencephalitic Syndromes. Abram Blau. XVIII. Affective Deprivation and Early Institutional Placement. J. Franklin Robinson. XX. The Role of the Clinical Psychologist in the Evaluation of Children with Specific Handicaps. Samuel J. Beck. Part VI. Symposium on Juvenile Schizophrenia. XX. Gener

This volume contains the proceedings (papers and discussions) of the 34th Annual Meeting of the Association of Research in Nervous and Mental Disease, held in 1954. At the request of the editor certain authors have submitted more detailed accounts for publication than were actually presented at the meeting.

The arrangement of a programme for such a meeting is understandably a most difficult task. The omission of the convulsive disorders in childhood will immediately strike the reader. The editors themselves mention this in their preface.

Discussing the bacterial meningitides (exclusive of tuberculous meningitis) the author calls serious attention to the common occurrence of subdural collections of fluid in early life. It is her policy to explore the subdural space in all infants with open sutures the day before treatment is discontinued, unless the signs indicate the presence of fluid earlier. She is unwilling to make burr-holes as a routine in children older than 1 year.

The authors of the paper on tuberculous meningitis advocate prophylaxis of this disease by treatment of the primary complex in the first 2 years of life by isoniazid alone. They state that no one in the US has reported the development of tuberculous meningitis whilst such cases were being treated with isoniazid only.

gitis whilst such cases were being treated with isoniazid only. Salk discusses the status (in December 1954) of vaccination against poliomyelitis. At that time he could state 'prophylaxis with live virus was only an idea', and 1954 in this connection seems a very long time ago. Salk and Koprowski and Sabin have taken that idea a good way into practical experience since then, and attenuated poliovirus by mouth for prophylaxis is past the stage of an idea.

The paper on Encephalitides and Post-infectious Encephalopathies is by Hodes. S.A. TYDSKRIF VIR GENEESKUNDE

Part II deals with intracranial haemorrhage in infancy and childhood, injuries of the CNS incurred during foetal life, and developmental defects of skull and spine. The contribution by Dorothy Russell on Hydrocephalus is the substance of her MRC paper on the subject. The place of hemispherectomy in convulsive seizures associated with infantile hemiplegia is dealt with. This section also contains the recent work on the formation, flow and absorption of the CSF studied with isotopes. The CSF is not fully and completely formed in any one part of the brain—the process is much more complicated.

Part III: The paper on the cerebral atrophies and encephalopathies covers pp. 199-324 and is practically a monograph. The authors stress the importance of cerebral anoxia in the causation of these pathological states. The variability in the intensity and distribution of the lesions may depend on the sensitivity of the given brain to hypoxia and the known variability of resistance of different portions of the brain to oxygen lack, or the metabolic requirements of the brain tissue at the time of exposure. The authors believe that not only may convulsions result from brain damage but that they may actually cause permanent brain-injury in the form of ischaemic necrosis.

Myasthenia gravis in infants and children is dealt with in 4 pages.

In Part IV Caffey discusses with a number of good plates, the radiological features of traumatic lesions of the growing skull. Dr. Neuhauser writes on roentgen effects of altered intracranial pressure. His subject includes craniostenosis.

Part V deals with psychiatric problems:

(a) Reading disability, due either to brain damage or to personality factors.

(b) Behaviour disorders. The author says: 'It has been shown fairly conclusively that delinquency in children between 10 and 17 in the vast majority of cases is not of psychogenic or psychiatric origin but is rather a sociologic phenomenon'. He hands over the problem to the sociologist for preventive measures. He and his co-workers have studied the ouestion of brain injurv at birth as the cause of behaviour disorder. They incline to the view that these injuries are due not so much to prolonged labour but to non-mechanical causes such as toxaemias and hypertensive disease of pregnancy.

(c) The author of the next paper, on the psychiatric approach to post-traumatic and post-encephalitic syndromes, says: 'A pure organic behaviour disorder without significant psychopathology is now found extremely rarely. Psychodynamic factors prior to the infection or accident are common. The organic illness often has injurious emotional effects and many environmental, familial and other external conditions continue to disturb the child after the injury'. He had himself written on that basis of these behaviour disturbances in the past. He thinks today that they are mostly anxiety neuroses.

(d) Affective deprivation and early institutional placement. Usually under 3 especially under 1, and possibly up to 5 or 6, the infant reacts first with indications of distress or protest and later with withdrawal and unresponsiveness. A personality syndrome has been observed and described by a number of authors.

(e) Psychologic evaluation of handicapped children.

Part VI is a symposium on juvenile schizophrenia-a difficult subject.

F.F.

DEPRIVED CHILDREN

Deprived Children. By Hilda Lewis, M.D. (Pp. 163 + xvii. 9s. 6d.) London: Oxford University Press. 1954.

Contents: 1. The Reception Centre and Its Work. 2. The Children: Mode of Admission, Family Background, and Previous Personal Experiences. 3. The Children: Personality and Patterns of Behaviour. 4. Influence. 5. Subsequent Histories: Outcome. 6. General Reflections. Appendix 1. Appendix 2. Index.

Between October 1947 and July 1950, 500 children living in Kent were taken into Mersham Reception Centre, which had been set up by a grant from the Nuffield Foundation. The children were referred to the Centre because they were believed to need care away from their own homes; some had never had a home or had been deprived of it when very young. The Centre, besides caring for the children, gave opportunities for studies which form the subject-matter of this book.

Written by Dr. Hilda Lewis, the psychiatrist to the Centre, the book describes 'the background of the children, the homes they came from, their behaviour, their personalities, the measures taken to help them, and the outcome during the next two years'. When the author writes about background, homes and measures taken, she is on reasonably firm ground, but difficulties arise in the approach to behaviour and personality problems. Our methods of measuring the effect of environment on human behaviour are still crude and lack rigid scientific standards. There is the difficulty, too, referred to by Sir Arthur Ellis and Dr. C. P. Blacker in the foreword, that 'associations between background history and presenting symptoms may in part be genetically determined, for parents may transmit to their children some of the characteristics which brought difficulties and stresses upon themselves.'

In spite of these criticisms, there is a great deal of valuable material in this study, which should be read by everyone interested in child welfare. One would like to see this book, concerned with so human a problem, condensed and published in simpler form, i.e. in a style which avoids the use of psychologic jargon, figures, and statistical tables.

I.M.

SURGERY OF THE SYMPATHETIC

Surgery of the Sympathetic. By Alexander Lee McGregor, F.R.C.S. (Eng.). M.Ch. (Edin.). Pp. 192, with illustrations. 30s. Bristol: John Wright & Sons Ltd. 1955.

Contents: 1. Introduction. 2. The Gross Anatomy of the Autonomic Nervous System. 3. The parasympathetic. 4. Surgical Anatomy and Physiology. 5. Sympathetic Arrangements in the Head and Neck. 6. Cerebral Thrombosis and Embolism. 7. Sympathetic Arrangements in the Upper Limb. 8. Sympathetic Denervation of the Upper Limb. 9. Sympathetic Arrangements in the Lower Limb. 10. Sympathetic Denervation of the Lower Limb. 11. The Prognosis following Sympathetic Denervation of the Lower Limb. 12. The Clinical Presentation of Sympathetic Denagements. 13. The Heart. 14. The Lung. 15. The Abdominal Sympathetic System. 16. Abdominal Pain. 17. Neuromuscular Inco-ordination. 18. The autonomic Arrangements in the Pelvis. 19. The Urinary Bladder. 20. The Internal Female Genitalia. 21. Essential Hypertension. 22. The Operations for High Blood-pressure. 23. Hypertension due to Tumours of Chromaffin Tissue. References. Index.

This is essentially a book for the practising surgeon, who will find many valuable suggestions and much technical detail in this short treatise.

The author makes use of and enlarges on the simple diagrams for which he is so well known through his Synopsis of Surgical Anatomy. In some instances, however, simplification is driven too far, and then the diagram may become meaningless. An example of this is the illustration depicting the internuncial pool of Lorento de No, which could with advantage be replaced by one of Lorento de No's original diagrams.

Some of the information contained in the book is inaccurate and therefore misleading, particularly to those not dealing with this discipline every day and turning to the book for guidance. For example, concerning intermittent claudication, the author says he has been informed that this is cured by replacing the diseased main vessel by blood-vessel grafts; and the chapter on essential hypertension, in which the operative technique is admirably described, is, as a whole, out of date.

Nevertheless the practising surgeon will find much of value in this book.

R.H.G.

SIRKULASIESPOED BY KINDERS MET AANGEBORE HARTGEBREKE

Circulatietijden Bij Kinderen Met Aangeboren Hartgebreken. Bepaald Met Behulp van Kleurstofinjectie. By D. H. Beekhuis. Pp. 121, with 29 illustrations. Geb. f. 11.00. Assen: Van Gorcum & Comp. N.V. 1955.

Contents: Circulatietijden Bij Normale Kinderen. 2. Circulatietijden Bij Kinderen met Een Shunt van Rechts naar Links. 3. Circulatietijden Bij Kinderen Met Een Shunt van Links Naar Rechts. 4. Circulatietijden Bij Kinderen Met Een Gemengde Shunt.

Na 'n oorsig oor vorige metodes van sirkulasie-spoedbepaling beskryf die outeur, na bespreking van eksperimentele proewe en vorige werk op die gebied, 'n wyse van vasstelling van die sirkulasiespoed by normale kinders en dié met aangebore hartgebreke; 'n baie waardevolle waarneming, mits dit skadeloos is en betroubaar blyk te wees.

Hy gebruik , Evans blue' T. 1824 as 'n enkel inspuiting voldoende is, en metileen blou, waar herhaling nodig is.

'n Brinkman refleksieoksimeter word gebruik om die kleurveranderinge in die vel (afhanklik van die kleurveranderinge in die deurstromende bloed) te meet, en die veranderinge word op 'n grafiek vasgelê, waarvan die verskillende tye bereken word. Deur die kleurstof perifêr of/en deur 'n hartkateter in verskillende hartkamers in te spuit, word verskillende kurwevorms gekry wat die hart-of vatgebrek aandui. Sy werk is 'n belangrike bydrae tot die studie van hierdie gevalle.

J.G.A.D.

STEAD'S ELEMENTARY PHYSICS

Elementary Physics. By G. Stead, M.A. (Cantab.), D.Sc. (Lond.), F.Inst.P. Ninth Edition. Pp. 532, with 448 illustrations. London: J. & A. Churchill Ltd. 1955.

Contents: Section I. Mechanics, Section II. Hydrostatics and Properties of Matter. Section III. Heat. Section IV. Sound. Section V. Light, Section VI. Magnetism, Section VII. Electrostatics. Section VIII. Current Electricity.

There must be many thousands of practising doctors who have reason to be grateful to the author of this book for the help they received from it during their student days. It has gone steadily on since 1924 through 8 editions and 3 reprintings, and this 9th edition merely brings an excellent text-book up to date.

The last two editions have included a brief sketch of nuclear physics and a reference to radio-active isotopes. There is no doubt that Stead's 'Elementary Physics' will continue to play its part in medical education.

A.H.T.

TOXAEMIAS OF PREGNANCY

The Pregnancy Toxaemias or the Encymonic Atelositeses. By G. W. Theobald, M.A., M.D. (Cambridge), F.R.C.S. (Edin.), F.I.C.S., F.R.C.O.G., M.R.C.P. (Lond.). Pp. 488 + xiv, with 56 illustrations. 63s. 0d. London: Henry Kimpton. 1955.

Contents: 1. Le Milieu Intérieur. 2. The Pregnancy-Lactation Syndrome. 3. The Capillaries. 4. The Water Metabolism of the Body. 5. The Kidneys: Physiological Considerations. 6. The Kidneys: Physiological Proteinuria. 7. Oedema. 8. The Post-Pituitary Gland and Pregnancy. 9. The Adrenal Cortex. 10. Water Diuresis During Pregnancy. 11. The Liver. 12. The Blood Pressure: Physiological Considerations. 13. Hypertension: Essential Hypertension in the Non-Pregnant State. 14. Hypertension During Pregnancy. 15. Hypertension; and Hypertension Associated with Proteinuria. 16. The Toxaemias of Early Pregnancy. 17. Toxaemic Accidental Haemorrhage. 18. Eclampsia. 19. Eclampsia (continued). 20. Eclampsia (Clinical Investigations). 21. The Histological Changes Associated with Eclampsia. 22. Calcium, Magnesium, Phosphorus, Potassium, and Sodium. 23. 'Toxaemias' Associated with Pregnancy. 15. The Eclamptic Hypotheses. 26. Placental Hypotheses. 27. Placental Hypotheses (concluded). 28. Placental Hypotheses (continued). 29. The Endocrine Glands. 30. The Crush Syndrome and Renal Ischaemia. 31. The Nutritional-Mechanical Hypothesis. 32. The Nutritional-Mechanical Hypothesis (continued). 33. The Nutritional-Mechanical Hypothesis (continued). 34. The Nutritional-Mechanical Hypothesis (concluded). 35. Ante-Natal Care. 36. The Treatment of 'Pre-Eclampsia'. 37. The Treatment of Eclampsia. (28. The Treatment of Eclampsia (continued). 39. The Treatment of Eclampsia (concluded).

A truly 'British' book on the pregnancy toxaemias has been long overdue. Theobald has now filled this breach with 'The Pregnancy Toxaemias or the Encymonic Atelositeses'. Every known aspect of the pregnancy toxaemias and eclampsia has been covered in great detail.

The book is divided into 4 sections—one following the other in natural sequence, yet each covering an intensive subject on its own. In *Part I* the author deals with the normal metabolic changes found in pregnancy, i.e. in 'the pregnancy—lactation syndrome'. Gradually the author works up to the hypertensive states. In *Part II* the toxaemic states are described, commencing with emesis and hyperemesis gravidarum, covering sea-sickness, heartburn and the other illnesses which may be associated with, or confused with, toxaemias. Accidental haemorrhage and eclampsia are thoroughly done. Theobald then turns to the basic metals and pregnancy toxaemias in domestic animals. This section of his book ends with a 'summary of the phenomena associated with normal and abnormal pregnancy'.

Part III is confined to hypotheses—after the author has first laid down the eclamptic criteria, and Part IV to 'The Prevention and Treatment of Eclampsia'.

This book is well written and beautifully balanced. It should be on the shelf of every doctor interested in obstetrics and should be thoroughly studied by all those who are actively engaged in obstetrics—more so by teachers of the subject.