without shame from the scientific riches stored in the bibliography." The text abounds with references, but the reader is sometimes puzzled to know which part is the borrowed riches, and which the author's own opinion. The bibliography contains 615 references but omits any mention of Hertz's work on Vitamin C. The proven deleterious effect of lack of Vitamin C in the healing of fractures is not considered in the text. The book is profusely illustrated. The micro-photographs and radiographs are excellently produced, but many of the tables and diagrams, for example Fig. 63, are reduced to such a degree that a magnifying glass may be required to read them. The text contains a wealth of information, but critical apprisement and correlation of the information is somewhat lacking.—Robert I. STIRLING.

BRACHIAL PLEXUS: LOCAL ANAESTHESIA. By R. R. MACINTOSH, M.A., M.D., F.R.C.S., D.A., Nuffield Professor of Anaesthetics, University of Oxford, William W. MUSHIN, M.B., B.S., D.A., First Assistant Nuffield Department of Anaesthetics. $7\frac{1}{2} \times 5$ in. Pp. 55, with 33 figures. 1944. Oxford: Blackwell Scientific Publications, Ltd. Price 10/6.

FIG. 8. Page 18.

The first edition of this small monograph was published in 1944. In the second edition, which has now appeared, there have been no material additions. The striking features of the book are the excellence of the illustrations and the clarity of presentation.

A short history of the various methods of producing brachial plexus block is followed by a discussion on its indications and advantages. The section dealing with the anatomy of the plexus is profusely illustrated in a way which emphasises the important topographical relations of the brachial plexus in the region of the first rib. Fig. 8 is an example. The actual technique is also illustrated admirably and made abundantly clear. The method described is, with minor modifications, essentially that of Patrick, which is undoubtedly the most reliable. (PATRICK, J.: The Technique of Brachial Plexus Block Anaesthesia. *British Journal of Surgery*, 1940, **27**, 734.)

References are made to premedication, and local anaesthetic solutions, and the book concludes with a brief description of the anatomy of the stellate ganglion and the signs of stellate ganglion paralysis.—J. D. EBSWORTH.

THE INTERNAL FIXATION OF FRACTURES. By Charles Scott VENABLE, M.D., M.S., F.A.C.S., and Walter Goodloe STUCK, M.D., M.S., F.A.C.S. $10 \times 6\frac{1}{2}$ in. Pp. xi+237, with 84 figures. Index, 1947. Oxford: Blackwell Scientific Publications, Ltd.

Less than fifty years ago the internal fixation of fractures was so unreliable and dangerous a method of treatment that it was condemned by all but a few of the more adventurous pioneers of surgery. Later the method achieved a considerable vogue and in the hands of a few skilled surgeons was attended by satisfactory results in a fair proportion of cases. In general, however, the results continued to be indifferent, and it was not until the introduction of metals which are relatively inert in the body that consistently satisfactory results began to be obtained. With the development of inert metals to their present state the principle of internal fixation of fractures has now achieved an established place in orthopaedic surgery, and it is generally regarded as a safe and reliable procedure provided that certain conditions are observed. Nevertheless the fact that cases are not infrequently seen even to-day where the choice of method or of materials has been unfortunate emphasises the necessity for every surgeon who undertakes the treatment of fractures to make himself thoroughly familiar with recent developments in this field; and this book will serve a useful function in bringing together under one cover essential features of the many contributions on internal fixation.

The book is arranged in two main sections. In the first part the authors sketch historical outlines of the development of the use of metals for internal fixation, leading up to the introduction of the relatively inert stainless steels and of vitallium. These and other metals are described in some detail; their relative advantages and disadvantages are discussed; and the technique of their application is considered. An important point which is wisely stressed is that two metals of different composition, even though each is