PLASTER OF PARIS TECHNIC. By Edwin O. GECKELER, M.D., Professor of Orthopaedic Surgery, and Chief of the Fracture Service, Hahnemann Medical College and Hospital, Philadelphia. Second edition. 9×6 in. Pp. xiv+220, with 236 figures. Index. 1948. London: Baillière, Tindall & Cox. Price 16/6.

This book has already been reviewed briefly in an American number of the Journal, but without critical comment. The teaching of plaster technique requires very orderly instruction. Here, however, elementary and advanced details alternate, and the numerous illustrations lack continuity. Some of the techniques described must lead to trouble or complaint. Thus, few surgeons would agree with the following captions. "If the ankle has been immobilised in equinus by mistake, a rectangular window will permit a change in the position without pinching the skin." "Short hip spica: the back view shows the buttock on the affected side completely covered with plaster." "Application of plaster jacket (two table method): no padding is necessary." "Certain conditions of the knee, as separations of the lower femoral epiphysis, require immobilisation in hyperflexion." To continue in this vein, the cast shown for a mallet finger is completely straight at the proximal joint; flat-foot deformity is treated by inversion of the whole foot; and a plaster figure-of-eight is used for fractures of the clavicle in children. In short, it may be fairly said that many of the techniques advocated show a wide variation from good contemporary practice in this country.—K. I. NISSEN.

FRACTURES AND DISLOCATIONS FOR PRACTITIONERS. By Edwin O. GECKELER, M.D. Fellow of the American College of Surgeons, Fellow of the American Academy of Orthopaedic Surgeons, Fellow of the American Association for the Surgery of Trauma, Diplomate of the American Board of Orthopaedic Surgery. Fourth edition. 9½×6½ in. Pp. xii+371, with 344 figures. Index. 1948. London: Baillière, Tindall & Cox. Price 27/6.

The object of this book is to provide a simplified yet practical account of the treatment of fractures and dislocations for general practitioners and senior students. This is no easy task, and the author has approached it with a due sense of realism and responsibility. He devotes a good deal of space to fundamental principles and fundamental techniques; and, in dealing with individual fractures for which a variety of treatments has been advocated, he confines his advice to one method which in his experience has proved to be the "simplest and most reliable for the best functional result"—a most refreshing reaction from the present tendency to dispute the right of any patient to be cured without a display of surgical virtuosity. But there is also danger in over-simplification; this Dr Geckeler avoids by indicating quite clearly those conditions in which complicated and difficult techniques are indispensable. Here he is at pains to tell his readers how to handle such cases until more skilful help can be obtained. The key-note of his advice in such circumstances is: "If there is doubt as to the treatment of a difficult case, it is far better to call a consultant at once than to meddle and manipulate repeatedly."

In matters of detail there is room here and there for criticism. Volkmann's ischaemic contracture is *not* due to venous obstruction. In adults, half an inch of shortening does *not* usually cause a permanent limp. Distraction should be added to the important causes of delayed union. Total division of the spinal cord does *not* lead to a fatal issue "regardless of the best care" (there are eight paraplegia centres in the author's own country proving the exact opposite). The removal of ununited transverse processes is an operation strongly to be condemned and not easy to perform—whereas open reduction of fractures of both bones of the forearm, which the author condemns, is widely practised, with good results, even in the comparatively conservative atmosphere of Great Britain. Finally, most surgeons will be unnecessarily alarmed to read that in one out of every three dislocated hips the femoral head undergoes avascular necrosis.

The author has a clear, direct style and the text is well illustrated. A short bibliography concludes each chapter, but with few references to the literature of the last five years.—E. A. NICOLL.

SURGERY ORTHODOX AND HETERODOX. By Sir William Heneage OGILVIE, K.B.E., D.M., M.Ch., F.R.C.S., Hon. F.A.C.S., Hon. F.R.C.S. (Canada), Hon. F.R.A.C.S. Surgeon, Guy's Hospital and Royal Masonic Hospital. 9×6 in. Pp. v+241, with 30 figures. 1948. Oxford: Blackwell Scientific Publications. Price 12/6.

In this volume Ogilvie has collected a number of lectures and addresses on surgical topics. They reveal the thoughts of an elder statesman which, if not profound, could not be more delightfully expressed. The music of the words reminded the reviewer of the many occasions he has sat enchanted listening to the oratory of the author.—George PERKINS.