DISEASES OF THE FOOT. By Emil D. W. HAUSER, M.S., M.D., Associate Professor of Bone and Joint Surgery, North-Western University Medical School; Attending Orthopaedic Surgeon, Passavant Memorial Hospital, Chicago. Second edition. $9\frac{1}{2} \times 6\frac{1}{2}$ in. Pp. xiii+415, with 195 figures. Index. 1950. Philadelphia and London: W. B. Saunders Company. Price 35s.

This book gives a remarkably comprehensive account of almost every disease, injury or disturbance of function that may affect the foot. The general arrangement of this mass of information is clear and orderly and a useful list of references is given at the end of each chapter; the book thus forms a most useful work of reference.

The author rightly stresses function as the primary consideration and he gives an excellent account of the mechanics of the foot and of its functions in relation to the rest of the body. The functional importance of the toes, however, is not discussed at all: they would appear to have no functions—only disabilities. The condition of claw toes associated with pes cavus is not even mentioned. Stress is laid on the supination of the forefoot that occurs as part of plano-valgus deformity, and the author has devised a metatarsal bar to be used in conjunction with an inside wedge on the heel, the effect of the bar being to tilt the forepart of the foot into pronation to help to correct this part of the deformity. Curiously, the comparable effect of congenital metatarsus primus elevatus, or of a mobile first metatarsal segment, on the posture of the foot is not mentioned; nor are these conditions considered in the etiology of hallux rigidus.

The methods of treatment advocated differ considerably from British practice, especially as regards operative and manipulative procedures, and the differences would be likely to give rise to some confusion in the minds of any but the most senior students. As a reference book, however, it can be strongly recommended.—T. T. STAMM.

PHYSIOLOGY OF MOTION, Demonstrated by Means of Electrical Stimulation and Clinical Observation and Applied to the Study of Paralysis and Deformities. By Dr G. B. DUCHENNE (of Boulogne). Translated and edited by Emanuel B. KAPLAN, M.D., Associate Orthopaedic Surgeon of the Hospital for Joint Diseases and Lebanon Hospital, New York City; Instructor in Anatomy, College of Physicians and Surgeons, Columbia University. $9 \times 6\frac{1}{2}$ in. Pp. xxiii+612, with 101 figures. Index, Appendix and Supplement. 1949. Philadelphia: J. B. Lippincott Company. Price £6, 10s.

It may seem a little hard to the busy senior orthopaedic surgeon that he should have to study physiology once again, but if he reads this book he will find it well worth his while, and the translation is so good that it is difficult to remember that it was written in French eighty years ago. I would class the book as a most interesting one for reference which should certainly find a place in everyone's collection.—Bryan McFARLAND.

GLIEDMASS ENAMPUTATIONEN UND GLIEDERERSATZ. By W. MARQUARDT. $9\frac{1}{2} \times 7$ in. Pp. 192, with 184 figures. Index. 1950. Stuttgart: Wissenschaftliche Verlagsgesellschaft M.B.H. Price DM 28.50.

The author of each book on amputations attempts to provide the reader with the history of the subject, the indication for and methods of amputating, and more recently has added rehabilitation and a description of the types of artificial limbs used in his country. Such information is compressed into a small space in this book. The particular interest in a book from Germany is in regard to the *Krukenbergplastik* operation and the operation of Sauerbruch. Both of these are described in sufficient detail and illustrated. It is clear that they are used in selected cases and then may be useful. In this country and in the United States, where little experience of them has been gained, the double-arm amputee may have useful function with artificial limbs and in either case there is ample evidence that his adaptability is the all important factor. There are interesting remarks on gangrene from frostbite and the level of foot amputations still practised in Central Europe. Rehabilitation is on the same lines as in England, both individual and class exercises being used. The section on prostheses is of interest. The theory of weight-bearing in relation to artificial limbs is discussed. The importance of alignment in fitting is stressed and