radiological manifestations are considered in great detail. Passing reference is made to possible causes of the condition which includes the statement that "chronic non-specific urogenital infection was demonstrated in practically every case (prostatic-vesiculitis, often utriculitis, Cowperitis)." No indication is given of the evidence upon which this statement is based, and, although the authors speak of the importance of detecting such infections early, they make no claim that early detection and treatment have any influence in arresting or diminishing the disease. Assuming chronic urogenital infection to be the cause, the spread of infection is said to follow the same pattern as that of prostatic secondary carcinoma via the vertebral venous system.

The chief value of the book is as a reference work in which the early radiographic signs of ankylosing spondylitis are described and illustrated. It does not attempt to deal with the orthopaedic and other treatment of the condition. It would not appeal to the ordinary orthopaedic reader. In reading it, it is sometimes irritating to have to turn from the unillustrated text to the atlas at the end of the book to follow the points raised in the text, but this is, perhaps, unavoidable.—Norman ROBERTS.

THE MANAGEMENT OF ACUTE POLIOMYELITIS. By C. P. STOTT, S.R.N., Diploma of Poliomyelitis Nursing (U.S.A.); and M. FISCHER-WILLIAMS, M.R.C.P. (Ed.), Senior Neurological Registrar, Birmingham United Hospitals, Formerly Neurological Registrar, Oxford United Hospitals. Foreword by W. Ritchie RUSSELL, C.B.E., M.D., F.R.C.P. (Lond. and Ed.), Consultant Neurologist, United Oxford Hospitals. $8\frac{1}{2} \times 5\frac{1}{2}$ in. Pp. xii+99, with 43 figures. Index. 1955. Edinburgh and London: E. & S. Livingstone Ltd. Price 12s. 6d.

In this book the authors have achieved what they set out to do. In fourteen chapters all aspects of the acute disease are covered, including isolation technique, the physiology of respiration, and the nursing care of patients in respirators. There is continual emphasis on the need for gaining

FIG. 38
Hip and knee flexion.

the patient's confidence and of providing a sense of security. The importance of never leaving alone a patient who is in a respirator, and the denunciation of trickery when weaning from the respirator, are illustrative of this theme. In the early days the responsibility for posturing paralysed limbs, and for carrying out such passive movements of joints as are necessary, must fall to a great extent upon the nursing staff; the diagrams illustrating such treatment are very informative. With its first class production this is one of the best books of its kind that have appeared in recent years. It will prove very helpful to those doctors and nurses whose work brings them in contact with the early case of poliomyelitis.—Donal M. Brooks.

SERVICES FOR THE DISABLED). Standing Committee on the Rehabilitation and Resettlement of Disabled Persons. $9\frac{1}{2} \times 6$ in. Pp. v+88, with 25 figures. Index. 1955. London: Published for the Ministry of Labour and National Service by Her Majesty's Stationery Office. Paper cover. Price 4s. 6d.

Clearly this country is unique in providing such comprehensive facilities for the rehabilitation of the disabled. For the first time "a simple, concise and factual account of the provision now made