living limbs with an opaque scale added. To accommodate the drawings to a uniform size of page the limb measurements have been reduced, for example, forearm and gluteal region $\frac{2}{3}$, thigh $\frac{2}{3}$, leg $\frac{1}{2}$. The drawings show the muscles with the most frequently found position of the entry of arteries and nerves. Minor constants and variations are clearly stated in the text. The intrinsic muscles of the hand and foot are not considered.

The book is clear, concise and comprehensive, and can be confidently recommended to all whose interest lies in the peripheral nerves, vessels and muscles. It can be predicted that its place on the library shelf will be often vacant.—R. I. STIRLING.

THE PATHOLOGY AND SURGERY OF THE VEINS OF THE LOWER LIMB. By Harold DODD, Ch.M., F.R.C.S., Surgeon to St Mary's Hospital; and Frank B. COCKETT, M.S., F.R.C.S., Surgeon to St Thomas's Hospital, London. Foreword by R. R. LINTON, M.D., Assistant Clinical Professor of Surgery, Harvard Medical School. 10×7½ in. Pp. ix+462, with 313 figures. Index. 1956. Edinburgh and London: E. & S. Livingstone Ltd. Price 65s.

Disease of the leg veins is one of the commonest ailments of our population, and Mr Dodd and Mr Cockett have performed a valuable service in writing a very comprehensive survey of venous disorders. This beautifully produced monograph is arranged in three parts which follow one another in natural sequence. In Part I the surgical anatomy of the veins of the leg is described and illustrated clearly. This part includes also an interesting historical survey of the subject by Dr S. T. Anning and a chapter on the physiology of venous flow by Mr C. I. Murphie.

Part II deals with the pathology and surgery of the superficial veins. There is an excellent chapter on the diagnosis of varicose veins, in which the various tourniquet tests are well described. It is rightly emphasised that incompetence of the short [external] saphenous vein is best detected by palpation in the popliteal space, and it might be added that this should be done with the knee slightly bent. The indications for injection of varicose veins are set out clearly and the various techniques explained fully. The operative treatment is then dealt with in detail. The authors favour the stripping operation for both the long [internal] and short [external] saphenous systems, and the text describing this operation is essentially practical and reflects the great experience of the authors.

Part III deals with the pathology and surgery of the deep and communicating veins. Here the authors state that "the role of incompetence of the great or small saphenous system in the production of ulcers and induration of the ankle is relatively unimportant." In support of this thesis a series of 182 patients with leg ulcers of venous origin is quoted, in which 48 per cent of the ulcers were unaccompanied by incompetence of the superficial system of veins. The authors believe that faulty ankle perforating veins are responsible for most venous ulcers in the typical gaiter area, and this concept is explained fully and with conviction.

Included in Part III is a chapter on venography, and this is followed by a description of the conservative management of venous ulcers. The last chapter deals with the surgical treatment of venous ulcers, and the operations for ligation of the perforating veins at the ankle are given due prominence. The authors, however, are commendably cautious in claiming too much from a follow-up study of less than five years, and no actual figures for the results of such operations are given. This of course is an omission that time and future editions will remedy. Perhaps the authors would also consider including a chapter on "resistant ulcers" in their next edition. It may be that none of their patients will fall into such a category; but a frank analysis of a series of refractory or recurrent ulcers would be of great value, and would make an already comprehensive work complete.

In summary, this is an excellent book. It should be essential reading for every surgeon in training, and surgeons however experienced will profit greatly from a careful study of its contents.—G. W. TAYLOR.

ANATOMICAL TECHNIQUES. By D. H. TOMPSETT, B.Sc., Ph.D., Prosector to the Royal College of Surgeons of England. Foreword by Sir Cecil WAKELEY, Bt., K.B.E., C.B., LL.D., F.R.C.S., Past-President of the Royal College of Surgeons of England. 10×7½ in. Pp. xvi+240, with 83 figures and frontispiece, many in colour. Appendix and Index. 1956. Edinburgh and London: E. & S. Livingstone Ltd. Price 35s.

The uninterrupted stream of new technical advances in the field of physics (particularly in electro-magnetics and optics) and of chemistry have relegated the interest in the preparation of human specimens to the background, as if they could only have a place in the large anatomopathological museums of the medical faculties. The express purpose of this book, written by such an expert as the Prosector of the Royal College of Surgeons of England, is to help all those engaged in the study of the human body in normal and pathological conditions, in themselves preparing any

specimen which may be available. This book is intended to serve as a guide for the preparation of gross anatomical specimens and not as an exhaustive source of information on methods of revealing the minute vessels and other fine structures; consequently no reference is made to the more modern methods of ocular microscopy or of micro-radiography, which have been the object of other studies and on which a suitable literature is already available.

The approach is a comprehensive one. The first part of the book is dedicated to the description of the several methods of dissection, fixation and mounting, and to the techniques of vascular, lymphatic and duct injections. The preparation of the containers, particularly of Perspex (polymethyl methacrylate), is described in detail, and even the instruments to be used are indicated; and in the

FIG. 37

second part details are given for the preparation of particular organs such as the lungs, heart, brain, temporal bones, liver, kidneys, and spleen. Dr. Tompsett's book is written in a clear and simple style; it is well illustrated and excellently produced; and it ought to find a place on the bookshelves of all those interested in acquiring anatomical and pathological knowledge by the direct study of specimens, both human and from animals. The author and the publishers must be thanked for giving us such a useful and handsomely produced book.—J. TRUETA.

TRAINING OF THE LOWER EXTREMITY AMPUTEE. By Donald KERR, B.B.A., Director, National Institute for Amputee Rehabilitation, Lodi, New Jersey; and Signe BRUNNSTROM, M.A., Consultant in Amputee Training, Institute of Physical Medicine and Rehabilitation, New York University-Bellevue Medical Center, New York. Introduction by T. Campbell THOMPSON, M.D. $9\frac{1}{2} \times 6\frac{1}{2}$ in. Pp. xx+272, with 153 figures. Index. 1956. Springfield, Illinois: Charles C. Thomas, Publisher. Oxford: Blackwell Scientific Publications. Price 50s.

In his introduction to this book Dr T. Campbell Thompson, M.D., states that the authors, one an exceptionally able above-knee amputee and the other a very accomplished and experienced physical therapist, have had a unique experience of the problem discussed in the book. and this claim is borne out by the excellence of the subject matter and its arrangement.