place the correct evaluation on the abnormalities noted in all articulations comprising the shoulder joint in various decades." Similarly, the author does himself an injustice when he says in the Preface that this work "reveals" that "some of the operative procedures designed previously to stabilise these joints when disrupted, should be discarded and others adopted." The merit of his contribution to the surgical anatomy and pathology of the shoulder girdle cannot be measured by its possible clinical application. Nor should it be.

DePalma's monograph will no doubt have a permanent place in the libraries as a basic reference for anyone working on the problem of "wear-and-tear" joint degeneration in general, as well as to those who continue to pursue the specific problem of the much-studied but still elusive etiology of chronic pain and dysfunction in the shoulder girdle.—Lipmann KESSEL.

THE FOREQUARTER AMPUTATION. By H. F. MOSELEY, M.A., D.M., M.Ch. (Oxon.), F.R.C.S. (Eng. and Canada), F.A.C.S., Hunterian Professor, Royal College of Surgeons of England; Assistant Professor of Surgery, McGill University; Associate Surgeon, Royal Victoria Hospital, Montreal, Canada. Illustrated by Helen T. MACARTHUR, B.A. 11×9 in. Pp. viii+79, with 11 plates in colour and 25 figures in black and white. 1957. Edinburgh and London: E. & S. Livingstone Ltd. Price 42s.

Two very valuable contributions to our knowledge of the surgery of the root of the upper limb are to be found in the historical account of the forequarter amputation—priority for which is correctly ascribed to Ralph Cuming, Naval Surgeon in Antigua—and in the account of the various traumatic forequarter amputations recorded up to date. It is pleasing to note the author's acknowledgment of help from the learned librarian, W. R. Le Fanu, of the Royal College of Surgeons of England, and from that courteous stalwart, Samuel Wood, of the same institution.

A word of praise is due to the beautiful illustrations which are a feature of the book, but one cannot help wondering whether the operation is worthy of all the pages and illustrations that have been devoted to it, for, as I once wrote of the "hindquarter" amputation, "this is a simple surgical exercise, well suited for an elderly surgeon possessed of a modicum of anatomy and the ability to stand by an operating table for a mere fifty to sixty minutes on end." In the case of the "forequarter" procedure the demands on the surgeon's time are even less.

The book deals with the Berger and the Littlewood procedures: every surgeon is entitled to his preference: from a considerable experience of each I am happier with the anterior approach.

The book is produced in the best style of E. & S. Livingstone.—Gordon GORDON-TAYLOR.

CAMPBELL'S OPERATIVE ORTHOPAEDICS. Editor J. S. SPEED, M.D.; Associate Editor Robert A. KNIGHT, M.D., Memphis, Tenn. Third edition. Volumes I and II. 10×7½ in. Pp. 37+2,124, with 1,323 figures, including 2 colour plates. 136 pages of index. 1956. London: Henry Kimpton. Price £14, 10s. for two volumes.

This work is so pre-eminent, and so much a boon companion of all of us, that a review of a new edition might seem almost redundant, but it is eight years since we paid tribute to that of 1949.

Then we missed the first chapter of the original edition—on physiology and pathology of bone, joints and the like. Now we have a restored first chapter on basic science, entitled "Surgical Physiology," but having not the least resemblance to its predecessor. The new chapter deals with such general subjects as: the response to injury; the alarm reaction; blood volume; blood pressure and shock; water and electrolytes; acute renal "shutdown"; respiratory and cardiovascular physiology and disturbances; and nutrition. The value of this chapter needs no emphasis. Otherwise the general arrangement of the work remains as in the second edition. The restoration of a chapter on the tissues, as in the first edition, would not be out of keeping.

Trends and advances have called for many changes in most of the chapters, especially in those on skeletal tuberculosis—still rampant in many communities—infantile paralysis and peripheral nerve injuries.

The excellent discussion of the indications for and choice of operation, and of management after operation, commended in our review of the second edition, is, in the third, done better than ever.

H. N. Smith-Petersen is no longer with us, but his place has been worthily filled by Otto E. Aufranc, and there are six other newcomers to the team, nearly all members of the Campbell Clinic and of the University of Tennessee. We are now shocked to learn of the grievous loss of Robert Knight; he has an enduring memorial.—H. Jackson BURROWS.