The practical application of his investigations leads him to suggest a new operation for recurrent dislocation; this, however, does not look like replacing more established procedures, the reported results not being very encouraging. The zero position is used to explain the efficacy of established methods of treating fracture-separation of the upper humeral epiphysis and fracture-dislocation of the shoulder, and contributions are made in the treatment of displaced fractures of the surgical neck of the humerus and fractures of the upper third of the humerus.

The monograph is very readable, in spite of extensive excursions into trigonometry and mechanics, which may best be passed over by those with primarily clinical interests.—Arthur L. EYRE-BROOK.

The Monteggia Lesion. By José Luis BADO, M.D., Professor of Surgery, University of Montevideo Medical School; Director, Institute for Orthopaedics and Traumatology, Montevideo, Uruguay. Translated from the Spanish by Ignacio V. PONSETI, M.D. 10 × 7 in. Pp. ix + 78, with 59 figures. 1962. Springfield, Illinois: Charles C. Thomas, Publisher. Oxford: Blackwell Scientific Publications Ltd. Price 54s.

This monograph describes the various types of fracture-dislocation of the superior radio-ulnar joint, grouped under the heading of the Monteggia lesion. Most of the material is devoted to a discussion of the anterior dislocation of the head of the radius with fracture of the upper third of the ulna, the injury first described by Monteggia, and the theory that it is a forced pronation injury is firmly upheld; if further proof of this were needed the low incidence of compound fractures in this series, with the wound, if present, being almost always on the anterior surface of the forearm and compound from within, should be sufficient. All the variants of the anterior Monteggia injury are well described, and one interesting suggestion made is that the so-called "pulled elbow" in early childhood is due to the same mechanism; when a child is lifted up by the hand the body may rotate while the hand is maintained in a fixed position, and a forced pronation force may thus be applied to the elbow, causing an anterior subluxation of the head of the radius. In the section on treatment emphasis is laid on the simplicity and effectiveness of manipulative reduction, the key to the reduction being the replacement of the forward dislocation of the head of the radius by full supination, and it is refreshing to note the absence of metallic fixation in the cases reported.

The remaining types of fracture-dislocation of the superior radio-ulnar joint, where the head of the radius is dislocated sideways or backwards, are quite different, being variants of the dislocation of the elbow joint, and this point is well made. In this group open reduction and internal fixation is more often required and the results are less satisfactory. Whether they should be called Monteggia lesions is a debatable point, but their inclusion in this monograph completes a fascinating study of the various ills which may befall the superior radio-ulnar joint. The book has been well translated from the Spanish by Professor Ponseti, and is beautifully illustrated.—E. Mervyn EVANS.

The Spinal Cord. Basic Aspects and Surgical Considerations. By George AUSTIN, Professor and Head, Division of Neurosurgery, University of Oregon Medical School, Chief Consultant in Neurosurgery, Veterans Administration Hospital, Portland, Oregon. Formerly, Assistant Professor of Neurosurgery, University of Pennsylvania. 10 × 7½ in. Pp. xiv + 532, with 363 figures and some tables. 1961. Springfield, Illinois: Charles C. Thomas, Publisher. Oxford: Blackwell Scientific Publications Ltd. Price £10, 12s.

In the preface to this book Dr George Austin states that he had originally intended to write a small monograph on Surgery of the Spinal Cord, but as the book progressed he considered it desirable to expand its scope so as to cover not only the anatomy, physiology and pathology of the cord itself but also of the vertebral column. He would have been better to have confined himself to the small monograph, for the resultant book is an ill-balanced and curiously arranged series of essays from which it is extremely difficult to extract any positive information.

The first four sections are devoted to the clinical aspects and the surgery of injury to the cord, spinal tumours, disc lesions and intractable pain. Then follow three sections on the anatomy and physiology of the cord, separated from the section on pathology by sections on the "Neuro-Roentgenology of the Spine" and "Urologic Aspects of Surgery of the Spinal Cord." The book concludes with a section on rehabilitation and a chapter on regeneration of the cord after trauma.