Sports Medicine. Edited by J. G. P. WILLIAMS, M.B., B.Chir., M.R.C.S., L.R.C.P., D.Obst.R.C.O.G., Registrar, National Spinal Injuries Centre, Stoke Mandeville Hospital; with twelve other contributors. Foreword by Sir Arthur PORRITT, K.C.V.O., K.C.M.G., M.S., F.R.C.S., President, Royal College of Surgeons of England; Chairman, British Association of Sport and Medicine. 9 × 5½ in. Pp. xi+420, with many figures and tables. Index. 1962. London: Edward Arnold (Publishers) Ltd. Price 60s.

It is natural that about a third of this book should be devoted to the common injuries of athletics, but its objects are far wider. The author implores those who are likely to treat athletes in their practices to understand them as individuals and to acquire knowledge of the special physiology of athletics and to have a working acquaintance with athletic techniques. Unless we have this knowledge, the young men and women who ask our help will find the consultation "as frustrating as trying to direct a foreign tourist who doesn't understand a word of English."

The book is written particularly for the general practitioner, but could be read by any well trained physical training instructor or athletic coach. The orthopaedic surgeon will learn from it how to understand the athlete and his problems, and we should all read it, although the elementary anatomy and physiology in Chapters 4 to 8 can be omitted. Chapters 9 to 14, which describe various athletic injuries, are interesting and accurate, but are not intended to be informative to the specialist. The first and last chapters by the editor himself are particularly worth while and instructive to all of us.—W. D. COLTART.

Pathologie des Ménisques et des Ligaments du Genou. Applications Thérapeutiques. By Paul FICAT, Professeur agrégé à la Faculté de Médecine de Toulouse, Chirurgien des Hôpitaux. With a preface by Pr. DUCUING. 9½ × 6½ in. Pp. 286, with 110 figures. Index. 1962. Paris: Masson et Cie. Price NF 50.

This monograph describes in detail traumatic lesions of the ligaments of the knee and congenital, traumatic and degenerative changes in the menisci. It is well set out in a very readable manner and the illustrations and diagrams are excellent. The first part is concerned with the anatomy of the ligaments and menisci correlated with the function of the joint.

Various methods are outlined for treating ligamentous injuries but the evaluation of results is not very critical. It would seem reasonable to expect rather more guidance in a work which is so detailed in other ways.

It is difficult to share the author's obvious enthusiasm for arthrography, for which he claims 95 per cent accurate diagnosis. This is a difficult technique, which in many departments may actually be misleading. It is probable that as much or more information can be obtained from a good history and examination of the joint. Indeed, it is in the remaining 5 per cent of cases in which there is difficulty in diagnosis that an exploratory arthrotomy may be required in any case.

The author states that the conventional vertical incision for meniscectomy is best used, but goes on to say that this is only made possible because arthrography has removed the necessity for a wide transverse incision sectioning the collateral ligaments! Most orthopaedic surgeons in this country would disagree with this.

This work lacks sufficient detail concerning results and it is difficult to know for whom it is written. It can, however, be recommended to those with an especial interest in the knee.—J. P. JACKSON.

Genou—Coxarthroses—Fixateur Externe. By R. JUDET, Professeur agrégé d'orthopédie à la Faculté de Médecine de Paris, Chirurgien des Hôpitaux, with eight collaborators. 9½ × 6½ in. Pp. 124, with 52 figures. 1962. Paris: Masson et Cie. Price NF 28.

This is a peculiar little volume but none the less interesting for that. Its contents are an ill assorted collection of subjects discussed at staff conferences at the Raymond Poincaré Hospital, some of which are calculated to raise the British eyebrow. The division of the medial collateral ligament of the knee joint and subsequent immobilisation in plaster up to the thirtieth day is considered a reasonable approach for a medial meniscectomy and the immobilisation does not appear to cause much concern as far as after-treatment is concerned. Patelloplasty with preserved skin in preference to excision of the patella is recommended after fracture and for osteoarthritis.

The discussion on the indications for the treatment of unilateral and bilateral osteoarthritis of the hip is followed by an introduction to the new Judet prosthesis resembling the Moore prosthesis