Research in Muscular Dystrophy. The Proceedings of the Second Symposium on Current Research in Muscular Dystrophy held at the National Hospital, Queen Square, London, W.C.1, January 3-4, 1963. Edited by the Members of the Research Committee of the Muscular Dystrophy Group. 9×6 in. Pp. 273, with many figures and tables. 1963. London: Pitman Medical Publishing Co. Ltd. Price 30s.

This important volume is a record of the papers and discussions at a symposium attended by many research workers in the field of muscular dystrophy. Regrettably it will be largely unintelligible to the ordinary surgeon.

Several interesting points emerge. The present evidence suggests that a sex-linked recessive gene, carried by the X chromosome, is responsible for this disease in about 90 per cent of cases. In about 10 per cent of cases the condition is inherited by an autosomal recessive mechanism. It is considered that about one-third of cases arise as a result of a fresh mutation in otherwise unaffected families. It has recently been discovered that it is possible to detect by electro-myographic and biochemical means which of the daughters in affected families are carriers, and so to make it possible to prevent some cases occurring.

It is quite right that so much effort should be put into the solution of the genetic and biochemical problems, but it strikes one as a little strange that no mention is made of the care of the present sufferers from the disease.—H. Graham STACK.

Handbuch der Tuberkulose. (Handbook of Tuberculosis.) In 5 volumes. Edited by Professor J. HEIN, Professor H. KLEINSCHMIDT and Professor E. UEHLINGER. Volume IV—Types and Relationships of Extra-pulmonary Haematogenous Tuberculosis. By numerous authors. 1964. Pp. xxxiv+955, with 438 in part coloured illustrations and 86 tables. Stuttgart: Georg Thieme Verlag. Price DM 248.

This work forms the fourth volume of an encyclopaedia of tuberculosis that is to cover all its aspects in five volumes. The first of these appeared in 1958 and was chiefly devoted to the general pathology and bacteriology of the disease. The present volume covers the following subjects: pathogenesis and general morbid anatomy of haematogenous tuberculosis, the morbid anatomy of the extrapulmonary primary complex, tuberculosis of the peripheral lymph nodes, the upper respiratory tract and oral cavity, the clinical and radiological aspects of intestinal tuberculosis, tuberculosis of the mesentery, gut and peritoneum, liver and spleen, meningitis and cerebral tuberculoma, urogenital and skeletal tuberculosis, eye, ear, skin, cardiovascular and endocrine systems and such conditions as diabetes and tuberculosis. For the readers of this Journal the full and valuable article on skeletal tuberculosis by J. Kastert and E. Uehlinger claims particular attention. It runs to almost 100 pages and deals in the first part with all the general aspects of skeletal disease such as epidemiology and statistics, the position of skeletal tuberculosis with reference to other manifestations of the disease, its location and multiplicity, its morbid anatomy, bacteriology, diagnosis and therapy and also complications such as pregnancy and accident. Special chapters in the second part include the vertebrae, the sacro-iliac joint, upper and lower extremities, the chest wall, skull, pelvis and long bones. *Chemotherapy* in general is regarded as a necessary preliminary to surgical therapy, more precisely as a preventive to post-operative haematogenous spread. This also applies to an early mobilisation after surgical treatment of joints for the achievement of a good functional result, as was shown in a series of papers by Michael Wilkinson (1950-59). The authors have no doubt of the favourable action of chemotherapy in the early stages of tuberculosis of the bones and in early synovial lesions. Concerning the histopathology, Wilhelm Kremer's dualistic view has been rightly adopted and the exudative type with predominant necrosis has been distinguished from the proliferative type with early bone atrophy and absorption of bone trabeculae and the formation of dry cavities. Both forms are believed to commence with tissue necrosis, although evidence for this seems largely inferential, if not a literary relic. Individual articles vary perceptibly in value and coverage of extant literature, especially of articles other than German. For thoroughness and soundness in this respect the essays by H. Wissler on tuberculosis of the mesentery, gut and peritoneum and that by Gehrels and Kalkoff on tuberculosis of the skin deserve special mention. Anonymous mycobacterial infection of tonsils and cervical lymph nodes, now a common event, seems to be a grievous omission, and fulminant tuberculous septicaemia would certainly have merited a special chapter rather than casual treatment under various headings such as miliary tuberculosis and blood changes in disseminated tuberculosis. Nevertheless, the work is a rich storehouse of information and literature. It is beautifully though perhaps occasionally somewhat over-illustrated and will be most useful.—Walter PAGEL.