on apparatus and technique. Those who already use the electromyograph and other electronic methods in the analysis of nerve and muscle function will surely find something new and useful in it. A chapter on synthetic E.M.G. waves is sufficiently academic and complex to satisfy the most sophisticated reader.

Because the author is an anatomist, the bulk of the book is concerned with the analysis of muscle function and action as revealed by electromyography as they act over the various joints. There are chapters on muscular tone, posture, and human locomotion and the muscles of the trunk, the muscles of respiration, and the muscles of the ear, throat, eyes and face are not forgotten. This is an anatomical textbook of electromyography and does not concern itself with abnormal findings. Its place in the library of an orthopaedic surgeon is comparable with that of a textbook of topical anatomy. For anyone interested in muscle function, and particularly for the occasional electromyographer, it is an invaluable reference book.—John SHARRARD.

Anatomy and Physiology Applied for Orthopaedic Nurses. By Joyce W. ROWE, S.R.N., S.C.M., O.N.C., Sister Tutor Diploma (London); Principal Sister Tutor, Royal National Orthopaedic Hospital, Stanmore; Member of the Panel of Examiners for the Joint Examination Board and the General Nursing Council for England and Wales; and Victor H. WHEBLE, M.A., B.M., B.Ch.(Oxon.), F.R.C.S.Ed., Dip. Méd. Col.(Antwerp), Consultant Traumatic and Orthopaedic Surgeon, Ashton-under-Lyne General Hospital, Lancashire; Chairman of the Board of Studies, Association of Occupational Therapists; Member of the Panel of Examiners for the Joint Examination Board and the General Nursing Council for England and Wales. Second edition. 8½ × 6 in. Pp. xi + 692, with 337 figures and 2 tables. Index. 1967. Edinburgh and London: E. & S. Livingstone Ltd. Price 45s.

This book covers the syllabus for the certificate in orthopaedic nursing of the joint examining Board of the British Orthopaedic Association and the Central Council for the Care of Cripples. It appears to be a rather formidable book to hand to a young nurse, but it should be realised that it contains sufficient information for the most ardent physiotherapist and is indeed recommended to be used by all types of medical auxiliaries.

The arrangement of the book is attractive, the first section being devoted to a description of the body as a whole and to tissue structure. The middle section is devoted to detailed anatomy and physiology and the last section to regional anatomy. In this section good radiographs are used to illustrate anatomical structure.

The diagrams vary between commendable simplicity and extreme complexity, and the more elaborate anatomical diagrams could be improved by direct labelling of the parts rather than by reference to a table beneath.

The clarity of the type and general layout is excellent and the book has been thoroughly revised since the last edition. It can be recommended with enthusiasm.—H. L.-C. WOOD.

Röntgendiagnostik der Iliosakralgelenke und ihrer nahen Umgebung. (Radiological Diagnosis of the Sacro-Iliac Joint and its Neighbourhood.) By W. DIHLMANN, Chief of the Department of Radiology at the Medical Faculty, Aachen. 7½ × 10½ in. Pp. viii + 112, with 258 illustrations in 141 figures. Index. 1967. Stuttgart: Georg Thieme Verlag. Price DM 48,60.

The book begins with a detailed description of radiological-anatomy and technique. The basic views comprise oblique and straight (prone, supine and axial) projections, tomography, and special stress manoeuvres to assess mobility at the sacro-iliac and pubic joints. Development and developmental defects are discussed, followed by a chapter on sacro-iliitis and its differential diagnosis. Metabolic diseases can affect the bone, cartilage or ligaments of the joints. Paraplegia may be accompanied by osteoporosis and calcification or ossification in muscle, ligaments or tendons. Degenerative disease often follows underlying deformity, and there may be slipping or separation at the sacro-iliac joint or pubic symphysis.

Osteitis condensans ilii, consisting of triangular or oval areas of increased density of spongy bone, is thought to be the result of altered stress on the sacro-iliac joint cartilage. Whilst common in multiparous women, it may occur in nulliparae or in men, and it is occasionally found extending to the sacral side of the joint. Trauma, fatigue fractures and the effect and differential diagnosis of space-occupying lesions in the vicinity of the sacro-iliac joint are discussed.

Whilst the book cannot be read lightly, it provides much interesting information, excellent illustrations and an exhaustive bibliography.—H. SHAWDON.