Der Unfall im Kindesalter. Klinik—Rehabilitation—Prophylaxe. (Accidents in Childhood. Clinical—Rehabilitation—Prophylactic.) Edited by F. REHBEIN. With 130 contributors. Supplement to Band 11/1972 *Zeitschrift für Kinderchirurgie*. 25×18 cm. Pp. 880, with 723 illustrations in 446 figures and 90 tables. Index. 1972. Stuttgart: Hippokrates Verlag. Price DM 120.

Eight hundred and seventy-nine pages on childhood accidents sounds a daunting proposition, but it is a very interesting book. For those who might otherwise be too timid to tackle a German volume of this size, there are many English summaries.

"Accident" is here taken in its widest meaning. After a broad review of epidemiology and relevant statistics, such divergent subjects as birth trauma, resuscitation, poisoning, tetanus, burns and scalds lead into the central theme of accident surgery in childhood. This is dealt with in conventional regional sections—vessels, head injuries, abdominal injuries, urinary tract, etc. In a paper on gastro-intestinal ulceration as a complication of burns (Curling's ulcers) children are reported from the Charles University in Prague to be suffering from it as often as in 17 per cent of the cases compared with 7 per cent in adult cases. In this country differences between the age groups are not thought to be significant, and the total percentage is perhaps a tenth of the quoted figure.

To the traumatologist the contribution by Dr Hackenbroch, Jun., is most valuable. He examines the indications for open reduction and internal fixation in the fresh juvenile fracture and finds it very rarely necessary. Operation is restricted to epiphyseal injuries likely to lead to growth disturbance and loss of function. He regards conservative treatment as correct in *all* fractures of long bones. But later, Dr v. d. Oelsnitz says that in the Bremen Clinic 1951–70 of 630 paediatric femoral shaft fractures as many as 118 children (19 per cent) were treated by intramedullary nailing. In view of the important complications, he now never operates below the age of six, and but rarely above that age. By using the closed method of nailing he tries to reduce the risks of infection, Perthes', neck deformities and avascular necrosis of the head.

This is a lively collection of the views of very experienced observers who have tackled many controversial issues frankly and made their volume profoundly thought-provoking.—H. J. HAMBURY.

Cervical Pain. Proceedings of the International Symposium held in Wenner-Gren Center, Stockholm, January 25–27, 1971. Edited by Carl HIRSCH and Yngve ZOTTERMAN. With many participants. 26×18 cm. Pp. x+221, with numerous figures and some tables. 1972. Oxford, New York, Toronto, Sydney, Braunschweig: Pergamon Press Ltd. Price £7.

Failure of treatment for pain in the neck usually means that understanding of the cause of the pain was inadequate. Such failure is common, so the results of the deliberations of this assembly of anatomists, physiologists and clinicians were eagerly awaited. The book presents the sum of knowledge of this distinguished gathering, and for that reason alone it is worth reading. Whether it guides us much further from our present position along the road of understanding is a different matter.

The contributions deal with various aspects of cervical pain—anatomical, physiological, pathological and radiological. Discussion of treatment is limited to the contribution by Dr Ruth Jackson on "Non-surgical Therapeutic Aims". As would be expected of such contributors, all these matters are set out with great clarity; as would be expected of such editors, all is arranged in good order and with admirable precision. The editors and the contributors deserve our thanks for the work that has produced this compilation.

It is, however, as a record of the state of play and as a basis for further thought and work that this book is valuable. Thus, Dr I. Wickbom, dealing with radiological matters with the utmost clarity of thought and expression, has to admit that, "It is in the majority of cases hardly possible to decide with any certainty which disc is responsible for the patient's symptoms". How much all of us in the outer darkness agree with him! It is, however, refreshing to see the stress laid on the importance of improving our knowledge of pain mechanisms in general: too often it is defect in this knowledge that leads us to false conclusions. Perhaps the most thought-provoking contribution is the short one from Dr Ian Macnab. He apologises for "just asking questions", but the questions he asks are some of those that must be answered if we are to make sense of this difficult subject and to rationalise our methods of treatment. Certainly, the concept of the factor additional to compression that is necessary for the production of pain is one that has up to now been inadequately explored. Dr Macnab should, however, have remembered—or at least have remembered to state—that the emerging nerve root is enclosed in a sleeve of *dura mater*.

It is perhaps a pity that no representative of those who have most success in the treatment of cervical pain—namely, the osteopaths—contributed to or was present at this symposium. We may