

The arrangement of the book is open to criticism, for the section on the examination of the patient might more conveniently be placed before the descriptions of dysmenorrhoea and irregular haemorrhage. The book's main fault is the disproportion between the extreme detail of some parts and the superficiality of others. The author discusses carcinoma of the vulva very superficially and should have written much more on leucoplakia and kraurosis of the vulva. The chapter on ovarian tumours is inferior to the rest of the book. The literary style is harsh and often discordant. The sentences are short and to the point—rather like a mass production of Macaulay. The historical allusions are of very great interest and are well chosen, particularly the story of the work of Marion Sims on urinary fistulas and of McDowell's operations for the removal of ovarian tumours. On the other hand, the author does not mention Matthews Duncan's description of metropathia haemorrhagica, nor give priority to Percival Pott for removing both ovaries from a woman in the child-bearing period of life. Perhaps the most admirable feature of the book is the great emphasis the author places on the diagnosis of carcinoma of the cervix in its earliest stages and the very careful discussion of the aetiology of this form of carcinoma. All who teach gynaecology should study the pages after p. 493, on the treatment of carcinoma of the cervix. Throughout the book operative treatment is well described and well illustrated, in particular the Manchester-Fothergill operation, which is beautifully illustrated. The author emphasizes the interposition operation too much. The book is long, and, though not sufficiently comprehensive, should be invaluable to senior students of gynaecology.

WILFRED SHAW.

OBSTETRICS FOR STUDENTS

Obstetrical Practice. By Alfred C. Beck, M.D. Fourth edition. (Pp. 966; 1,068 illustrations. 38s. 6d.) Baltimore: The Williams and Wilkins Company. London: Baillière, Tindall and Cox. 1947.

This book was first published in 1935 and is perhaps not so well known in Britain as other standard textbooks published in the U.S.A. It is intended for undergraduates and young practitioners, but we might expect that the former at least would be deterred by a book of nearly 1,000 pages. However, large clear print with ample spacing and profuse illustrations account for its size. The subject matter, with the possible exceptions of chapters on the physiology of the foetus and placenta and on the maternal metabolic changes during pregnancy (which are otherwise excellent), is not too detailed or advanced and makes for easy reading and learning. The illustrations, which are mainly simple line drawings, are basically the work of the author and constitute the most attractive feature of the book. Having studied these no student should find the slightest difficulty in understanding the various mechanisms of labour, pelvic anatomy, or obstetric manoeuvres.

The order in which the author discusses the subjects departs from tradition and has much to be said in its favour, although it is unfortunate that he describes pelvimetry in association with the management of labour rather than as a feature of antenatal care. The author never fails to refer to the physiological background when describing clinical conditions. The pen portraits of famous obstetricians of the past, which are interspersed throughout, serve to broaden the outlook of the reader and to arouse interest. Indeed, the book has many good points, but the chapter on analgesia and anaesthesia deserves special mention.

In general, however, the author's outlook on management and treatment is so conservative as to run the risk of being termed old-fashioned. This criticism applies especially to the sections on breech delivery and uterine action and its disorders, as well as many others, and to the attitude adopted throughout towards lower-segment caesarean section. For instance, is pubiotomy really preferable to this operation in the treatment of mento-posterior position? It is unfortunate that the methods of treatment advocated tend to lag behind our knowledge of physiology and pathology, for the book has otherwise so much to commend it—above all its teaching diagrams.

T. N. A. JEFFCOATE.

BOOKS RECEIVED

[Review is not precluded by notice here of books recently received]

The Training of a Doctor. By the Medical Curriculum Committee of the B.M.A. (Pp. 151. 7s. 6d.) London: Butterworth. 1948.

This book was the subject of a leading article in the *Journal* of May 29 (p. 1033).

Mental Testing of Hebridean Children in Gaelic and English By C. A. Smith, M.A., B.Ed., and D. N. Lawley, M.A., D.Sc. (Pp. 42. 1s.) London: University of London Press. 1948.

A monograph, with statistical analysis, on the testing of 415 children.

The Question of Lay Analysis. By Sigmund Freud. (Pp. 81. 9s.) London: Imago Publishing Coy. 1947.

An essay on psycho-analysis by laymen, first published in 1926

Die Beiderseitige Nierensteinkrankheit. By Dr. B. Bibus. (Pp. 169. 60 Austrian shillings.) Vienna: Wilhelm Maudrich. 1948.

A monograph on bilateral renal lithiasis, with emphasis on treatment.

Ärztliche Rheokardiographie. By W. Holzer and K. Polzer. (Pp. 141. 15 Austrian shillings.) Vienna: Wilhelm Maudrich. 1948.

The author describes his method of electrocardiography with a special circuit.

Grundriss der klinischen Diagnostik. By Hans Horsters, M.D., D.Ph. (Pp. 698. Rm.18.) Berlin: Urban and Schwarzenberg. 1947.

A manual of clinical diagnosis in medicine.

The Practice of Group Therapy. Edited by S. R. Slavson. (Pp. 271. 21s.) London: Pushkin Press. 1947.

Articles by American psychiatrists and psychologists on different aspects of group therapy.

Gynaecological and Obstetrical Anatomy. By C. F. V. Smout, M.D., M.R.C.S., and F. Jacoby, M.D., Ph.D. 2nd ed. (Pp. 248. 40s.) London: Edward Arnold. 1948.

Intended primarily for undergraduate and postgraduate students.

Modern Mental Treatment. By E. C. Dax, M.B., B.S., B.Sc., D.P.M. (Pp. 88. 4s. 6d.) London: Faber and Faber. 1947.

An account of mental treatment by physical methods; intended for nurses.

Problems of Hospital Administration. Edited by C. E. Prall. (Pp. 106. No price.) Chicago: Physicians' Record Coy. 1948.

A study based on personal interviews with 100 hospital administrators.

The Pathology of Nutritional Disease. By R. H. Follis, Jr., M.D. (Pp. 291. 35s.) Oxford: Blackwell. 1948

A textbook with bibliography.

Some British Pioneers of Social Medicine. By Major Greenwood, D.Sc., F.R.C.P., F.R.S. (Pp. 118. 12s. 6d.) London: Geoffrey Cumberlege (O.U.P.). 1948.

Essays on public health in the 18th and 19th centuries.

Fear. By M. P. Leahy, M.B., B.Ch., B.A.O. (Pp. 165. 10s. 6d.) London: Research Books. 1948.

The treatment of fear by suggestion described for the intelligent layman.

Youthful Lawbreakers. Report by the Liverpool Council of Social Service. (Pp. 45. 2s. 6d.) Liverpool University Press. 1948.

A study of juvenile delinquency in Liverpool

Bilharzial Cancer. By M. A. Afifi, M.B., Ch.B., M.R.C.S., L.R.C.P., D.M.R.E. (Pp. 111. 16s.) London: H. K. Lewis. 1948.

A monograph on radiological diagnosis and treatment.

Operative Gynecology. By H. S. Crossen, M.D., and R. J. Crossen, M.D. 6th ed. (Pp. 999. 75s.) London: Henry Kimpton. 1948.

A profusely illustrated textbook, with operative details.

Hypnotherapy. By M. Brenman, Ph.D., and M. M. Gill, M.D. (Pp. 276. 18s.) London: Pushkin Press. 1948.

A survey of the literature.

SOCIETIES AND LECTURES

Monday

EDINBURGH UNIVERSITY: PHYSIOLOGY CLASSROOM.—June 14, 5 p.m. "Evolution of Medical Education in Scotland," by Dr. Douglas Guthrie.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, London, W.—June 14, 8 p.m. *Clinical meeting.*

Tuesday

INSTITUTE OF DERMATOLOGY, 5, Lisle Street, Leicester Square, London, W.C.—June 15, 5 p.m. "Diseases of the Nails," by Dr. H. Corsi.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY.—At Royal Society of Medicine, 1, Wimpole Street, London, W., June 15, 8.30 p.m. Cavendish Lecture: "The Atom and its Energy," by Prof. E. N. da C. Andrade, F.R.S., D.Sc., Ph.D.

Thursday

ROYAL SOCIETY, Burlington House, Piccadilly, London, W., June 17, 2.30 p.m. Discussion: "Analogues of Growth Factors in Relation to Antibiotics." To be opened by Sir Paul Fildes, M.B., B.Ch., F.R.S.

ROYAL SOCIETY OF TROPICAL MEDICINE AND HYGIENE.—At 26, Portland Place, London, W., June 17, 7.30 p.m. Annual general meeting. Presentation of the Chalmers Medals for 1941, 1943, and 1945. 8.15 p.m. "Pulmonary Bilharziasis," by Prof. M. Erfan (Cairo).

Saturday

LONDON ASSOCIATION OF THE MEDICAL WOMEN'S FEDERATION.—At West Middlesex County Hospital, Isleworth, June 19, 3 p.m. *Clinical meeting.*

APPOINTMENTS

STOKE-ON-TRENT: NORTH STAFFORDSHIRE ROYAL INFIRMARY.—*Honorary Consulting Physician*, A. Wilson Gill, M.D., F.R.C.P. *Honorary Consulting Ophthalmic Surgeon*, T. Aubrey Jones, M.R.C.S., L.R.C.P., D.O. *Honorary Consulting Physician and Dermatologist*, J. Lindsay Boyd, M.D.Glas., F.R.C.P.Ed. *Visiting Physician*, C. H. Catlin, M.D., M.R.C.P., D.A. *Visiting Paediatrician*, D. C. Thursby-Pelham, M.R.C.P., D.C.H. *Visiting Ophthalmic Surgeon*, P. J. M. Kent, M.R.C.S., L.R.C.P., D.O.M.S. *Visiting Dermatologist*, E. M. Donaldson, M.D., M.R.C.P.Ed., D.P.H.

BIRTHS, MARRIAGES, AND DEATHS

BIRTHS

Broughton.—On May 30, 1948, at Guy's Hospital, London, S.E., to Josephine, wife of David H. Broughton, M.B., B.S., a daughter.

Hamilton.—On May 17, 1948, at the Colonial Hospital, Port-of-Spain, Trinidad, to Menna (née Lloyd-Morgan), wife of Dr. Frank A. E. Hamilton, a son.

Sheldon.—On May 27, 1948, at Westminster Hospital, London, S.W., to Beryl (née Stott), wife of Dr. J. V. Sheldon, a son—John Richard.

Zinovieff.—On May 21, 1948, at Roke, Benson, Oxon, to Joan, wife of Dr. A. Zinovieff, a daughter.

MARRIAGES

Goulden—Macrae.—On April 17, 1948, at St. Andrews Church, Drumsheugh Gardens, Edinburgh. Captain Richard Patrick Goulden, R.A.M.C., to Margaret Fionnla Macrae, Q.A.I.M.N.S./R., daughter of the Rev. F. J. L. Macrae and the late Mrs. F. J. L. Macrae, 129, Comiston Drive, Edinburgh.

Pringle—Childs.—On May 22, 1948, at Portsmouth Cathedral, Edward Pringle, M.B., B.Ch., of Wolverhampton, to Hanan Mary Childs, of Southsea.

DEATHS

Bailey.—On May 27, 1948, at University College Hospital, London, W.C., William Arthur Bailey, M.R.C.S., L.R.C.P.

Dougal.—On June 4, 1948, at The Private Patients' Home, Manchester Royal Infirmary, Daniel Dougal, M.C., T.D., M.D., F.R.C.O.G., Professor of Obstetrics and Gynaecology, University of Manchester, aged 63.

Dunlop.—On May 31, 1948, Thomas Dunlop, M.B., C.M.Ed., D.P.H., late M.O.H. for Torquay.

Hatrick.—On May 31, 1948, at Surbiton, Charles Dainty Hatrick, M.D., formerly of New Barnet, Herts, aged 72.

Inness.—On May 30, 1948, at The Old Parsonage, Horwood, Bideford, Devon, William James Deacon Inness, C.M.G., M.R.C.S., L.R.C.P., late D.M.S.S., West African Medical Staff.

Mooney.—Recently, at 98, Morehampton Road, Dublin, Herbert Charles Mooney, M.B., B.Ch., F.R.C.S.I.

Oxford.—On May 30, 1948, at 10, Manchester Street, London, W., Arnold Whitaker Oxford, M.D., aged 93.

Scott.—On May 21, 1948, at Avonmore, Antrim, Northern Ireland, Thomas Boyle Hill Scott, M.B., Ch.B.Ed., aged 73.

Sikes.—On May 25, 1948, at Porthcurnick, Portscatho, Cornwall, Alfred Walter Sikes, M.D., D.Sc., F.R.C.S., aged 78.

Smith.—On May 26, 1948, at "Deilburn," Bricke Road, St. Albans, James Johnston Smith, M.B., Ch.B.Glas.

Spencer.—On May 30, 1948, at 144, Cornwall Avenue, Blackpool, Sandy Spencer, M.R.C.S., L.R.C.P.

Thomson.—On May 30, 1948, at 24, Barns Street, Ayr, Charles Samson Thomson, M.D.Glas., D.P.H., aged 67.

Tuke.—On May 25, 1948, at 12, Comely Park, Dunfermline, Alan Leonard Smith Tuke, M.C., D.L., M.B., C.M., F.R.C.P.Ed., youngest son of the late Sir John Batty Tuke, Edinburgh.

Welsh.—On May 13, 1948, at Wahroonga, Australia, David Arthur Welsh, M.D., F.R.C.P.Ed., Emeritus Professor of Pathology, University of Sydney.

Whitaker.—On May 12, 1948, Leonard Edgar Whitaker, M.R.C.S., L.R.C.P.

Williams.—On May 30, 1948, William Roger Williams, F.R.C.S., of "Morven," Walton-by-Clevedon, Somerset, aged 94.

Wilson.—On May 20, 1948, at 2, Kensington, Bishop Auckland, Douglas Edward Wilson, M.D.Aberd.

Any Questions?

Correspondents should give their names and addresses (not for publication) and include all relevant details in their questions, which should be typed. We publish here a selection of those questions and answers which seem to be of general interest.

Care of Teeth in Children

Q.—I find that dentists frequently recommend parents to bring their young children aged 3–6 years to them to have the cavities of their temporary teeth filled. They do so, I am told, in order to prevent decay starting in the permanent teeth when these come. Is this advisable, and is there any scientific foundation for doing so?

A.—It is most important that children should have adequate conservative dental treatment to their temporary teeth. This is not for the reason given, but to prevent crowding of the permanent teeth due to early loss of the deciduous molars, which is the commonest cause. The first tooth of the permanent series to erupt is the first molar, which erupts behind the deciduous ones. The next permanent teeth are the incisors in front, which replace the deciduous incisors. If the temporary molars have been lost owing to caries the permanent teeth move in to fill the gap. There is then insufficient room for the canines and premolars, which erupt later, to come into proper alignment.

Corrected Sedimentation Rate in Anaemia

Q.—In anaemia the erythrocyte sedimentation rate is raised. Is there any simple calculation by which the sedimentation rate can be corrected in cases of anaemia to obtain a comparative value for a normal haematocrit reading without having to consult complicated charts?

A.—The relationship between sedimentation rate and erythrocyte concentration is not a linear one, and no simple calculation will "correct" for anaemia. One writes "correct" in inverted commas because the "correction" makes certain assumptions and is not entirely reliable. Nevertheless, Wintrobe (*Clinical Haematology*, 2nd edition, p. 322) finds that in practice the corrected figure is usually informative. The most satisfactory kind of chart to use is the one printed in Whitby and Britton's *Disorders of the Blood* (5th edition, p. 606), from which for a given haematocrit and sedimentation rate one can read off the corrected sedimentation rate and discover whether it is doubtfully increased, slightly increased, and so on. This introduces the right note of caution into the result and discourages the laying of too much stress on small differences.

Treatment of Paget's Disease of Bone

Q.—Is there any recent treatment for Paget's disease of bone? A female patient of mine, aged 60, has it in one femur, which is greatly bowed. The diagnosis has been confirmed radiologically.

A.—The answer must unfortunately be "No." There is no new treatment of proved value in relieving the symptoms of this disease. Many workers have claimed that Paget's disease is one manifestation of hyperparathyroidism; and Helfet (*Brit. J. Surg.*, 1939–40, 27, 651) has further suggested that the hyperparathyroidism may be secondary to a retention of phosphates in the body. On this assumption he has advised treatment by small doses of aluminium acetate, which inhibits the absorption of phosphates from the intestine by combining with them to form insoluble aluminium phosphate, which is excreted unchanged from the bowel. The theory underlying this form of treatment has not been proved, and, although promising results were claimed in a few patients, much further confirmation is required before the method could become widely accepted. Meanwhile some of the older forms of treatment are still in use, including "guttering" of the bone, deep x-ray therapy, and occasionally osteotomy. There is a tendency, however, to advise against any active treatment, particularly when the symptoms are not severe, in view of the uncertainty of the results, and because of the rare but definite complication