Harvey's notes are often taken almost verbatim from Caspar Bauhin's *Theatrwm Anatomicum* which had already been translated into English in 1616. Five plates are included from this work, together with portraits of Harvey and Bauhin. This is a collector's piece and should be on the shelves of anyone interested in medical history. If you cannot buy it, then borrow it—if you can find an owner willing to part with it! Three hundred years ago this book would have been a best-seller, catching the market when knowledge was escaping from "the decent obscurity of a learned language." Now, I fear the publication will reap more glory than guineas, but bibliophiles the world over will remain indebted to the publishers and to Mrs Gweneth Whitteridge for the excellence of her translation and the liveliness of her comments.—J. G. Bonnin.

**Dynamic Classification of Bone Dysplasias.** By Philip Rubin, M.D., Chief and Professor, Therapeutic Radiology Senior Associate in Medicine and Surgery, University of Rochester Medical Center, Strong Memorial Hospital. 10½ x 8 in. Pp. xiii + 410, with many figures and tables. Index. 1964. London: Lloyd-Luke (Medical Books) Ltd. Price 20s.

This book is not just another well produced, lavishly illustrated and expensive atlas of bone dysplasias. Although it possesses all these qualities it also attempts to rationalise the classification of these conditions in a manner which mercifully reduces the need for that parrot fashion learning which their study usually demands.

This helpful method divides the long bones into four zones—epiphysis, physis (the epiphysial plate), metaphysis and diaphysis, and the bone disorders are allocated as primary disorders (hyperplasia or hypoplasia) of one or other of these. They are further divided into "congenita" and "tarda" depending upon the age of their appearance and this in general relates to the severity of their manifestations. Inevitably some unfamiliar names emerge. Dysplasia epiphysialis punctata becomes multiple epiphysial dysplasia congenita, whereas the relatively benign dysplasia multiplex is described as the "tarda" variant of the same dysplasia. Similarly dysplasia epiphysialis hemimelica (Trevor's disease) disappears and is replaced by the less clumsy epiphyseal hyperplasia. The author is on less certain ground when "mentation" becomes a synonym for intelligence. The classification cannot, of course, be expected to provide an entirely acceptable pigeon-hole for all the general skeletal disorders but it goes a long way towards creating order and thereby our understanding of these conditions.

The description of the normal anatomy of mature and growing bone is a model of clarity and the illustrations embellish the text. The radiographs of the abnormal are of the highest quality and their value is often increased by illustrations of the gross and microscopic anatomy. The bibliography is very extensive and will be of great value.

Your reviewer was delighted to be offered this book, not only because it is both interesting and instructive but also because it is a most worthy bookcase companion for Fairbank's masterpiece.—G. C. Lloyd-Roberts.


Dr Boyes has done a monumental work in bringing up to date this fascinating and classical textbook. The work now reaches nearly 800 pages, is crammed full of illustrations, a number of which are in colour, and is perhaps more readable than in the original edition. Much has been added to this edition, particularly on splints, reconstructions based on the Littler neurovascular pedicle and on the principles of the surgical treatment of rheumatoid arthritis.

The chapter dealing with flexion contracture is that in which the main principles and practice of skin transfer are discussed and this remains very much as in previous editions. Bunnell was a plastic surgeon before he became a hand surgeon and his huge experience in surface reconstruction speaks throughout. His preference for tubing flaps is natural enough, but his reason for discussing flaps in great detail ahead of the obvious advantages of free grafts in many places I find obscure. Were I an
orthopaedic surgeon I would find this chapter puzzling. The statement that "the base (of the flap) should be broad enough for the length of the flap to ensure vitality," followed by "the ability to judge this can be gained only by experience" must have precipitated many square yards of skin loss! I think that for the sake of clarity this chapter could be reorganised, but it still remains full of common sense and reflects an experience of a lifetime.

Dr Boyes is to be congratulated on inflating the volume to its present size and yet managing to maintain its character and basic honesty. There are no false hopes or spurious results in this book and it must continue to flourish as one of the great surgical textbooks of the century. So long as its future stays in the present hands it will remain a "must" for all plastic and orthopaedic surgeons.—Richard Battle.


The first fifty-nine pages of this book are concerned with an interesting review of the historical aspects of spinal injuries from the Egyptian period to the end of the nineteenth century. This is followed by separate sections on the cervical spine and on the thoracic and lumbar spine, with a final chapter on neurological injury.

Each of the sections on spinal injury is comprehensive and includes a description of the detailed anatomy of the vertebrae and their ligamentous and muscular attachments, of the radiography of the spine, special investigations and differential diagnosis.

The clinical aspects of injuries ranging from sprains through ruptured ligaments to dislocations and fractures, are described in detail. The methods of treatment are well explained, are sound, and would gain general acceptance except perhaps the use of weights of 50 pounds and over for skull traction in some cases of cervical dislocation.

The section on neurological injury by contrast deals superficially and briefly with the neurological signs of cord damage, but does include some useful advice on the care of the paraplegic.

The book is profusely illustrated, the reproductions with one or two exceptions being of high quality, and there is an excellent bibliography. This volume presents a good exposition of conventional treatment of injuries of the spine at the present time.—V. Logue.


This extensive volume is a review of the problems of Scheuermann’s juvenile kyphosis. The author has had access not only to new material but a follow-up of Dr Scheuermann’s own cases. The review is almost unbelievably painstaking; for instance, the wedging was measured in 4,665 vertebrae.

There are a number of points of interest brought to our notice by the author. One of the difficulties of Scheuermann’s kyphosis is to determine criteria by which it may be judged to be present or not. This is much more difficult than it might seem and the author who does describe exact criteria stresses these difficulties. One problem is that for several years before the condition can be diagnosed in a child there is seen to be a postural kyphosis which gradually becomes structural and the point at which it changes to pathological must be very difficult to determine by any criteria. He noticed scoliosis of a minor character to be commonly present, a finding that many people have noted.

He found very little difference in the incidence in males and females and, unlike earlier authors, found there was no relationship to occupation. It has often been stated that this was much more common in agricultural workers doing heavy lifting during the latter few years of growth, but this he found was not confirmed in his series. The most interesting feature, perhaps, was the remarkable familial incidence suggesting that this condition may well be of genetic origin.

In discussing treatment, which he does rather briefly, he comes to the conclusion that there is very little advantage in any of the classical forms of treating this condition. With this, one would agree, but equally there is no discussion of the use of the Milwaukee brace which would seem to be the logical method of treating this condition and one which experience demonstrates provides positive correction of the kyphosis in most of the patients seen in the earlier stages of this condition.—J. I. P. James.