To his colleagues in the profession, especially his contemporaries, the first chapters, which deal with his early days in medicine, his adoption of tuberculosis as a specialty in consequence of developing that disease, and his pioneer work in collapse therapy in this country, are of greater interest than the later ones, which are rather for enlightenment of the general public as to hygiene and social problems, especially those connected with tuberculosis. There are many well-told anecdotes about eminent physicians of the older generation, and much that enables those who can look back on the medical world of forty-five years ago to see more clearly than they otherwise might do the problems of that time and the evolution of methods for solving them.

When the author deals with the problems of medical education as he sees them to-day, his suggestions are perhaps more debatable, though there will be many to agree with his comments on what is often called "penny in the slot" diagnosis of disease. At any rate he has, we may be sure, thoroughly enjoyed "getting things off his chest"—which after all is to be expected of an expert in pulmonary lesions. At Mundesley he confesses that he finds it necessary to be an absolute autocrat—though doubtless he does not regard his patients as under-dogs—and it would certainly be interesting to know what his nickname is, to learn whether he has carried there the old sobriquet of student days, "Severe" Pearson, given to him by antinomy as being the very last adjective that could justly attach to him, or whether anyone has thought to call him "Mr. Chips." It is typical of his reticent modesty that he nowhere mentions that he was a rowing blue at Cambridge and a member of one of the outstanding crews of those days.

Notes on Books

All About the Deaf is a handbook compiled by the National Institute for the Deaf (105, Gower Street, W.C.1: 3s. or 3s. 3d. post free). Its forerunner was first issued over twenty years ago. Since that time there has been a great stirring of the public conscience in regard to the needs of the deaf and of the deafened, and this is illustrated in the number of agencies which now exist for their relief and help, and the variety of forms which such assistance takes. The legal provisions which affect the deaf, the education of the deaf and dumb, the work of local authorities on behalf of the deaf community, the recent developments in hearing aids—these and many other matters are set out so as to convey the maximum amount of information in the most concise form.

The Cardio-pulmonal Function during Pregnancy, by Dr. G. WIDLUND, Supplement I to *Acta obs. gynae scand. XXV.*: (Uppsala) is a symposium valuable both for its original studies and for its comprehensive bibliography of some 300 papers in which there is incidentally, no doubt as a consequence of war, a noticeable shortage of references to recent English and American contributions. The pregnant woman is shown to have an increased oxygen consumption, increased vital capacity, and slight increase in pulse rate and blood pressure, and the material will allow a considered evaluation of the techniques of pneumothorax and pneumoperitoneum. The painstaking study is presented in English and gives one more proof of the liberality of Swedish medical education.

Preparations and Appliances

CHIP GRAFTS IN THE NECK OF THE FEMUR

Mr. F. P. FITZGERALD, F.R.C.S.I., Harley Street, London, W.1, writes:

One of the great difficulties in the treatment of fractures of the neck of the femur by nailing is the delay before union is complete. Some years ago, in an attempt to overcome this, I treated a fairly large series of cases by grafting the neck of the femur with the fibula, alone and reinforced with a nail (*Lancet*, 1943). The results were disappointing. Recently I have utilized chip grafts from the ilium, so far with complete success, and a detailed account of the cases is in preparation. The following is an account of the method and instrument used.

The instrument, or chip graft gun (see Fig. 1), resembles a large trochar and calibrated cannula with a funnel (A and B), and a special hollow auger bit to fit the cannula (C). Two guide wires are placed in the neck of the femur. A nail is threaded over the upper one in the usual way. The auger-bit is fitted into the cannula, and threaded over the lower guide wire. By rotating the handle a hole is bored in the femoral neck along the guide wire, and the instrument forced into the bone to the required depth, as noted on the calibrated cannula. The auger-

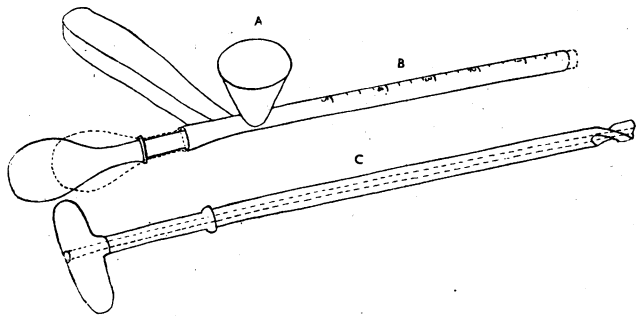

FIG. 1.—A, funnel or hopper. B, graduated cannula with solid plunger or trochar in place. C, hollow auger-bit which fits the cannula.

bit is then withdrawn, leaving the cannula in place. Finely cut chips are then dropped into the hopper, and packed home through the cannula with the solid plunger or trochar. The cannula is gradually withdrawn as the space becomes filled with chips, and the instrument is removed when the cavity has been filled to the outer cortex of the bone. The wound is then closed in the usual way.

The instrument can also be used for extra-articular arthrodesis of the hip-joint.

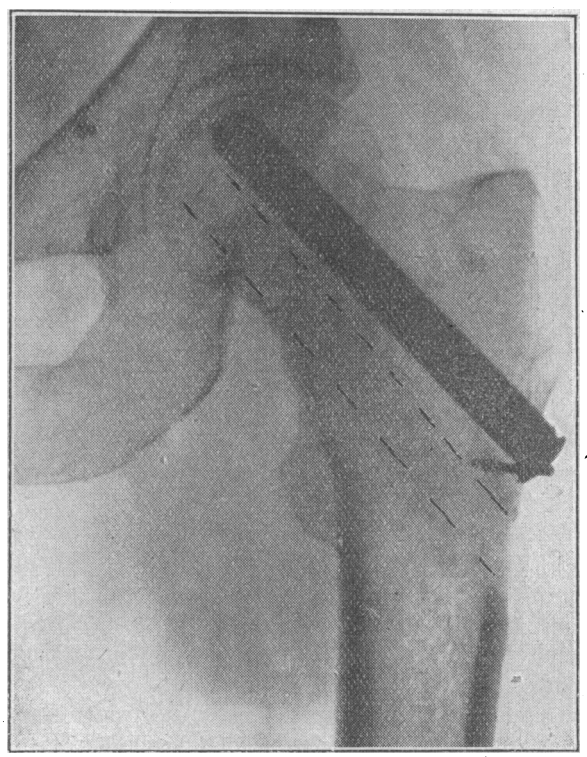

FIG. 2.—A case one month after operation.

The broken lines in Fig. 2 show the position of the chip grafts.

Nurses' Salaries Committee Notes nos. 12 and 13 have been issued by the Ministry of Health (price 4d. and 2d. respectively from H.M. Stationery Office). The former is concerned with (a) female hospital nurses, (b) male hospital nurses, (c) public health nurses, (d) ex-Service male student nurses, (e) trained nurses: title to increments in respect of service in the Forces, and (f) post-certificate leave for public health nurses; and the latter with nurses variously employed in the public health services. The recommended revised scales have effect from Jan. 1, 1946.