

from being practically obsolete (p. 14), the English system of calibration for urethral instruments is the routine one in England for urethral metal bougies. It is surely incorrect to say that it is impossible to distinguish between solitary cysts and renal neoplasms, and that the isthmus of a horseshoe kidney is usually thin and fibrous. Pyuria, mentioned as possible diagnostic evidence of renal carbuncle, should be stated to be a late sign, being characteristically absent in early cases; while the spine is concave, not convex (p. 109), towards a perinephric abscess. Nor need one agree with the advocacy of bilateral ascending pyelography in renal tuberculosis, or of drainage of the renal pelvis by a large rubber tube in nephrolithotomy. On the other hand, among the factors necessary for success in plastic operations on the renal pelvis, one would expect mention of temporary renal drainage and of catheter splintage of the uretero-pelvic junction.

Former scepticism as to the value of urinary antiseptics is no excuse for describing the newer drugs as urinary "antiseptics" (p. 77). This is the most amusing of a disappointingly large number of grammatical and textual inaccuracies, including "dorsal prone position" for "dorsal" or "supine" (p. 6), "Pessar" for "de Pezzer" (p. 25), "Kollman" for "Kollmann" (p. 73), "pyramides renalis" for "renales" (p. 84), "adnexae" for "adnexa" (p. 108), "Wilm's" for "Wilms's" (p. 116), "corilliform" for "coralliform" (p. 128), "flouroscopy" for "fluoroscopy" (p. 134), "detriment" for "deterrent" (p. 151), "epididimus" for "epididymis" (p. 156), "catheterized specimen" for "catheter specimen" (p. 165—it is the patient, not the specimen, that is catheterized), "total cystotomy" for "cystectomy" (p. 174), "Littre" for "Littre" (p. 203, etc.), "corporum cavernosum" for "cavernosorum" (p. 241), "lympathoia" for "lymphopathia" (p. 245).

These minor criticisms are not inconsistent with the cordial recommendation of this book as a good introduction to urology.

AN ENCYCLOPAEDIA OF LOCAL GOVERNMENT

The Municipal Year Book and Encyclopaedia of Local Government Administration. (35s. net.) London: The Municipal Journal, Ltd.

Of all the useful annuals which come to our table hardly another can have assembled within its pair of covers such a multitude of facts as the *Municipal Year Book*. To begin with, it contains the names and addresses of the members of all the municipal corporations, the county councils, and the councils of urban and rural districts in the country, together with much information about each of these local authorities, including their rateable value, their debt, if any, and the amenities publicly owned. There is also a summary of the effects of recent legislation and legal decisions on local government. In the section devoted to public health services an analysis is given of the expenditure by county councils on certain purposes of public health; surprising variations exist between administrative counties in this respect. For example, for every thousand of their respective populations, Huntingdonshire spends twice as much on maternity and child welfare as Berkshire, and the Kesteven division of Lincolnshire twice as much as the adjacent county of Leicestershire. On tuberculosis, again taking the same unit of population, Surrey spends twice as much as Hampshire; on venereal diseases schemes little Rutland spends more than four times as much as the East Riding; and on the medical inspection of elementary school children Hertfordshire spends only half of what is spent in Cambridgeshire, and

little more than one-third of what is spent in Wiltshire or Staffordshire.

The Minister of Health pays tribute in a foreword to the action of the great local authorities, which are also the great hospital authorities, in making immediately available to the Government all their vast resources of hospital accommodation, staff, equipment, and organization. He says that the casualty scheme could never have taken shape without the help which they afforded. It is indeed a strange incongruity that local government services which express what is most domestic, progressive, and humane in the life of a people should be thrust into the forefront of national defence, but the various authorities have in general shown themselves as resolute and thoroughgoing in their A.R.P. activities as in dealing with parks or libraries or public cleansing. What they have had to cope with may be inferred from the fact that fifty-three official circulars have been issued by the Home Office on the single matter of fire protection in the event of air raids. The year 1939 will be historic in the annals of local government, and we can see the historian in some happier time finding great treasure in such a volume as this, not least in the emergency statutes, rules, orders, regulations, and Ministerial instructions which it embodies.

HEARING AND EQUILIBRIUM

Hearing and Equilibrium. By H. Macnaughton-Jones, M.B., B.Ch., B.A.O., R.U.I. (Pp. 128; 48 figures. 7s. 6d.) London: Baillière, Tindall and Cox. 1939.

In a modest volume entitled *Hearing and Equilibrium* Dr. H. Macnaughton-Jones has put forward a mechanical explanation of the functional activities of the middle ear and the labyrinth. The principal part is devoted to the question of hearing, and the view propounded is that wave motion is directed to the membrane over the fenestra rotunda and that the basilar membrane and associated structures convert the cochlea into a series of resonators, or rather into a graduated resonator, capable of responding to an infinite gradation of frequency. As it is not possible to demonstrate this mechanism, the author has constructed a series of models as evidence of the accuracy of his views. The models certainly act in the manner which he claims, but conclusions drawn from models are really identical with the original assumptions and cannot be regarded as scientific proof. The author, while admitting this, is nevertheless convinced of the truth of his propositions, but he forgets that the highly damped state of the cochlea rules out the simple picture of a row of resonators, nor is the view that vibrations enter by the round window and the explanation given of the function of the ossicles likely to be generally acceptable.

While this highly ingenious mechanical investigation of the ear is of the greatest interest, it does not provide a complete physiological explanation, taking no account of the microphonic action of the middle ear and of modern investigations into the electrophysiology of the cochlea.

HAEMATOLOGY

L'Hématologie: Clinique et Laboratoire. By P. Émile Weil. (Pp. 270; illustrated. 3.25 dollars.) Paris: Masson et Cie. 1939.

Emile Weil's primer of clinical and laboratory haematology will be welcomed as a revival of the old style of presentation by those who were interested in the blood before Kaznelson had dethroned chlorosis for idiopathic hypochromic anaemia or Minot and Murphy had discovered the liver treatment of pernicious anaemia. The French excel at a natural, and naturalistic, approach to biological

topics, and whether they are writing of bees or blood cells depict them as living things in simple language with a minimum of theorizing. To write a readable handbook of blood diseases without mentioning Castle or the porphyrins or the serum iron is indeed a triumph, but Emile Weil achieves it. We welcome too an author who has the temerity to describe the Tallqvist haemoglobinometer and not repeat the latest patter about copper or cobalt. It has been his aim to put cytology in the first place. He has not tried to write a textbook of blood diseases—that becomes progressively less easy as the discoveries of haematology are assimilated into general medicine—but he does give a good description not only of the examination of the blood but also of the cytology of exudates and punctures of the marrow, spleen, liver, and lymph glands.

We would not recommend this book as a text for the M.R.C.P. examination or even for a postgraduate course in haematology under some of our sterner pundits. But we would like to leave it in the side-room for students who are prepared to get their fingers dirty with Romanowsky stains and experience the thrill of first seeing Cabot's rings or Türk cells. It is not too expensive for the purpose, and it has some very pretty plates.

Notes on Books

The *Textbook of Medical Treatment*, by various authors, edited by three Scottish professors and with a foreword by another, was warmly welcomed in these columns on its appearance last summer (July 1, 1939, p. 17). A reprint, which is in fact more than a reprint, has now been issued by the publishers, E. and S. Livingstone of Edinburgh (price 25s.), the large first edition having been exhausted within seven months of publication. The whole book has been revised and certain errors of omission and commission corrected. Owing to the rapid advance of sulphonamide chemotherapy these emendations have been particularly numerous and extensive in the sections on cerebrospinal fever, septicaemias, venereal diseases, and respiratory diseases. A separate section on female sex hormones has been written by Dr. T. N. MacGregor, and some new pages have also been inserted on the treatment of alcoholism and drug addiction at the end of the section on psychotherapy in general practice.

Doctor Joan, of Australia and India, by BARBARA UNDERHILL, B.Sc., is published by the Church of England Zenana Missionary Society, 19, Conway Street, Fitzroy Square, W.1 (1s.). The strenuous life of a woman medical missionary is recounted in this short biography. Dr. Joan Taylor went from Australia to India, and from 1933 to 1937 laboured in Amritsar, the North-West Frontier, and Sukkur, Sindh. At each place she had extensive hospital and out-patient work, to which she gave herself with courage and devotion. The understaffed conditions in the hospitals proved too much for her strength, and she died at Karachi, whither she had gone to recuperate from exhaustion. The many illustrations in the book from photographs taken by "Doctor Joan" give a good idea of her surroundings, and most of the letterpress is composed of the descriptions she sent home about her life in India.

In the new edition of *La Maladie Hypertensive* (Paris: Masson et Cie, 0.75 dollar) Professor A. DUMAS gives an account, chiefly from the clinical aspect, of essential hypertension, tracing the history of the condition from the early symptomless stage to the usual termination with organic changes in heart, brain, and kidneys. He has little or nothing new to add to previous accounts of the symptoms, and mentions only very briefly the recent interesting work on the experimental production of hypertension by renal ischaemia, which suggests that the kidney may play a more important part than the sympathetic nervous system and the endocrine glands in human hypertension. Nervous and endocrine factors

are, however, considered by Dumas to be more likely at fault. There is a good deal of repetition in the book, but it may be recommended as giving a clear survey of the course of the disease.

In the Service of Suffering: Phases of Medical Missionary Enterprise, by Dr. CLEMENT C. CHESTERMAN, with a foreword by Viscount Sankey, is published in London at the Edinburgh House Press, price 2s. This handbook deals with Protestant medical missions in different lands. The first part is concerned with the Christian mission of healing; the second part describes in a somewhat sketchy way various hospitals in Africa, India, and China. The volume could with advantage have been double the size. It will be useful to students and nurses who think of dedicating themselves to medical mission work, a life in which, judging by the story told, there is a rich reward in every way except financially.

Preparations and Appliances

A SHORT ARTIFICIAL ARM

Dr. J. M. BARNARD (Sidcup, Kent) writes:

I enclose drawings of a short artificial arm which has been worn by one of my patients for several years in preference to a full-length arm, which he found clumsy and inconvenient in use.

This patient, left with a seven-inch stump in 1915 as a result of war wounds, was fitted with the usual arm, which he found such a nuisance that he did without it. As a result of this,

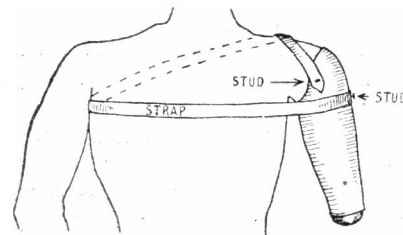


FIG. 1.—Front view of left arm in position, secured with one strap.

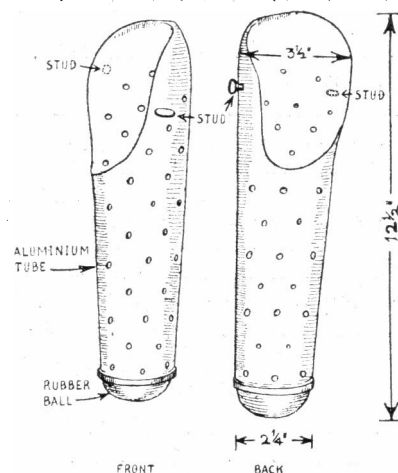


FIG. 2.—Aluminium case for left arm, with solid rubber ball at end, secured by single strap. Weight, 10½ oz.

and the fact that he was an architect, he developed a scoliosis and fibrositis of the back from postural faults when he was working or writing. He consulted me for the muscular pain in the back and loin.

I recommended him to have made a short arm just over elbow length fitted at the end with a rubber (sorbo) ball; this enabled him to sit normally at his desk and steady his papers with the ball. He has found it so useful that he has encouraged me to bring the appliance to your notice, as he feels sure there are many who would find it extremely useful.