

## BOOK REVIEWS

*Elastic Joints*

**The Ehlers-Danlos Syndrome.** Peter Beighton, M.D., M.R.C.P. (Pp. 194; 63s.) Heinemann. 1970.

Dr. Beighton has an impressive experience of this rare abnormality of connective tissue in which the skin and the joints are so extensible that the sufferers are often able to earn a living as the "India-rubber man" of the fairground. In this preface he notes that only 300 cases are recorded in the world literature, but he has personal experience of 130 patients in Great Britain and North America.

His monograph of some 190 pages deals in a logical fashion with the historical aspects of the condition, the clinical manifestations, the pathology, including the disordered physical properties of the skin, and the differential diagnosis. That the condition is

not always a dangerous one is shown by two photographs of the same patient with the disorder, the one in childhood and the other at the age of 82.

One of the most fascinating aspects of the condition, the tendency to spontaneous haemorrhage, is discussed in detail. The author's view is that, though abnormalities of platelet structure and function cannot be discounted, the major cause of the bleeding lies in the fragility of the perivascular connective tissue and the walls of the small blood vessels. The amino-acid composition of the collagen and elastin seems to be normal, and no really convincing evidence exists to incriminate deficiency of cross-linkage at fine fibril level. Nor is the evidence that copper deficiency is a factor very impressive, depending as it does on the production of comparable disorders in

animals fed on a copper-free diet. In fact apart from the fact that the condition is undoubtedly a hereditary one, inherited as a rule as an autosomal dominant trait, nothing is known about its causation.

If longevity is possible for sufferers from this disorder, normal health is not. Joint instability, spinal scoliosis and kyphosis, pseudotumours due to haemorrhage, gastrointestinal bleeding, and a whole host of other symptoms affect its victims. All these complications are dealt with at length in the monograph. Though this book will appeal to a small reading public confined to those interested in connective tissue, Dr. Beighton is to be congratulated on a scholarly study of a fascinating condition.

D. M. DOUGLAS

*Gynaecological Pathology*

**Pathology in Gynecology and Obstetrics:** C. Gompel, M.D., F.I.A.C., and S. G. Silverberg, M.D. (Pp. 550; 350s.) J. B. Lippincott. 1970. U.K.; Blackwell.

This book does not entirely fulfil the promise of its title, for the obstetric section consists only of two chapters, dealing with ectopic pregnancy and placental pathology respectively. The latter chapter, written by Wilkin, is an essay in applied pathology, discussing the correlation between lesions of the placenta and fetal morbidity and mortality. It is to be regretted that there are not chapters in similar practical vein on other important conditions in obstetrics, such as toxæmia.

In contrast, gynaecological pathology is dealt with comprehensively. Not surprisingly, in view of the book's primarily Belgian authorship, diseases of the breast are included. Each chapter begins with a brief account of the embryology and normal anatomy of the tissues with which it is concerned. The pathological changes are fully described, and where appropriate their clinical significance is also discussed. Most of the debatable topics, such as the vulval dystrophies and the correlation between morphology and function in ovarian tumours, are well expounded. Streak gonads and their tumours are one of the few subjects of present interest dealt with too sum-

marily. The text is concise and little of its character or lucidity appears to have been lost in translation. The photomicrographs and other illustrations, all in monochrome, are numerous and most of them are good. There is an unusually large and very well selected list of references at the end of each chapter.

This is a sound, modern work, of value both to the trainee and to the established pathologist; it has also a sufficient clinical slant to interest the gynaecologist. It is unfortunate that its price is very high, particularly in relation to the cost of other comparable texts.

A. S. WOODCOCK

*Landmarks in Cardiac Surgery*

**The History of Cardiac Surgery 1896-1955.** Stephen L. Johnson. (Pp. 201; 91s.) Johns Hopkins Press. 1970.

This slim volume covers in a succinct and at times almost whimsical way the story of cardiac surgery up to the year 1955. Its appearance is an opportune reminder of the early struggles and of the hard-won achievements that form the firm foundation on which rest most of the more recent, and often highly publicized, developments in cardiac surgery.

No history of cardiac surgery is complete or indeed can possibly make any sense without a review of the development of all the vital diagnostic and support techniques that have made it possible to operate successfully on an abnormal heart. The author has dealt with these briefly in a series of

vignettes and a wealth of quotations from first-hand accounts. Particular attention is given to the gradual emergence of reliable anaesthetic techniques for open chest surgery, angiocardiology, cardiac catheters, and finally hypothermia and "heart-lung machines." It is often forgotten that the discovery and later development of heparin were vital for open-heart surgery. The text is enhanced by excellent line drawings, including portraits of the great, some of whom have a passing resemblance to apotheosed Caesars.

The slow start at the beginning of the century contrasts with the rapid crescendo of achievement after 1945. The book describes the gradual dawning of a realization that the heart, far from being virtually untouchable in an almost mystical sense, was in fact quite tough and reliable if

treated properly. This phase was followed by sporadic attempts at heart operations by brilliant surgeons who were ahead of the support techniques their times could afford. The last phase covered by this history is opened by the repair of patent ductus by Gross in 1938.

The passage of time and the tremendous growth of cardiac surgery in recent years has given to these early achievements a new perspective. Among the quotations that, like good wine, are enhanced by age is one from Souttar's description of a successful operation he carried out in 1925 on a case of mitral valve disease, using that most sensitive of instruments—the educated forefinger.

"Owing to the simplicity of the structures, and, oddly enough, to their constant and regular movement, the information given by the finger is exceedingly clear, and personally I felt an appreciation for the mechanical reality of stenosis