The format and layout of the book and its individual chapters are excellent. For each specific syndrome, the lesion and its primary characteristics are first defined, and then follow sections on clinical features, radiological findings, laboratory findings, histopathology, genetics, differential diagnosis, management and prognosis. An extremely useful and succinct summary comes at the end of the description of each syndrome. The illustrations are generally of good quality and representative. Many of them have been culled from centres in all parts of the United States and some from other continents.

The parts of the book that will appeal most to orthopaedic surgeons are those concerned with orthopaedic management. This is the first book concerned with generalised bone diseases that I have read in which the reader is given really useful and specific advice about orthopaedic management. The author particularly emphasises the dangers of atlanto-axial instability in many of these disease syndromes—mucopolysaccharidoses, metatrophic dwarfism, and some varieties of congenital multiple epiphysial dysplasia and spondylo-epiphysial dysplasia. Failure to be aware of this problem may result in a child, who, though dwarfed, is making good functional and developmental progress when he develops partial quadriplegia due to a minor accident involving the cervical spine. Such a catastrophe in an already disabled child can be prevented by early atlanto-axial fusion. recommendations for the surgical management of hip or knee deformities and dysplasia are conservative and always tempered by the fact that so many are liable to rapid recurrence of a deformity and by the unpredictability of the result. As he says in his preface, "I was doing all right until they operated on me" was the disturbing comment made by many disproportionately short statured persons that he saw during his genetic orthopaedic Fellowship year. This book is invaluable in its balanced recommendation for surgery that is either essential, optional or inadvisable. He mentions specific surgical and orthopaedic problems that beset some dwarfisms because of their liability to infection or poor skin healing and there is adequate mention of non-orthopaedic abnormalities and complications of which the orthopaedic surgeon must be aware.

Each section and syndrome is provided with a good and accurate list of references, most of them up to date to the end of 1972, a significant point in relation to conditions whose diagnosis is being daily facilitated by modern techniques of biochemistry and ultramicroscopy.

Such criticisms as I have of this splendid book are minor ones. The use of abbreviations is sometimes a little irritating and one has to get used to mentally translating PsA-SED into pseudo-achondroplastic spondylo-epiphysial dysplasia. Sometimes subclassifications are so detailed that the author is in danger of classifying for classification sake. The sections on the fragile bone diseases, kyphoscoliotic syndromes and lower body segment anomalies are disappointing compared with the excellent sections devoted to the more generalised conditions such as the mucopolysaccharidoses.

Although the book is essentially a reference book, I can recommend it not only for every general medical library, paediatric library and orthopaedic library but for many individual orthopaedic surgeons who, from time to time, are presented with a problem in the management of a dwarfing condition. With the help of this book the orthopaedic surgeon will become adequately informed on the paediatric and radiological aspect of many generalised bone diseases and competent in his recommendations for their orthopaedic management.—W. J. W. Sharrard.

Radiological Atlas of Bone Tumours. Volume 2. By the Netherlands Committee on Bone Tumours. 29.5 × 25 cm. Pp. xiv+600, with many figures and some text. 1973. The Hague and Paris: Mouton and Company. Price Dfl. 185.

This book provides an admirable companion to that published on malignant neoplasms by the Netherlands Committee on Bone Tumours in 1966, to which your reviewer gave an enthusiastic reception. The format is identical. Opportunity has been taken to tabulate the anatomical sites and age and sex incidence of no fewer than 2,634 cases. These include 1,293 primary malignant tumours of bone (being enlarged from 793 in the first volume) and 1,341 benign lesions. The latter are subdivided into 675 innocent neoplasms and 589 benign tumour-like abnormalities of the skeleton. The statistics for the first volume have been brought up to date and a new chapter on synovial sarcoma has been included, with illustrations of ten cases.

To any student of the subject these tables and the histograms of the sex and age incidence must supply endless interest. The authors point out that the problems referred to them concerned cases in which the radiological and histological interpretation presented some element of doubt, so that the incidence of any particular lesion cannot be regarded as being entirely representative of its actual occurrence.

In the main part the experience recorded correlates with that of workers in this country, but some startling variations may be observed. In the first volume the absence of a peak age group for