The leg phantom usually conforms to the posture of a natural limb, but the arm phantom is more often away from the "natural" position. This is probably because the arm has a more highly specialised function than the leg, and may explain also why the phantom is more often identified with the artificial leg than with the artificial arm. Identification of the phantom with the artificial leg is used in walking—or the phantom may disappear when the limb is worn. The artificial arm, however good and well controlled, cannot approach in function the highly specialised and sensitive natural hand and fingers, so that the "phantom" does not help the use of the artificial arm in the same way.

The sensations after the loss of a limb bear many resemblances to those in peripheral nerve injuries: for instance pain is more common in high amputations, where division is nearer the parent neuron and more fibres are divided. Some of the referred sensations aroused by pressure on the neurona, or by other stimuli applied to the stump, resemble sensations referred to a painful area after nerve injury. In amputees there are many complex and seemingly contradictory findings not entirely explained by the hyperexcitability of the central nervous system and the retention of a topical distribution of the sensations, nor by the attempt at adaptation by a central shift in functional organisation. Whatever the true explanation of the varied and often unpleasant experiences of some amputees, there seems little doubt that the psychological make-up of the patient affects their interpretation and accounts for the failure of many recognised methods of treatment to achieve lasting improvement in some individuals.

The author is to be congratulated on his painstaking investigation of only a comparatively small number of cases. The translation has made the earlier parts of the book a little difficult to read; but the discussion of the findings, the summary and the conclusions are logically set out and easily understood.—T. Ritchie.


This monograph reads like a Swiss Guide Book. The illustrations are not quite up to the standard of the holiday brochures but its layout is pleasing and sections are easily found. It contains little that is new. It deals largely with observations about injury and the technique of repair. This monograph is probably unique in that in a reasonable compass it states the essentials that are basic to the repair of injured tendons of the hand. It summarises the numerous papers that have appeared recently on this subject and abstracts information from the classical text-book. It is well worth study and is likely to be of use to the surgeon who may be called upon to deal with casual hand injury.—Ronald Furlong.


The entire "Henke-Lubarsch" "Handbook of Special Pathological Anatomy and Histology" (now edited by Robert Rosse of Berlin) makes a formidable row of volumes. Both in its content and in its presentation it sets the highest standards of descriptive pathological anatomy, and it has been for many years an authoritative work of reference. The present volume, by Professor Werthemann of the University Institute of Pathology at Basle, dealing with "Malformations of the Extremities," is the most recent addition to the series of volumes dealing with the locomotor system.

The types of malformation discussed are nearly all congenital, and the book does not include accounts of any generalised skeletal diseases which may involve the limbs, even when, as in the case of some chondrodystrophies and of osteogenesis imperfecta, these are thought to be related to "developmental" processes. The remaining field of malformations, however, is thoroughly and systematically covered. In contrast with other volumes of the series there is little actual pathological material illustrated, the ease of radiological study and the infrequent opportunities for the collection...
of post-mortem material being understandable reasons for this. But the radiological data are always interpreted with regard to the underlying tissue changes, and direct comparisons with clinical photographs and pathological specimens are used frequently and with good effect.

The book will take its place as a very useful reference volume, particularly in relation to rare abnormalities, and as such it should be consulted on occasion by the orthopaedic surgeon as well as the pathologist. Some chapters, including the excellent ones on club foot, on congenital dislocation of the hip, and on the accessory bones of the hand and foot, have more frequent clinical associations and merit considerable attention from all interested in these subjects.—H. A. Sissons.


This book is a vast compendium; the author states that he has co-ordinated and integrated material from the available publications. Some of the book, for example the anatomical and structural section, is pure repetition. The chapter on "Neoplastic Tumors of the Knee" is unconvincing and is a re-hash of the ordinary tumour story that one can find in any high-class surgical journal. These criticisms are mentioned first to bring into relief the value of the book as a whole. It is a monument, meant to last. It denotes erudition and plain hard work. Much of the book is an intimate personal account of what the author practises and preaches. In matters of opinion, the views of others are freely quoted. The book is of formidable size and therefore can only be classed as a reference volume and so will live on a bookshelf. It will be found only in libraries because it costs £6 a volume. When it is referred to in order to find the answer to an unusual problem, the answer will almost certainly be found.—Ronald Furlong.


Mr Law is one of the leading exponents in this country of the operation of cup arthroplasty for osteoarthritis of the hip. The present monograph, which is based on an essay for which he gained the Robert Jones Prize and Gold Medal, is essentially an account of the technique, management and results of his own series of 160 patients, forty-four of whom had bilateral operations. The description of cup arthroplasty is preceded by a brief account of conservative management, including methods of physiotherapy, joint injections and manipulations. Capsulectomy combined with cheilectomy and joint neuroectomy are described as alternative but less satisfactory procedures. In the author's opinion a vitallium mould arthroplasty, by Smith-Petersen's technique, "is a sound procedure for relieving pain, correcting deformity, maintaining stability and restoring between one-half and two-thirds of the normal range of movement."

Something less than the first half of this small book is devoted to a consideration of the etiological factors. There is some speculation about the role of arterial degeneration in the production of arthritis in the hip, but on the whole the author produces no new suggestions to explain the high incidence of "primary" arthritis of the hip. He does suggest, however, that relatively slight epiphysial displacement may lead to sufficient distortion to initiate osteoarthritic changes, and it is claimed that the evidence for this can be seen in the radiographs and at operation. Your reviewer remains unconvinced by the radiographic evidence proffered by the author in Figures 7 and 8, but would like to have Figure 5 re-labelled "Old Slipped Epiphysis" instead of "Caisson Disease." The book is nicely produced and well illustrated.

This monograph is of considerable importance as a factual account of an operation that has paved the way for the remarkable developments of arthroplasty operations for the hip.—Norman Roberts.