Bjerkelund sums up the position with perception by saying: "Perhaps we must hope that basic research will soon provide us with new and better therapeutics, the clinical trials of which can be better planned from the very beginning if we are willing to learn from our earlier experience. In the meantime, we must tolerate and accept that differences in the evaluation of present data, and differences in practice, will exist in relation to anticoagulant therapy."

M. F. OLIVER.

**Fixation of Fractures**


This volume differs from most books on internal fixation as it is the result of the deliberations of the Association for the Study of the Problems of Internal Fixation—a group of fifteen Swiss surgeons who have worked together since 1958. More commonly such books are monographs advocating a particular appliance, and frequently suffer from the desire of the author to make his appliance universally applicable, whereas it is probably only effective in a few situations. The choice of the correct appliance for the particular fracture is a genuine problem for the traumatologist. The first 74 pages of the book are devoted to a brief history of internal fixation and the technical details and engineering principles involved in the use of screws and plates, intramedullary nails, and pins. One curious omission here is the failure to mention Parham's band, far more satisfactory even as a temporary measure than the cerclage, recommended. Müller has devised a simple appliance for compression of the fracture site while the screws fixing the plate are tightened. Certainly this provides more efficient fixation, but it is questionable how long the compressive force between the bone ends persists. Experimental studies to determine this are being undertaken. If the results are negative, it is doubtful whether the additional technical difficulties of the procedure justify its use.

Wires are still recommended for the fixation of the patella rather than the screw, and fixed angle pin and plates are preferred for pteriochroanhesive fractures to adjustable pins and plates. One can, and many will, differ from the authors in their preferences. This is no denigration of the book, which sets out very clearly that the goal of treatment is function, and that the important injury is the soft-tissue injury and that internal fixation merely plays a part in preventing stiffness by avoiding unnecessary fixation of soft tissues. It is an intensely practical book, the results of wide experience. In the three chapters of the supplement the authors give sound practical advice: first, about the internal fixation of compound fractures; secondly, about the principles of antibiotic therapy; and, thirdly, about the problem of traumatic shock. These round off an excellent book and give it a balance which it does not appear to possess at a casual glance owing to the large number of illustrations on internal fixation, suggesting that all fractures should be internally fixed. This is far from the authors' contention.

The larger section of the book is devoted to the fixation of special fractures. Each surgeon judges the method suited to the fracture and to his own particular experience, but in spite of the variation this will produce it should be possible to determine the best general method, as its acceptance would simplify training and treatment. For example, it should be possible to decide which method provides the best fixation of fractures of the lower end of the fibula—an intramedullary pin or long screw, a screw to the tibia, or pins and loop wires. All of these are illustrated but none specially recommended. There are more ways of killing a duck than chocking it with butter, and an indication of the best method would at times be helpful. The technique of medullary nailing of the tibia requires special instruments, but these seem to get over the main disadvantages of the procedure, and now it may well take its place alongside nailing of the femur as a routine way out of difficulties.

Before one starts on the internal fixation of fractures an essential prerequisite is an elementary knowledge of the anatomy and engineering practice involved. From the point of view of operative technique one would prefer a surgeon with a good home workshop to one with a good library, but of course he should have both, and undoubtedly this book should be to the forefront on the library shelves.

J. G. BONNIN.

**St. Mary's**


St. Mary's Hospital is London's youngest undergraduate teaching hospital. This book, written by a layman, records its notable achievements and progress since its opening in 1851. Many famous men of medicine have built up its proud record, and although occasionally the author's praise strays into hyperbole this only indicates his enthusiasm for the hospital's work. The best chapters in the book (Nos. 3 and 4) deal succinctly with the epoch-making researches of Almroth Wright and Alexander Fleming. Sir Zachary Cope has written the official history of St. Mary's Hospital, and this little book, the author states, owes much to his writings and to material provided by other members of the medical staff.

ARTHUR S. MACNALT.