The Physician's Library.

BOOK REVIEWS.

Les Difformites Acquises.—De L'appareil Locomoteur. Pendant L'enfance et L'adolescence Par Le Dr. E. Kirmisson. Paris: Masson et cie., Editeurs, 1902.

In 1898, Dr. Kirmisson gave the medical world a valuable and comprehensive work on the Surgical Diseases of Congenital Origin. The present is a companion work on the Acquired Deformities of Infancy and Adolescence, and is worthy to take rank with the former.

The work divides itself naturally into four parts: 1. Deformities consequent upon osseous or articular tuberculosis; 2. Those resulting from rick(that and other developmental affections of the skeleton in childhood and adolescence; 3. Deformities following and due to affections of the nervous system, such as infantile hemiplegia; 4. Deformities resulting from traumatism and inflammation, such as osteomyelitis and syphilis.

This constitutes, not only an orderly and logical scheme, but also a comprehensive one for the presentation of the subject. We have long been familiar with the fact that rickets and tuberculosis cause many of the affections which call for orthopedic treatment. But it will be a surprise to many to learn how large a percentage of remedial deformities and disabilities are consequent upon affec-

tions of the nervous system.

The work is rendered more practical and valuable because of its omissions. No attempt is made to give methods of treatment or to describe an apparatus simply to make the book historically complete. Its valuable pages have been employed for the record of such methods of treatment and such apparatus as have proved

their worth by their record of success.

While the space which is permitted will not allow any detailed examination of the principles of treatment advocated, yet one can scarcely allow the opportunity to pass without commending the thoroughly modern and logical views of the author. It is a point that may well be illustrated by his recommendations for the curative treatment of scoliosis. He describes this treatment as: a. Carried out by braces for correcting patients' attitude; b. Prolonged recumbency; c. Orthopedic treatment by means of apparatus and exercises for correction of the deformity. The author gathers together, with a very slight exception, the best that has ever been accomplished for the treatment of these cases. The exception