

If a few remarks are offered of critical character, they are only intended as suggestions to make the work still more perfect in the future.

In the description of the ligamentum teres of the hip joint, no mention is made of its suspensory action. By means of the two ligamenta, the pelvis is suspended from the heads of the femora; and not carried by them pressing against the upper portion of the acetabula. In the dissection of about 1,000 hip joints it was never found absent, though the text states that it often is, or is unimportant in development.

The illustration at page 654 gives the old classification or numbering of the cranial nerves. This is unfortunate. On page 507 the illustration gives these nerves correctly numbered.

In the illustration of the optic commissure on page 721, the old view of inter-retinal fibres is still retained. No such fibres are described in the text, as indeed none such exist.

The illustration of the foramen of Winslow on page 900 is still faulty. The layers of the peritoneum, forming the gastro-hepatic omentum, do not course along as represented in the diagram. The greater sac should be continuous with the smaller sac. The layers are not perforated to form the foramen of Winslow as the diagram shows. The foramen is formed by the constriction of the peritoneum at this point, and is the passage through this constriction from the greater to the lesser sacs.

The cervix uteri is wrongly portrayed on page 1,026. The posterior lip of the os does not recede behind the anterior lip as shown in the illustration.

On page 1,042 there is a faulty diagram of the intercolumnar fibres. The description of these fibres on page 1,043 is not quite clear. They are not connected to the outer third of Poupart's ligament. These fibres are some of the fibres of Poupart's ligament, and diverge in course from it, crossing inwards and upwards to the linea alba. They are therefore some of the fibres of Poupart's ligament taking an independent course.

The description of the appendix is meagre. As it plays so important a part in modern surgery its relations, peritoneal covering, and vascular supply merits more consideration. The appendix sometimes has no mesentery. It lies behind the peritoneum, in the retro-peritoneal tissue. Its perforation in such a situation would give rise to an abscess outside the peritoneal cavity.

Though the above criticisms are offered, they do not detract appreciably from the real merit of the work. Gray's Anatomy is, taken in all, the most useful and trustworthy work on the subject of anatomy within the reach of the student and practitioner. The publishers deserve high praise for the splendid form in which they have gotten the work up.