

for students; this, in fact, is its main purpose. Pathology has been somewhat slighted and is only given in connection with diagnosis and treatment.

Volume II deals with Regional Surgery. In many places the surgical anatomy of the part is given before injuries and diseases of the part are considered. Also, special methods of examination are carefully described. The work has been prepared with care, and as a manual for the student of medicine would be useful, but as a book for the practicing surgeon is lacking in many essentials.

PAUL M. PILCHER.

DISEASES OF THE RECTUM AND ANUS. By HARRISON CRIPPS, F.R.C.S. Third edition. 1907. J. & A. Churchill, London, and W. T. Keener & Co., Chicago.

This book commends itself to the profession as a full and exhaustive treatise upon the department of rectal surgery and well maintains its position as a valuable standard authority.

It presents at the outset a series of plates, of microscopical specimens, of normal tissue, and morbid growths, as valuable, if not more so, than any to be found in kindred works. The initial chapters on Anatomy, and examinations, and Diagnosis, are highly instructive; and the latter abounds in suggestions, alike valuable to the general practitioner and the specialist.

The author's position as to the use, or rather uselessness, of rectal specula except under anæsthesia, and his emphatic declaration that "The idea of using one on the consulting-room couch should be abandoned," may seem startling to many who do use them and value them highly, but it must be confessed his strictures in the main are sound; whether his like criticism of the use of the rectoscope is as warranted may be questioned.

In his consideration and treatment of malformations of the rectum, a most interesting series of cases is given, showing the results of operations in imperforate rectum and anus, in one hundred cases, with a mortality of fifty per cent. In the chapter devoted to hæmorrhoids, we find a careful delineation of the different varieties, with considerable space devoted to etiology, methods of examination, diagnosis, and illustrative cases. The author's suggestions for the treatment of inflamed and strangu-

lated tumors seem highly commendable, especially the one that indicates this condition as a favorable time to induce the sufferer to submit to operation for radical cure.

It is true that many will go through life suffering from this painful and enervating disorder, and never at any other time entertain the idea of an operation.

In the classification of methods for radical cure, the author differs but little from the position taken by most standard authorities. Crushing, and the method of puncture by hot needles, he passes with slight notice. The application of strong nitric acid is considered advisable mainly when the trouble consists of hæmorrhages from superficial vascular areas. Against the method of injections of carbolic solutions, he evidently shares the sentiments so long pervading the leading authorities.

In this he differs materially from the position favorable to this method taken by Professor Tuttle in his recent work (1903). An attitude, we believe, borne out by the experience of many other specialists. The author, however, admits that "in certain selected cases, with the proviso that the patient shall be perfectly at rest for two or three days following the injection, the plan may have a sphere of usefulness." From a large experience with this method the writer would be inclined to dissent from the necessity of imposing this restriction upon the majority of cases. In some it may be important, but if the solution is of moderate strength and the quantity injected not too large for the size of the tumor, the patient, as a rule, will suffer no inconvenience from moderate exercise. The object of this treatment being, as it is so admirably indicated by Professor Tuttle, "The production of an inflammatory induration of the hæmorrhoidal mass," but which falls short of complete strangulation and sloughing.

In speaking of the Whitehead operation, while conceding that in the hands of the originator and others it had proved a valuable remedy, yet he makes the following significant statement, which from one of wide experience, demands consideration. "I have, during the last ten years, seen no inconsiderable amount of anal stricture resulting from this operation."

It is clear, that after according all due credit to other operative methods, the author's preference is given to treatment by ligature with which he combines the free use of the scissors in a method similar to that adopted by Allingham. His preparation

of patients, operative technique, after dressing and care in cases of secondary hæmorrhage leave little to be desired.

For the cure of prolapse of the rectum, the author favors the use of nitric acid in mild cases and the actual cautery in graver ones in preference to excision. The writer has in several cases had excellent results by combining the two methods as follows: Excision of triangular strips of membrane from the protruding mass followed by cauterization (actual cautery) of the denuded surfaces, the result being in each instance satisfactory and permanent.

In the chapter on rectal abscess and fistula in ano the delineation of anatomical relations, pathological processes, complications and methods of operation are very full and complete, but contain little differing from that to be found in other standard authorities.

In the treatment for the cure of anal fissure the author recommends dilatation, combined with the use of the knife, as against dilatation alone, making, he says, "a cut at least an inch in length and one-third of an inch in depth; and the reason for this preference is that "dilatation alone sometimes fails." In the subsequent paragraph he admits that failure also follows the above operation. This position in favor of the knife, as against divulsion is maintained by Kelsey for a different reason, *i.e.*, that it can be used without general anæsthesia with cocaine. Neither of these reasons seems to the writer to justify this preference. Unless the incision is deep enough to set the muscle effectually at rest, it is also liable to failure; and as an operation, it is far more formidable to the patient, involving far more pain, inconvenience and detention from business. It may be fairly asked, what is there against divulsion to justify the surgeon in submitting his patient to this greater sacrifice? What is the aggregate percentage of failures? Dolbeau, of Paris, so strongly favors dilatation that he scarcely admits the justification of any other method. Vanburen and Allingham used it extensively. Matthews says emphatically, "all cases of fissure of the anus, with the rarest exceptions, are curable by divulsion of the sphincter muscles." He makes a marked distinction which the author does not seem to do between fissure, and the rounded irritable ulcer often found higher in the bowel, for which he reserves the use of the knife. The writer's experience in a little over seven hundred cases, treated by divulsion, was prompt healing and disappearance of

all symptoms in ninety-three per cent. (non-malignant). In the chapter on Stricture of the Rectum, we find a very careful and accurate delineation of this troublesome disorder and its complications. The author lays special stress upon the importance of early and faithful efforts at gradual dilatation, when much can be accomplished in the way of cure which later may be impossible. His wise caution against the injudicious use of forcible dilators and deep internal incisions without proper drainage, commends itself to every conservative mind, and his declaration that "posterior line proctectomy, with complete division of the external parts," is one of the most valuable methods that surgery offers for the relief of rectal stricture, will meet with general approval. The same may be said of colotomy, which he commends as the remedy best available for the undilatable tubular strictures, which are located too high for safe incision. Perhaps the section of this work, which will deservedly receive the widest attention, is the several chapters devoted to cancer of the rectum, including the Jacksonian prize essay on Cancer. This voluminous section constitutes without doubt one of the most thorough and exhaustive treatises to be found upon this subject in any kindred work.

Etiology, Questions of Inheritance, Tendencies to Recurrence, Methods of Extinction, are all most fully canvassed, but the main interest centres in the chapters devoted to operative procedures for the relief and cure of this grave disorder.

When we consider that but thirty years ago excision of rectal cancer was mentioned in the leading text books, only to be condemned, the achievements indicated in this and other recent works show the marked advance in rectal surgery as keeping full pace with all other departments. The author's distinctions between cases, where excision is justifiable and those that seem hopeless shows a wise conservatism. He gives a series of tables showing results in a large number of cases that are highly instructive and interesting, and should go far toward removing any remnant of doubt from the professional mind as to the justification of this operation.

Table E is of special interest, showing the mortality from excision in 85 cases, with the subsequent history of those that recovered. Of the 85 cases only 4 died, while 81 survived. Of those recovering, in 33 the disease recurred, while 32 remained well and apparently cured for a period of three years. When

we remember the fatal nature of the unchecked malady the above sum shows most encouraging results.

The table showing the results of the author's private operations in colotomy is also of interest, as indicating this as a valuable means of palliation and prolongation of life in cases where excision is clearly inadmissible.

J. RUSSELL TABER.

EYE INJURIES AND THEIR TREATMENT. By A. MAITLAND RAMSAY, M.D. James Maclehose & Sons, Glasgow, and The Macmillan Company, New York, 1907.

This book, as the author indicates in the preface, is simply a series of lectures on Eye Injuries and Their Treatment collated and edited in such manner as to make them presentable in book form for the use of the general practitioner.

The clear, concise and graceful style of Dr. Ramsay is well illustrated in this volume, and the eleven chapters comprising it make interesting and instructive reading for the specialist and general practitioner as well; though it should be borne in mind that the book is not, and was not intended by the author to be, a standard work on the subject.

In the series of lectures here presented, the author enters not at all into abstruse theory as to the care and treatment of eye injuries but confines himself rather to the domain of reasonable conservatism and of broad personal clinical experience, thereby appealing especially to the general practitioner who, perchance, may be called upon to treat injuries to the eye without having the opportunity of recourse to the specialist.

Notably, chapters IV, V, VI, VII, IX, X and XI are to be commended for the scholarly and lucid manner in which the author presents their subjects and the chapter on serpiginous ulcer of the cornea is a classical thesis in itself.

Penetrating wounds and retention of foreign bodies in the eye-ball are ably and fully described and their management advocated in accordance with the most modern methods.

The Sideroscope, Magnet, X-ray apparatus and the method of localizing intra-ocular foreign bodies are described in a practical way.

The chapter on sympathetic ophthalmia is excellent and, while it adds nothing new to our knowledge as to its causation,