

REVIEWS OF BOOKS.

FACE AND FOOT DEFORMITIES. By FREDERICK CHURCHILL, C. M., Surgeon to the Victoria Hospital for Children. With illustrations of new appliances for the cure of birth-marks, club-foot, etc. Philadelphia: P. Blakiston, Son & Co. 1885. Small octavo, pp. 195.

The reader will be at once struck by the very peculiar title of this book. The author, recognizing this fact in his preface, apologizes for its indefiniteness, and then enters into an explanation which is, if anything, still more indefinite, upon some points, than the title itself. In summing up his definition of the word deformity, he states that "A deformity, in fact, is anything that is manifestly ugly or crooked." In this, sense, therefore, he includes and treats upon birth-marks, congenital growths, nævi and eruptions of the more common kind as they appear upon the face. Surface neoplasms, such as lipoma and epithelioma, together with salivary fistula and dental abscess, receive a fair share of attention. The most frequently met with injuries of the face, including incised wounds, some fractures of bones and burns and scalds, and the removal of cicatrices occupy section III. Section IV. comprises plastic surgery, particularly of the nose and lip. Section V. is made up of deformities of the lips other than harelip. Section VI. is devoted entirely to the eye, and, as one can well imagine, when it is kept in mind that the author's experience is derived largely from the wards of a metropolitan hospital devoted to the care of sick children; this section comprises the greatest variety and extent of diseases. This is followed by a section comprising deformities of neurotic origin.

In the portion of the book devoted to foot deformities, the same general plan is followed, injuries and surface deformities taking precedence; these being followed, in their turn by a section devoted to deformities resulting from badly fitting boots, a subject, by the way, of late sadly neglected by writers of systematic treatises upon general surgery. The author takes up the cudgel against the prevailing fashion of making the foot fit a ridiculously shaped shoe, instead of making the shoe fit a natural foot. The last section treats of congenital and paralytic deformities, and treats mainly of club-foot in its different varieties.

In the first section, the author mentions a device of his own for the systematic obliteration of that hideous deformity known as port-wine mark, as it occurs upon the face. He first prepares the skin by hardening it (how he does not say), and then spreads a coating of collodion over the portion of the growth which he proposes to destroy. The object of this latter is likewise not stated. He then places a thin metal plate perforated with holes about an eighth or a sixteenth of an inch apart, and the holes, presumably, of the same diameter as the width of the spaces, upon the portion of the growth to be operated upon. Through the perforation in the metal plate he makes rapid punctures with a needle cautery into and through the skin. By this means minute dot-scars, as they might be called, take the place of the destroyed blood-vessels constituting the port-wine mark. These latter scars, in time, he asserts, come to resemble the sebaceous puncta in sweat pores in the natural skin. The advantage of the metal plate in thus guiding accurately the needle cautery in the equi-distant distribution of the punctures, is at once obvious, when the effect sought to be attained is considered. This "stippling" process, as the author designates it, is done by a fine Paquelin cautery point. I have described it at some length for the reason that it is one of the "new appliances" for the cure of birth-mark to which attention is called upon the title page.

When speaking of fractures of the nasal bones, in section II. there is a disposition evinced to cling to the old-fashioned pads, strapping and bandages to retain the fragments in position after replacing the latter. Nothing, in our opinion, can be so simple, and withal so effectual as the neat device originating with L. D. Mason. This consists in passing a fine drill transversely beneath the fragments, after elevating and replacing them, and passing in the drill track a coarse needle, or the drill itself may be left in situ. The ends of the drill or needle are left projecting about a quarter of an inch, and over these projecting ends are passed the two extremities of a narrow strip of elastic webbing, pure gum rubber, or, in the absence of either of these, a strip of adhesive plaster snugly applied. Thus, it will be seen, the fragments are supported from behind, laterally, and from before backwards. After the lapse of sufficient time to insure firmness of union, the needle or drill constituting the posterior support is withdrawn. This method has been before the profession for several years, and one may well express surprise that its advantages are not well enough appreciated to at least merit mention in a work purporting to limit itself to "modern methods of treatment." If there were as many apparatuses for the treatment of fracture of the nasal bone as there are for broken clavicle—and further, if the former gave as good results without any dressing what-

ever as the latter, the omission of any particular method would be entirely excusable. But, unfortunately, such is not the case; the same old stock advice is given in this class of cases and, much to our discredit it must be said, about the same average result is obtained when such advice is followed. That is to say, under such treatment as our author advises, it is a very rare thing for a person, who has suffered a fracture of the nose, to possess afterwards that organ in all its pristine shape and beauty. With Mason's method, all this is now changed.

A deflected septum will sometimes give rise to a very decided surface deformity of the nose. The nearest our author approaches to mentioning this rather common deformity is when he speaks of the "Alæ being collapsed and lying against the septum." One would hardly recognize, in this sentence, a description of a deflected septum with occlusion of one nostril and a correspondingly increased patency of the other.

In speaking of the treatment of *naevi* not involving the skin, no mention is made of the application of the elastic ligature. Surely the latter is modern. Again, in the paragraph upon chancre of the lip, he advises that it be "treated very promptly with caustic or excision, or the patient may suffer all the usual and distressing symptoms of secondary syphilis." This is both ancient and modern, although by no means in conformity with the views of our best syphilographers. In speaking of the removal of foreign bodies from the cornea, his forgetfulness to mention the advantages derived from the anæsthetic properties of the hydrochlorate of cocaine is striking, although, further on, he advises a 5 % solution of this drug as a sedative in ulceration of the cornea.

In the treatment of the different varieties of talipes, he speaks decidedly against excision of portions of the tarsus, and recommends the simpler and, in young children, far safer plan of manipulating the foot into position with or without the aid of tenotomy, according to the requirements of the case. For a dressing he uses plaster of Paris.

Take it altogether the book will be of use to the profession. The views advanced are conservative and, in the main, sound. Its writer has evidently endeavored to embody the results of his own experience, which seems to have been somewhat extensive, rather than attempt to bolster up the pet theories of others, and for this reason alone it is worth reading.

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