can be found if sought for assiduously; they will often act as warning before grosser physical signs are found. Reports that a patient with a high blood pressure and marked arteriosclerosis is getting in and out of bed at night without any reason, usually indicates a terminal fall in blood pressure. This is followed by restlessness, coma, and death within days or weeks at the longest.

In general, diminution of tone is the earliest sign of a turn for the worse in an elderly patient. This may be shown by the bodily musculature, as described above, or by the voice, by the myocardium in the form of a falling blood pressure, and as incontinence of faeces, urine, or both. Mental changes may precede or accompany the bodily ones, but in the aged it is hard to tell which alterations of mind are significant and which are not. The important decision is not where the patient is standing in his course of life, but in which direction he is going and at what speed. Finally, it is important to remember that the aged have only managed to survive by reason of the tenacious hold they keep on life. Time and again will they surprise everyone by their powers of recovery, so that a little optimism in prognosis is often justifiable. In any case, it will do more good than harm to all concerned.

BOOK REVIEWS

ADVICE TO THE EXPECTANT MOTHER ON THE CARE OF HER HEALTH AND THAT OF HER CHILD. 6th edn.

By F. J. BROWNE, E. & S. Livingstone, Edinburgh.
1942. Price 6d.

This little booklet by Professor F. J. Browne, which has reached its Sixth Edition reveals the increasing demand from the prospective mother for accurate scientific information about the Greatest Event in Family Life, and it certainly goes a long way to supply that want. It is a handy size, well indexed and carefully divided into easily read sections, so that even women who have little inclination for reading will find it invaluable to them.

A new chapter has been added which gives a short explanation of Pregnancy and the mechanism of Labour including ante-natal instruction in the art of relaxation which until recently has been so neglected by our Obstetricians and Midwives Training Schools. Professor Browne stresses the necessity for practising this art of relaxation during the first stage of labour, to allow for full dilatation of the cervix, and he shows the mother how the character of the pains alters when the second stage of labour is reached, and pushing then becomes involuntary. Midwives as well as mothers would do well to absorb the clear instructions given in this chapter, which if carried out intelligently would shorten and ease the average labour considerably.

A revised list of war-time baby clothing is included which will help the mother-to-be in her choice of suitable clothes for summer or winter wear, together with the number of coupons required. Are petticoats still worn by babies at 2 coupons each? If so the exigencies of war might be an opportunity to discard an already redundant garment permanently.

Professor Browne is to be congratulated on maintaining the high standard he set himself in previous editions, and doctors and nurses need have no hesitation in recommending this excellent booklet to their patients.

REGIONAL ANALGESIA FOR INTRA-ABDOMINAL SURGERY

By NORMAN R. JAMES, J. & A. Churchill, Ltd.,
London. 1943. With 27 illustrations. Price 6s.

In the Foreword of this excellent little book Dr. I. W. MacGill suggests that regional analgesia has not gained as much as it should in popularity because of the high standard which has been attained by specialist anaesthetists using general anaesthesia. At first blush, the technique which has been so well described by Dr. James will cause some fluttering of the heart of the non-specialist anaesthetist. But, on reading the matter for a second time, it appears that the surgical operation necessary for producing a regional anaesthesia is not so terrifying as it seems. The technique which Dr. James has evolved is really very simple and straightforward, and, provided that it is realised by all concerned that the anaesthetist does need some time to prepare the case for an operation, the use of this form of anaesthesia should be directly popularised because of this work.

Furthermore, it is not often realised that once anaesthesia has been produced the anaesthetist is able to start, if need be, on the next case, or to help the surgeon out of some of his particular troubles. Operating upon a patient anaesthetised by this method must improve the technique of the surgeon, and this by itself is sufficient justification of its use in many cases.

Dr. James has taken great care in describing all the steps necessary for using this manner of anaesthesia, and his description is considerably helped by 27 well-chosen illustrations. Some of the photographs are very good indeed, although in some cases an over-emphasised background detracts from a full appreciation of technical steps shown. It is perhaps unfortunate that the excellence of the descriptions has been slightly marred by careless proof-reading. But these are minor faults. In the main, this little book fills a gap in the literature of anaesthesia. We confidently recommend that all those who are liable to be called upon to give anaesthetics to dangerously ill persons should read, mark, learn, and inwardly digest the contents of this volume.