therefore to read that X-ray therapy, chrysotherapy, vaccines and vitamins have each a therapeutic value, though a limited one, in relation to the diseased conditions under discussion. One chapter is devoted to the dangers attending the use of phenacetin and its allies and to the precautions necessary in the administration of the phenylcinchoninic acid compounds, while a second writer finds salicylate not only free from the risks of the last mentioned substances but also much more active in securing the elimination of uric acid in the treatment of gout. A chapter of special interest is that contributed by Dr. Philip S. Hench of the Mayo Clinic, including a comparison of the rheumatic problem as this presents itself on opposite sides of the Atlantic. A striking announcement is that among recent advances the practice of artificial fever therapy for gonorrhoeal arthritis is of the greatest practical importance, and one recognition of this is the establishment as a commercial enterprise of "fever clinics" to provide "friendly fever" for all human ills. Altogether Vol. III is both informative and helpful, and Dr. C. W. Buckley is to be congratulated on his repeated editorial success.

ILLUSTRATIONS OF REGIONAL ANATOMY.

By E. B. JAMIESON, M.D. 2nd Edition of Sections I (Central Nervous System) 7/-; II (Head & Neck) 12/6; III (Abdomen) 5/6; IV (Pelvis) 3/6; V (Thorax) 4/-. Price complete 32/6 net. E. & S. Livingstone. Edinburgh. 1937.

The work consists of a series of illustrations mounted in sections in folders on the "peg" loose-leaf principle, without any descriptive text but all the pictures are labelled in great detail.

When we reviewed the first edition of this "atlas" in 1935 we felt convinced that it would be of the greatest service to students, undergraduate and post-graduate alike, and also to teachers as the illustrations are easily detached and can be passed round a class or thrown on a screen by the epidiascope, and hence it is no cause for surprise that a new edition has been called for within three years. In the present edition the first five sections only are included since the sections VI and VII dealing with the upper and lower limbs respectively only appeared last year.

There is little doubt that the present edition should be even more popular than its predecessor, more especially because several definite improvements have been introduced. The cardboard covers of the various sections are thicker than formerly and hence more durable, an index to each section is now supplied, and many of the illustrations have been redrawn, this time in colour, indeed there are 77 more coloured illustrations than appeared in the previous edition. As we remarked in our review of the first edition, the artist, the printer and the publishers are to be congratulated on the production of a most useful atlas on regional anatomy at a most moderate cost.

CHRONIC MILIARY TUBERCULOSIS.

By CLIFFORD HOYLE, M.D., and MICHAEL VAIZEY, M.B. Oxford University Press. London. 1937. Price 12/6.

In contradistinction to the usual teaching that miliary tuberculosis is practically invariably a rapidly fatal disease, the authors of this monograph hold that it may be chronic, by which they mean that it may last longer than six months, and that it may be recovered from. This thesis is based on the strength of some 110 examples in the literature (which form an appendix to the volume) and in addition, and now recorded for the first time, another 10, 8 of which they have personally observed since 1932.

The authors' own 10 cases are described in great detail with accompanying radiological and pathological evidence where available. In all the cases the diagnosis of miliary mischief is based on the X-ray pictures of the lungs, which certainly suggest the condition, but one knows that other conditions than miliary tuberculosis may give similar appearances. It is specially noteworthy that in two of the patients the Mantoux reaction was negative, in only one of the 10 cases were tubercle bacilli recovered from the sputum and in the only post-mortem examination of the fatal examples tubercle bacilli were not discovered. Although it may be that the views of these authors exaggerate the frequency of and recovery from miliary tuberculosis, their discussion of this important problem is a welcome addition to the literature of the subject.