subsequently supplied, are so essential and useful. Pneumatically controlled pronation and supination is also advocated. In Heidelberg too this refinement has also been accepted and these movements are illustrated in Fig. No. 22.

The author advocates passive elbow function and this is now also adopted in Great Britain. Marquand described the value of the open-ended sockets with special reference to transcarpal radiocarpal disarticulation (illustration 75 (a) (b) (pneumatic pronation and supination)). The technique of the application and the present components of the various prostheses are outlined. In conclusion forequarter prostheses with pneumatically operated arms are advocated; this must remain a future step in these researches.

The book is in German and testifies to the great advances that have been made by Marquand and his co-workers in this field, and a translation might be most useful and desirable, for few surgeons and technicians have had the opportunity of becoming acquainted with the latest developments in this specialized field. On the Continent and particularly in Germany they have recognized the immense task with which they have been confronted through the great surge of congenital anomalies resulting from the thalidomide disaster.

The book deals with the most common upper extremity deformities and the method which this school adopts in handling them. For a more detailed application than can be given in this brief review, it would be essential to study this book.


Nearly one hundred years ago, in 1869, the Obstetrical Society of London was advised to undertake the first perinatal mortality survey by Dr. Farr (of the Registrar General’s Department) who was appalled at the high infant mortality rate. In the past 20 years the situation has become so vastly different that had Dr. Farr been here he would perhaps have joined with those who had begun to think that infant mortality had come close to the irreducible minimum. Professor Nixon had no such illusions when in 1953 he began to make plans for the second perinatal survey. The first report of this survey has shown how justified he was in thinking that we still had a long way to go before we could claim to be near to perfection in perinatal care.

The 1958 Survey was brilliant in conception and ambitious in its aims. Many of us had considerable misgivings after viewing the lengthy complex forms which were to be completed by those taking part, especially as so much of the information had to be supplied by midwives. However, the response was magnificent. Returns for live births were completed for 98% of the chosen population and for 94% of the stillbirths and neonatal deaths. The amazing success of the Survey is a tribute to the hard work of the members of the Survey Team and not least to the Director of the Survey, Dr. Neville Butler, whose tireless enthusiasm must assuredly have buoyed up flagging spirits. It is a tribute too to the skill of the members of the Steering Committee who, with the help of expert advice from statisticians, were able to design a form that has provided such a wealth of invaluable information. The Executive Committee of the National Birthday Trust Fund are to be thanked for implementing the Survey.

As Professor Nixon says in his foreword, 'The project is unique, not only for this country but for the world.' It provides information relating to a national sample of over 17,000 births and over 7,000 stillbirths and neonatal deaths. The results have been meticulously analysed and the tables are certain to be used for reference for years to come. Much of the information will stimulate new lines of research. For example, the finding that one-third of premature babies were born at 38 weeks or later emphasizes the need to reconsider the whole question of 'prematurity', perhaps better called 'low birth weight': the regional variations in the incidence of fatal congenital malformations reveal interesting differences in genetic backgrounds which would merit further investigation. The Survey has revealed several dangerous deficiencies in perinatal care such as the fact that one-third of all women had no haemoglobin test in pregnancy, one-sixth did not have their blood pressure taken at each prenatal visit, and in 5-5% of women the blood Rh type was not known during pregnancy. However, the outstanding lesson of the Survey is the need for better selection of women for hospital perinatal care and confinement.

This book is obviously not designed as bedside reading matter, but there is an excellent summary at the end for those who are interested to learn the results of the survey without the tedium of studying the many tables.

Finally, it is to be hoped that some means may be found to ensure that the unique child population from this Survey should be most carefully followed up in future years, for there is a great deal more useful information still to come.


This is a collection of papers from a conference on communication theory, which regards language as a system of signs, signals, and symbols. Some contributions are lucid and useful, some highly abstruse. It is essentially for the speech therapist, and it is unlikely to engage the interest of the paediatrician.


The authors are both research psychologists with the M.R.C. Social Psychiatry Research Unit at The Institute of Psychiatry, London. They have aimed at more precise analysis of the diverse processes contributing to cognitive