syphilis, arteriosclerosis, occlusions, dissecting aneurysms, and rare diseases involving the aorta are reviewed in a clear manner. Diagnostic procedures, with and without the use of x-ray techniques, are outlined and particular emphasis is placed upon the fact that many aortic lesions can be recognized by simple means which are inexpensive and are available to all practicing physicians. A wide study of the literature has yielded an extensive bibliography which has been carefully condensed so that the reader has before him only the more pertinent and helpful references.

The book is adequately illustrated with sketches and halftone illustrations. The text has an easily readable and attractive style. The various chapters are not swamped with unimportant and rare details which so many authors of monographs feel obliged to include for the sake of completeness. This new book gives in a concise way the most important features of the many conditions which can appear in the aorta and which are receiving increasing attention by the medical and surgical profession.

ROBERT E. GROSS


The author has performed an important service in emphasizing certain aspects of the management of gangrene which are ordinarily neglected. With the present day interest in vasodilator drugs and procedures, the local treatment of gangrenous tissue all too frequently is inadequately and improperly carried out. Very often the manner in which necrotic tissue in an ischemic extremity is handled will determine whether amputation will be avoided. The author's conservative method of handling such tissue, based on a large experience, should go far to elevate this phase of the management of the patient with gangrene to its proper importance. One might disagree, however, with several of the author's opinions on the general management of the patient with thromboangiitis obliterans and arteriosclerosis. For example, the author's belief that sympathectomy and paravertebral block offer very little to these patients is not in accord with the clinical experience of others who have used these procedures with benefit to many patients. Also, the author's emphasis on the use of hypertonic saline does not seem to be borne out by the experience of others. On the whole, however, this is a good book from the clinical standpoint on the management of the patient with thromboangiitis and arteriosclerosis obliterans.

Meyer Naide


Section Three of the second edition devotes 48 pages to 29 articles by 16 authors on diseases of the cardiovascular system. Two or three independent discussions are provided for each of the 18 subjects, including congestive failure, hypertension, the anginal syndrome, coronary occlusion and rheumatic heart disease. Peripheral vascular disease is covered in fragmentary fashion by four short articles which are below the standards of many of the others.

All presentations are handicapped by limitation of the subject matter to treatment without relating this to basic pharmacology and physiology. Diagnostic criteria are seldom described. While in accord with the stated purposes of the volume as a whole, this method is not well suited to diseases of the circulation. Nevertheless the articles provide considerable information about accepted and tentative therapy of heart disease and hypertension some of which has not yet found its way into textbooks of medicine.

A series of annual cumulative revisions are planned for this book. A few references to pertinent material in generally available journals might increase its value to the physician not closely in touch with new developments in the cardiovascular field.

JOHN J. SAYEN

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TRAINING FOR CARDIOVASCULAR INVESTIGATORS

The Association has approved a grant-in-aid in the amount of $18,270 toward the continuance of the Training Course for Cardiovascular Investigators at Western Reserve University, Cleveland. The course is directed by Dr. Carl J. Wiggers, Professor and Director, Department
of Physiology, at the University’s Medical School. The third year will begin on July 1, 1951.

The course was inaugurated in 1949 as a means of increasing the number of competent research investigators in the cardiovascular field. The chief objective was to give a year’s training to postdoctorate fellows in medicine and related sciences. It was set up through the support of the Association.

The Research trainees are supported by the National Heart Institute and carry an annual stipend of $3,000 to $3,600 per annum, depending on the candidate’s dependency status.

The current program, to be continued during 1951–52, consists of eight weeks of formalized technical training in various research methods employed in cardiovascular studies on humans and animals, 18 weeks of experimentation apprenticeship involving the assistance of qualified investigators in basic animal research, 16 weeks of independent research under supervision, and six weeks of supervised experience in the preparation of a manuscript.

COUNCIL ON HIGH BLOOD PRESSURE RESEARCH

The annual meeting of the Council on High Blood Pressure Research will be held on April 6 and 7 in Cleveland at the Hotel Cleveland. The Council is composed of physicians and lay members interested in problems of high blood pressure and arteriosclerosis. Many prominent business leaders have been invited to attend its sessions.

Mr. Alva Bradley, Chairman of the Council’s Medical Advisory Board, will serve as Chairman for the meeting. Reports on progress, current needs, and the outlook in this field will be given by Dr. Irvine H. Page, Cleveland, Dr. Louis N. Katz, Chicago, and Dr. Henry A. Schroeder, St. Louis.

TRAINING OF LABORATORY TECHNICIANS

A program for the training of laboratory technicins in the correct technics for accurate pro-
thrombin and clotting time tests has been inaugurated at the Newton-Wellesley Hospital, Newton, Mass. This is a joint effort sponsored by the Health Department of Massachusetts and the local physicians of the community, with the full cooperation of the Massachusetts Heart Association and the United States Public Health Service.

The course was initiated last July under the technical direction of Dr. Irving S. Wright, Chairman of the Committee on Anticoagulants of the American Heart Association. Dr. Ralph Overman has acted as Consultant in Chemistry. Arrangements were made whereby technicians from hospitals of Massachusetts came to the Newton-Wellesley Hospital for a period of five days during which they received actual practical training in these determinations. Four technicians were trained each week. To date, 64 technicians, representing 50 different hospitals and laboratories have been trained.

This was a pilot program. Preparations for the development of similar programs in communities where there is an interest and desire for training of this nature are being made.

INTERNATIONAL SOCIETY OF CARDIOLOGY

Dr. Louis N. Katz, Chicago, has been appointed as the Association’s second delegate to the Council of the newly-organized International Society of Cardiology (Heart and Blood Vessels). Dr. Maurice B. Visscher, Minneapolis, has been named as alternate for Dr. Paul D. White, Boston, first delegate to the Council. Dr. Edgar V. Allen, Rochester, Minn., has been named as alternate for Dr. Katz.

The Officers of the International Society are: Professor Charles Laubry, Paris, President; Dr. Paul D. White, Boston, First Vice-President; Professor Ignacio Chavez, Mexico City, Second Vice-President; Dr. Pierre W. Duchosal, Geneva, Secretary General; Dr. Pedro Cossio, Buenos Aires, Associate Secretary; Professor Gustav Nylin, Stockholm, Treasurer; and Dr. Louis N. Katz, Chicago, Assistant Treasurer.
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Henderson Professor of Medicine, Tulane University School of Medicine,
Senior Visiting Physician, Charity Hospital, Consultant
in Cardiovascular Diseases, Ochsner Clinic

THIS unusually practical monograph is written for those who have not pre-
viously given serious consideration to the application of measurements of
venous pressure to clinical problems. The presentation is, therefore, designed
to arouse interest in these observations so that those unfamiliar with the subject
might better understand and manage their patients.

In a lucid writing style, Dr. Burch presents those fundamental principles concerned
with the maintenance of and fluctuations in venous pressure. These principles are
carefully considered, both in normal and in disease states, to illustrate how adequate
appreciation of their significance may permit a more intelligent analysis of clinical
syndromes.

Emphysema and Venous Return. The higher intrathoracic pressure in emphysema
increases venous pressure in the vena cavae by reducing the "effective" pressure in the vena
cavae, i.e., the difference between venous pressure and intrathoracic pressure is decreased.
This tends to impair venous return to the heart.

To enable readers to gain a better comprehension of the subject, discussions are
intentionally limited to selected practical aspects of those problems encountered
most commonly in the clinic and which exemplify the manner in which all phases
of medicine must be properly correlated for accurate interpretation of measurements
of venous pressure. Anatomy, physiology, pathology, pharmacology and clinical
medicine are among the subjects considered under this arrangement.

Indirect methods of measuring venous pressure which are adaptable to bedside use,
and the direct method, which is the author's specialty, are explained fully. Special
consideration is given to the normal values of venous pressure, including the factors
which result in a variance in venous pressure in normal man. Congestive heart
failure, varicose veins, shock and numerous other abnormal clinical states which
affect determinations, and the mechanisms involved, are discussed in a separate
chapter.

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THE KIDNEY

MEDICAL AND SURGICAL DISEASES

ARTHUR C. ALLEN, M.D., Pathologist, The James Ewing Hospital; Assistant Attending Pathologist, Memorial Cancer Center, New York City; Attending Consultant in Pathology, Veterans Administration.

- Summing up and appraising current information on renal disease, this text presents all the essential facts of the entire panorama of kidney pathology. Integrating 1200 handsomely reproduced gross and microscopic photographs with a clear, constructively critical text, Dr. Allen matches structure against function, providing a vivid clinical-pathologic-physiologic orientation which actually gives a third dimension to the science of pathology.

- Disorders of renal function are reflected in many varieties of measurable physicochemical changes; an appreciable number of diseases leave a clear diagnostic label in the kidney. But these data must be integrated for diagnosis. Dr. Allen shows how the pathologist is in a pivotal position to make this integrative preclinical interpretation of histologic data and physiologic changes. How the pathologist thereby can give his colleagues a working interpretation of pathology.

- For internists and general practitioners, a needed integration because of the constant intermediary or primary role of the kidney in many diseases about which they are consulted; for surgeons, cardiologists and other specialists and investigators, a remarkable fund of information of direct concern to them; for pathologists, urologists, and students, a clarification of concept of renal pathology, and a complete and reliable guide to kidney disease of all kinds.

A detailed table of contents is impossible here, but among the many points of contentious pathology Dr. Allen illuminates are: diabetic glomerulosclerosis, hemoglobinuric nephrosis, cholemic nephrosis, osmotic nephrosis, myeloma nephrosis, generalized arteriocapillary "thrombosis," focal endocarditic ("embolic") glomerulonephritis, amyloidosis, disseminated lupus erythematosus, chronic nephrotic glomerulonephritis ("lipoid nephrosis"), "renal rickets," bilateral cortical necrosis, the renal lesions of the toxemias of pregnancy, and numerous other conditions.

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