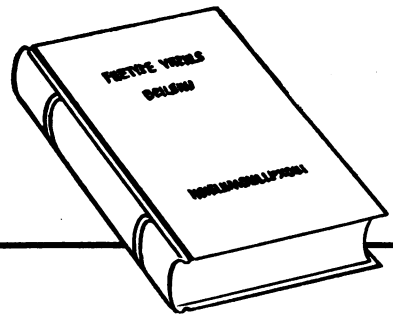

THE PHYSICIAN'S *Bookshelf*

SURGERY IN WORLD WAR II—Neurosurgery, Volume II—Prepared and published under the direction of Major General S. B. Hays, The Surgeon General, United States Army. Editor in Chief, Colonel John Boyd Coates, Jr., MC; Editors for Neurosurgery, R. Glen Spurling, M.D., and Barnes Woodhall, M.D.; Associate Editor, Elizabeth M. McFetridge, M.A. Office of the Surgeon General, Dept. of the Army, Washington, D.C., 1959. 705 pages. This volume may be purchased from the Superintendent of Documents, Washington 25, D.C., for $7.00 per copy.

This is the second and final volume concerning the history of neurosurgery in World War II. The first volume published in 1958 was concerned with the administrative problems encountered in establishing effective neurosurgical service within the Medical Department and also the management of head injuries. This final volume covers injuries of the spinal cord, management of the ruptured intervertebral disc, and peripheral nerve injuries. Chapters and authors in the present volume are listed below:

PART I. INJURIES OF THE SPINAL CORD

I. Historical Note, by Barnes Woodhall, M.D.
II. The Zone of Interior by Barnes Woodhall, M.D.
III. The Mediterranean (formerly North African) Theater of Operations, by Eldridge H. Campbell, Jr., M.D.
IV. The European Theater of Operations, by R. Glen Spurling, M.D.
V. The Management of Acute Compound Battle-Incurred Injuries of the Spinal Cord, by Donald D. Matson, M.D.
VI. Urologic Aspects of Spinal Cord Injuries, by George C. Prather, M.D.
VII. The Management of Paraplegic Patients in Zone of Interior Hospitals, by Barnes Woodhall, M.D.
VIII. Management of the Ruptured Intervertebral Disk (Herniated Nucleus Pulposus), by Glen Spurling, M.D.

PART II. PERIPHERAL NERVE INJURIES

IX. Historical Note, by Barnes Woodhall, M.D.
X. The Zone of Interior, by Barnes Woodhall, M.D.
XI. The Mediterranean (formerly North African) Theater of Operations, by Eldridge H. Campbell, Jr., M.D.
XII. The European Theater of Operations, by Glen Spurling, M.D.
XIII. Standard Methods of Examination in Peripheral Nerve Injuries, by Frederic H. Lewey, M.D.
XIV. Anatomic Approaches to the More Commonly Injured Peripheral Nerves, by Warner Wells, M.D., Frederick M. Owens, Jr., M.D., and Francis A. Echlin, M.D.
XV. Techniques of Peripheral Nerve Repair, by Benjamin Bradford Whitcomb, M.D.
XVI. Combined Bone and Periperal Nerve Injuries, by Wade C. Myers, Jr., M.D., and Robert T. Rosenfeld, M.D.
XVII. Peripheral Nerve Injuries Complicated by Skin and Soft-Tissue Defects, by Stanley E. Potter, M.D., and Edmund John Croce, M.D.
XVIII. Peripheral Nerve-Vascular Injuries, by Barnes Woodhall, M.D.
XIX. Causalgia Following Combat-Incurred Injuries of the Peripheral Nerves, by Frank H. Mayfield, M.D.
XX. Peripheral Nerve Grafts, by Frank E. Nulsen, M.D., Frederick H. Lewey, M.D., and William P. Van Wagenen, M.D.
XXI. Neuropathologic Changes in Battle-Incurred Injuries of Peripheral Nerves, by William R. Lyons, Ph.D., M.D.
XXII. Physical Therapy in the Management of Peripheral Nerve Lesions, by William K. Massie, M.D.
XXIII. Orthopedic Techniques for Use in Irreparable Nerve Injuries, by T. Campbell Thompson, M.D.

In Part I, the management of casualties with spinal cord injury has been outlined in detail. The accomplishments of the paraplegic centers constitute one of the greatest advances in military medicine in World War II. The total care of the paraplegic patient as well as a discussion of the numerous possible complications are clearly presented in an authoritative fashion.

The experience gained in military hospitals regarding the surgical treatment of ruptured intervertebral discs was found to be different strikingly from civilian practice. Once it had been discovered that only a minority of such patients operated upon could be returned to active duty, the majority of such patients were transported back to the zone of the interior.

Peripheral nerve injuries constituted the heaviest neurosurgical load in World War II. Primary neurosurgery was not carried out. Efforts were made to segregate peripheral nerve injuries in special centers where within three to twelve weeks after initial injury secondary nerve suture was carried out. This subject is covered in considerable detail and is particularly well illustrated with line drawings, charts, and photographs. Follow-up studies of the peripheral nerve injuries are of particular importance.

The addition of Volume II concerning neurosurgery in World War II completes the wartime record of this surgical specialty. Both volumes will be valued by all neurosurgeons as well as by general surgeons, neurologists, urologists, and general practitioners, who are in some way concerned with the care of patients with head injuries, paraplegia, or peripheral nerve injuries.