how many would accept the myelograms of aplastic anaemia as typical or characteristic; and how many, tyro or expert, would obtain the slightest information of value from the coloured plate? The book has a number of inconsistencies; thus one is adjured on one page to count 1,000 cells if one is to obtain a reliable result whilst on another the author confidently computes various indices (not further used in the book) from a mere 100. Nor is there any attempt to make clear the diagnostic value or the limitations of sternal puncture nor when it may need to be supplemented by the more extensive sternal trephine. It is unlikely that the present volume will attain the popularity achieved by Dr. Piney's previous books.

L. E. H. W.


Ever since the first edition of Muir's Pathology was published in 1924 it has been regarded as one of the most reliable books on the subject in the English language. Although first and foremost a Scottish student's book it has also been very popular with English medical students. The book has especially appealed to the type of student who looks for authoritative statements and sound teaching. How often one has heard at the end of an argument: "But Muir says..." And there is nothing more to say.

The fifth edition is arranged on the same lines as the previous editions and the publishers are to be congratulated on maintaining the high standard of production in the face of war-time difficulties. There is no loss of clarity in the reproduction of the well chosen and excellent illustrations. The text has been thoroughly revised and much new material added to bring the book up to date.

Although essentially for students, it is safe to say that it will continue to occupy a prominent place on every laboratory bookshelf. It remains the most distinguished British textbook of Pathology.

H. J. B.

Correspondence.

SHORTCOMINGS OF COMMERCIAL STEAM DISINFECTION APPARATUS.

TO THE EDITOR OF THE "JOURNAL OF THE ROYAL ARMY MEDICAL CORPS."

SIR,—The article on this subject by Lieutenant-Colonel A. G. Gadd, R.E., and Major A. W. Turner, R.E., in the January issue of the Journal is welcome as giving an engineering approach to a problem which has been concerning the medical profession for a considerable time. On this very subject an illuminating report was published as recently as the summer of 1941 by the Committee of the Royal College of Obstetricians and Gynaecologists to which we would refer anyone interested in this important matter. Reviews and correspondence concerning this report appeared in the British Medical Journal in the summer of 1941.

T. F.

Correspondence.
We think it should be said that research into the same problem has been going on at the Army School of Hygiene in collaboration with the Royal Army Medical College, and many of the findings of the authors of the article can be confirmed. In our experiments we have taken thermocouple readings in conjunction with the use of witnessing tubes indicating various temperatures and some interesting points emerged. For instance, tubes sometimes changed appearance at lower temperatures than was expected. This was found to be due to the existence of minute cracks in the glass, caused by faulty sealing, allowing steam to penetrate and melt the enclosed chemical.

Witnessing tubes are reliable, therefore, only when perfectly sound and, as the authors of the article point out are, when unchanged, a good indication of failure to disinfect. This research work is being continued at the Army School of Hygiene and the Royal Army Medical College.

Meanwhile, we would point out that a frequent cause of trouble in some installations tested by us has been absence of the required steam volume and pressure. Any attempt to work existing apparatus in conditions less favourable than the prescribed minima is, of course, doomed to failure from the outset.

We are, Sir,
Yours faithfully,
O. C. Dobson,
Major, R.A.M.C., Army School of Hygiene.
Frederic Evans,
Major, R.A.M.C., Army School of Hygiene.
Stanley Elliott,
Major, Royal Army Medical College.

April 8, 1942.

Notice.

HEPASTAB FORTE (BOOTS).

It is generally agreed that the most effective and economical method of administering liver is by hypodermic injection. Messrs. Boots Pure Drug Company have sent us particulars of their preparation "Hepastab Forte," a concentrated liver extract 2 c.c. of which is claimed to be therapeutically equivalent to 4,000 to 5,000 gramme of fresh liver given by mouth.

The preparation may be given intramuscularly or if necessary intravenously.

Once the blood count has returned to normal and all other symptoms have disappeared an intramuscular injection of 2 c.c. Hepastab Forte every two to six weeks according to the response is stated to be generally sufficient for maintenance treatment.