TWENTY-SIXTH EDITION

MODERN TREATMENT YEARBOOK 1960

A YEARBOOK OF DIAGNOSIS AND TREATMENT FOR THE GENERAL PRACTITIONER

Edited by

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PREFACE

THE 1960 Modern Treatment Yearbook contains a wealth of clinical information in its thirty-two chapters. These chapters cover a comprehensive field in the various branches of medicine, surgery and obstetrics, and incorporate the up-to-date forms of treatment.

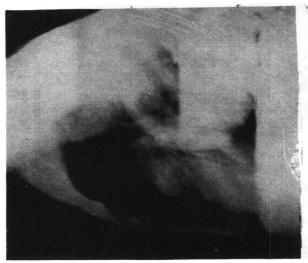
There have been spectacular advances in many branches of medicine, surgery and anæsthetics. The field of medicine never stands still; there are always new drugs, new forms of treatment and new techniques in surgery. It is almost impossible for the busy practitioner to keep abreast of all these new advances, and it is to books of the calibre of the *Modern Treatment Yearbook* that he looks for medical refreshment and advancement.

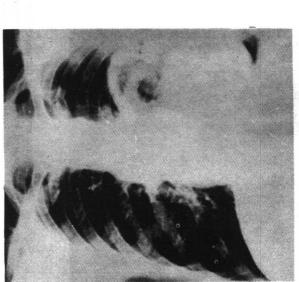
I have no doubt that this hardy annual which has already passed its Silver Jubilee will prove as popular as its predecessors.

CECIL WAKELEY

73 Portland Place, London, W.1 January, 1960

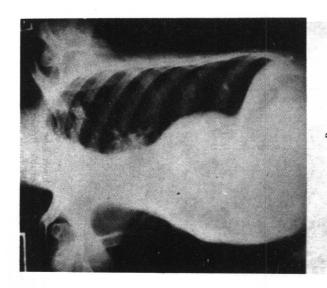
PLATE I



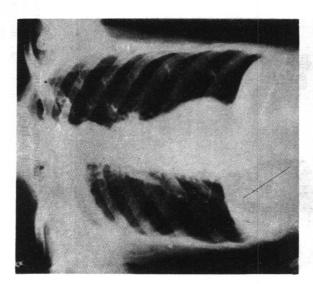


An enormous breaking down squamous carcinoma in the lower lobe of the left lung. In spite of its size this tumour was still readily operable. Breaking down squamous carcinoma constitutes by far the commonest form of abscess seen in the lung.

PLATE II

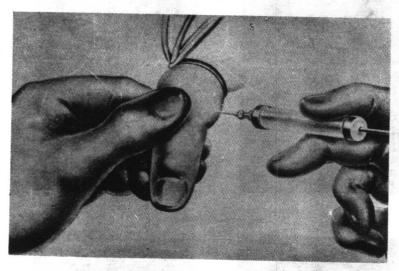


A carcinoma growing at the apex of the right lung and involving the upper ribs; treated by right pneumonectomy with radical excision of the chest wall. Patient alive and well after eight years.



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PLATE III



Technique of local anæsthesia.

PLATE IV

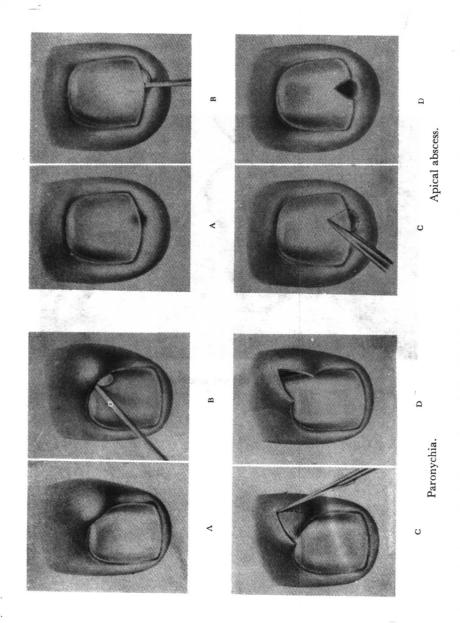
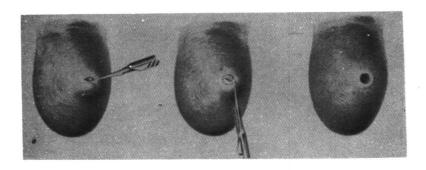
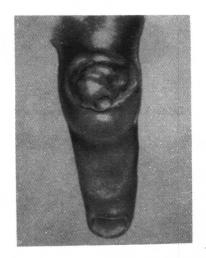


PLATE V



С

B Pulp abscess treatment.



Carbuncle.

PLATE VI

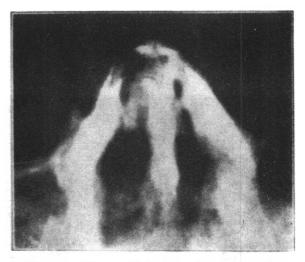


A. Below knee caliper, with side springs.

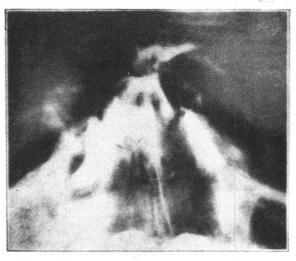


B. Corner of the household training unit.

PLATE VII

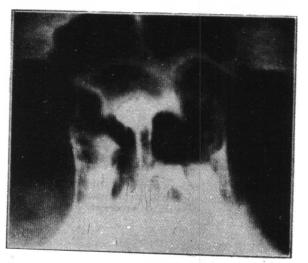


A. "Open book" type of injury showing comminution of the septum and spreading of the nasal bones over the frontonasal processes.



B. "Frontal" type of nasal injury with impaction of the nasal bridge between the fractured and outwardly displaced frontonasal processes.

PLATE VIII



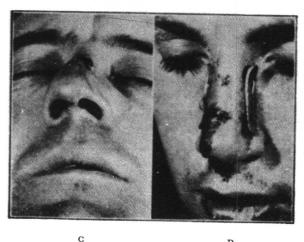
The very severe form of "frontal" type nasal fracture showing gross impaction of the nasal bridge, and outward spread of the ethmoid air cells and the lacrimal bones. The nasal bridge lies in the lower part of the figure.

PLATE IX



A. A patient who received a nasal injury in childhood. Slight saddle nose, and under-development in the nasal spine area, producing a retracted columella, and a Simian lip.

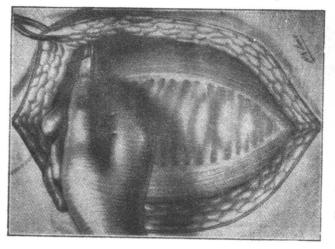
B. Same patient as in A after a bone graft to the nose, columella, and an onlay bone graft to the central part of the face.



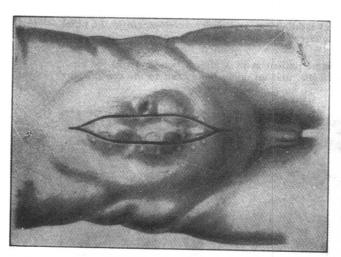
c. Recent fracture of the nose from a lateral blow. Gross deviation has occurred.

D. A corrected "frontal" type of fracture, showing the lead plates on each side, held in place by stainless steel wire transfixing the nose.

PLATE X

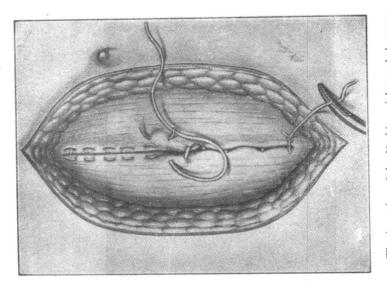




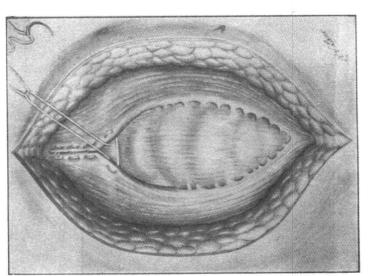


A. Ovoid incision for removal of redundant scartissue and skin. In actual practice a larger area of skin is excised than is here depicted by the artist. In this case, for instance, the entire keloid scar, its lateral extensions and the umbilicus would have been excised, and at the completion of the operation a new umbilicus would have been fashioned by a simple plastic procedure.

PLATE XI



B. The insertion of the Cushing right-angled suture of floss silk or nylon.



A. Closure of the fibro-aponeurotic ring with a series of mattress sutures of floss silk or nylon. Note the method of inserting these sutures.

PLATE XIII



A. Burn of chest wall and arm from electric blanket in newborn baby.



B. Congenital absence of the scalp and skull.

PLATE XIII

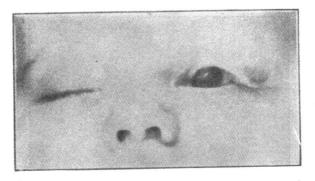


A. Burn of chest wall and arm from electric blanket in newborn baby.



B. Congenital absence of the scalp and skull.

PLATE XIV



A. Coloboma of εyelid—pre-operative.



в. Congenital under-development of mandible.