- PSYCHIATRY IN THE PRACTICE OF MEDICINE By A. J. Enelow and M. Wexler. (Pp. viii + 355. 52s.) London: Oxford University Press. 1966.
- A HANDBOOK OF SURGICAL DIATHERMY By J. P. Mitchell and G. N. Lumb. (Pp. 100; 106 figures. 37s. 6d.) Bristol: John Wright & Sons. 1966.
- LES CÉPHALÉES ALLERGIQUES By J. Blamoutier and C. Denimal. (Pp. 112; 11 figures. F.24) Paris: Expansion Scientifique française. 1966.
- STEREOTAXIC ATLAS OF THE FOREBRAIN OF THE GUINEA PIG By T. Luparello. (Pp. 80; 63 figures. DM 43.) Basel and New York: S. Karger AG. 1967.
- THE DEVELOPMENT OF SEX DIFFERENCES Edited by E. E. Maccoby. (Pp. 351; illustrated. 60s.) London: Tavistock Publications. 1967.
- ESSENTIELLE HYPERTONIE. Klinik, Psychophysiologie und psychopathologie By A. W. von Eiff, G. Kloska and PH. Quint. (Pp. xii + 232; 9 figures; 3 tables. DM 45, Stuttgart: Georg Thieme Verlag. 1967.
- MADNESS AND CIVILISATION By M. Foucault. (Pp. xiv + 299. 35s.) London: Tavistock Publications. 1967.
- IL PROBLEMA DELLA COSCIENZA IN NEUROPSICHIATRIA By R. Viziolo and Clelia Biatti. (Pp. 216; illustrated.) Pisa: Omnia Medica. 1966.
- PADIATRISCHE NEUROCHIRURGIE Edited by J. Gerlach, H. P. Jensen, W. Koos and H. Kraus. (Pp. xx + 876; 635 figures. DM 287.) Stuttgart: Georg Thieme Verlag. 1967.
- SCHEMA DER SEGMENTALEN HAUTINNERVATION: DERMATOME By K. Hansen and H. Schliak. (50 tear-off standard charts for clinical use; size $8\frac{1}{2} \times 5\frac{1}{2}$ ". DM 9.80) Stuttgart: Georg Thieme Verlag. 1967.
- BEITRAGE SUR EKSTASE Bibliotheca Psychiatrica et Neurologica No. 134 Edited by Th. Spoerri. (Pp. iv + 207; 2 figures. 79s.) Basel: S. Karger. 1968.
- ADVANCES IN OPHTHALMOLOGY Vol. 19. Bibliotheca Ophthalmologica No. 73 Edited by M. J. Roper-Hall, H. Sautter, and E. B. Streiff. (Pp. vi + 221; 92 figures, 20 tables. 117s.) S. Karger: Basel. 1967.
- A STEREOTAXIC ATLAS OF THE JAVA MONKEY BRAIN (Macaca irus) By Totada R. Shantha, Sohan L. Manocha, and G. H. Bourne. (Pp. iv + 68; 64 figures. 69s.) S. Karger: Basel. 1968.
- INDIVIDUALITY IN PAIN AND SUFFERING By Asenath Petrie. (Pp. xvii + 153; 33 figures, 30 tables. 45s.) Chicago and London: University of Chicago Press. 1968.
- STUDIES IN PSYCHIATRIC ART. Its Psychodynamics, Therapeutic Value, and Relationship to Modern Art By R. W. Pickford. (Pp. xix + 340; illustrated \$14.00.) Springfield, Illinois: Charles C. Thomas. 1967.
- THE LOSS OF LOVED ONES. The Effects of a Death in the Family on Personality Development. Compiled and edited by D. M. Moriarty. (Pp. xvi + 203; 2 figures. \$8.50.) Springfield, Illinois: Charles C. Thomas. 1967.
- ECHOENZEPHALOGRAPHIE By H. W. Pia and C.-L. Geletneky. (Pp. viii + 168; 128 figures, 20 tables. DM 59.) Stuttgart: Georg Thieme Verlag. 1967.
- ANGIOGRAPHIE DES HIRNKREISLAUFS By K. Decker and H. Backmund. (Pp. viii + 76; illustrated. DM 44.) Stuttgart: Georg Thieme Verlag. 1967.
- HYDRODYNAMIK, ELEKTROLYT- UND SAURE-BASEN-HAUSHALT IM LIQUOR UND NERVENSYSTEM. Symposium vom 27. 2.-1.3. 1967 der Neurologischen Klinik des Krankenhauses Nordwest, Frankfurt am Main. Edited by G. Kienle. (Pp. xi + 268; 168 figures, 46 tables. DM 52.40.) Stuttgart: Georg Thieme Verlag. 1967.

PROLONGED COMA AND RECOVERY

The Editor has received the following letter from Professor W. H. Sweet, Professor of Surgery at Massachusetts General Hospital and chief of the neurosurgical service there. It covers an important subject and he hopes that readers will try to help Professor Sweet's investigations.

24 January, 1968

Dear Sir—The ability of physicians to maintain life for very long periods in the unconscious patient raises the question as to how long such skills should be deployed. As physicians we are eager to promote the recovery of everyone who can do so. In order to deprive no one of his chances on this score it is relevant to know the longest periods of coma which have been followed by useful survival.

A committee of the Massachusetts General Hospital is studying our own records and the world literature to determine pertinent features in all patients who, *despite coma for over five weeks*, have made a useful recovery. We think it is vital not to overlook any well-documented patient in this category. We should be grateful if any reader of this journal would draw our attention to any case published under a title which is not indicative of survival after prolonged coma. We are also eager to receive accounts of such cases as yet unreported. A publication incorporating our own and others' data is planned.—I am, etc.,

WILLIAM H. SWEET

Chairman, Committee on Management of the Unconscious Patient, Massachusetts General Hospital, Boston, Massachusetts 02114 U.S.A.