

# ABSTRACTS

COLONEL DOUGLAS LINDSEY, MC, USA, EDITOR

**Dmitriev, G. I.: Reconstructive operations for severe deformities of the hand following deep burns. *Ortopediya, Travmatologiya i Protezirovaniye* (8):26-30, 1970.**

No illustrations, some technique, and a fair amount of summary data on treatment of 224 hands in 178 patients over a 20-year period. Follow-up in 101 cases indicates good result in 64 patients, satisfactory in 33, and recurrence of contracture in only 4.

Address for reprints: Dr. G. I. Dmitriev, Institute of Traumatology and Orthopedics, Zhdanov Quay, Gorkii, U.S.S.R.

**Gross, E., Bartels, H., Korner, L., and Kindt, H.: Antitoxin titer after tetanus immunization: results after use of adsorbed and fluid toxoids for the third injection. *Münchener Medizinische Wochenschrift* 112(18):846-850, 1970.**

Fluid toxoid produces higher titers and less local reaction. (Editorial note: The latter conclusion appears clear enough from the tabular data. The former conclusion is questionable. The graphic presentation is intelligible without knowledge of German; see for yourself.)

Address for reprints: Major E. Gross, Corps Surgeon's Office, III Corps, 54 Koblenz, Julius-Wegeler-Str. 7-9, Germany.

**Medvedev, G. M.: Occupational trauma on collective farms in the Kargopl district. *Ortopediya, Travmatologiya i Protezirovaniye* (4):55-57, 1970.**

Survey of trauma experience, 1962-1967, on five large collective farms in the region south of Archangel. In precise bureaucratic fashion, 99.7% of the injuries were assigned to three basic causative factors: "organizational," such as disregard of safety regulations; "technical," such as inadequate tools

and equipment; and "sanitary-hygienic," such as poor lighting.

The majority of the injuries affected males working with or maintaining agricultural machinery. Contusions and various types of open wounds predominated; fractures composed less than 10% of the total. Only 6% of the injured returned to duty in 3 days or less, but 60% were back to duty within 10 days.

Address for reprints: Dr. G. M. Medvedev, Gagarina St., Bldg. 14, Apt. 7, Archangel 45, U.S.S.R.

**Pavlova, M. N., and Bolkhovitinova, L. A.: Influence of pyrogenal therapy on morphologic structure of keloidal scars. *Ortopediya, Travmatologiya i Protezirovaniye* (8):18-23, 1970.**

(Editorial note: Pyrogenal is a purified, protein-free, bacterial pyrogen preparation. For further information search the literature under Dzheksenbaev, O. Sh., or Sorokina, A. V. Its action has been attributed to the stimulation of production of 17-hydroxysteroids. The patients referred to in this article were treated in the august Central Institute for Traumatology and Orthopedics in Moscow.)

Biopsy studies of patients with postburn keloids treated with several courses of pyrogenal. Disorganization of keloidal tissue is followed by resorption and development of normal fibrous and cellular structure.

Address for reprints: Dr. M. N. Pavlova, Ploshchad Yunosti, Building 5, Apt. 47, Moscow K-460, U.S.S.R.

**Shakirov, D. Sh.: Treatment of experimental infected wounds with Mumie Acil. *Ekspperimentalnaya Khirurgiya i Anesteziologiya* 16(6):36-39, 1969.**

Treatment of infected polymicrobial wounds in laboratory animals by topical