Fractures about the elbow joint in children (A review of 342 cases). G. Brady. *J. Irish med. Ass.* 55 : 67, 1964. From *Excerpt. med. Pediat. Sec. VII*, 19 : 273, 1965.

On the basis of the experience of this series the following principles of management are proposed : (1) Supracondylar fracture of the elbow in children with displacement should be treated as an acute emergency in all cases. Reduction should be undertaken at the earliest possible time under full anesthesia, and with X-ray control. Repeated manipulations are certain to produce a stiff elbow. Careful post-operative observation of

finger movements and circulation is essential. (2) An accurate examination of the patient when first seen by the surgeon must be undertaken and charted with special reference to circulation of the fingers, movements of the fingers, sensory disturbance, and an accurate interpretation of X-ray films. (3) Fractures of the lateral condyle with or without displacement should be reduced by open method with pin fixation after accurate reduction of the fracture is obtained. A high incidence of non-union occurs if these fractures are treated conservatively. X-ray after the immobilization period should be done to ensure that union has occurred.

ERRATA

In the article "Tracheotomy in children" by Sharma B. K., and Garg B. K., Table I on page 221 of the July issue of the *Journal* should read :

Table 1—214 tracheotomies during a 5-year period.

Total	Diphtheria		H. influenzae croup.		Viral croup.	
	Total admission	Tracheotomy	Total admission	Tracheotomy	Total admission	Tracheotomy
1960	128	28	7	3	58	2
1961	196	32	10	4	62	4
1962	215	32	9	5	88	8
1963	222	37	11	7	80	6
1964	211	35	12	7	69	4
Total	972	164 16.8%	49	26 53%	357	24 6.7%

The word "Fig. 1" should be deleted from the last line on page 223.