
This compact paperback fills an obvious gap. General practitioners who seek to improve their orthopaedic knowledge have either to consult undergraduate textbooks or delve into the large volumes produced for postgraduates. Now they have a book for their own specialty. The text has been edited by both an orthopaedic surgeon and a general practitioner. The chapters have been written by consultants at the Nuffield Orthopaedic Centre, Oxford after preliminary discussion with a group of general practitioners to ensure that the correct balance was maintained. There are also contributions by a rheumatologist and a physiotherapist. At the beginning of each chapter there is a list of important facts relevant to the clinical problems to be described and at the end are typical case histories.

Good planning has produced a book which is a useful addition to orthopaedic teaching. It should certainly help general practitioners to reduce the numbers of patients referred to busy hospital clinics and give a guide to orthopaedic surgeons as to the lectures which they should give to their colleagues involved in primary care.

L. Klenerman.


At first glance this 250-page book appears to be an anachronism. Predominantly, it deals with arthrography and myelography which have been almost completely replaced by MRI in the last five years. None the less, there is still a need to obtain arthrograms in some conditions and not all hospitals have ready access to MRI facilities. It is rarely necessary now to obtain knee arthrograms, but for labral tears of the hip and shoulder as well as for ligamentous disruption in the wrist, arthrography remains a useful investigation.

Myelography also has become a very occasional procedure and in view of the potential complications is probably better restricted to specialist units. The book could benefit from condensing the description of arthrography into a series of tables rather than reiterating the technique and the potential complications in each relevant chapter. There has been an upsurge of interest in the use of MR arthrography with very dilute Gd-DPTA and fat suppression; these procedures are included in this manual.

The later chapters deal with therapeutic procedures such as facet blocks, epidural and bone biopsy. Finally, there is a very brief chapter on interventional musculoskeletal ultrasound which mainly deals with needle guidance for aspiration, biopsy and drainage procedures. Each chapter is well illustrated and referenced. The book is probably more suitable for a radiological departmental library than for personal purchase by orthopaedic surgeons.

John Bingham.


At first I was sceptical about reviewing a weighty tome on unicompartmental knee arthroplasty; I wondered who was actually doing this surgery on a regular basis. Very few of my colleagues specialising in knee surgery consider this to be a routine or mainstream procedure. The book is based on a 1995 symposium organised by SOFCOT. With four French authors I expected it to give the European view of unicompartmental arthroplasty, which is often at odds with experience in the UK and the USA. Happily, this was not the case and the authors have been careful to give a more global perspective. Individual chapters come from France but also the USA, UK, Japan, Australia and Sweden.

The book is detailed and comprehensive. Early chapters cover basic sciences, mechanical properties, prosthetic fixation and imaging. The coverage of kinetics and biomechanics is particularly detailed and may appeal more to purists. It then moves on to clinical series and results, handled thoroughly in no fewer than 15 chapters, well illustrated both clinically and radiologically. Finally, there is an excellent overview of the topic and some thoughts on the future.

Who is this book for? Any self-respecting knee surgeon should be familiar with most of its contents. Orthopaedic trainees can gain much information and possibly use this knowledge to impress their less open-minded teachers. After reading it I suspect that many may be tempted to try unicompartmental replacement again.

This book is certainly the most up-to-date and comprehensive review of the subject. It is difficult to find any real fault with the contents and the authors are to be congratulated on this wide-ranging production. I often wonder, however, why this type of publication rarely includes a chapter or two from surgeons taking a different or opposing view. Such people do exist but their views are not included in this book. Even before opening it, I could guess at the quoted results of using these implants. Broadening the discussion would introduce an element of balance and make for a more intellectually stimulating read.

Peter Earnshaw.


From the point of view of most readers of our Journal, the contents of this book will not match its title. We would argue that reconstructive surgery has been one of the most effective treatments in many selected cases of aggressive rheumatoid arthritis, but it receives no more than eight lines on page 433. Surgeons who collaborate over the treatment of these conditions need to know about the medical treatment which accompanies any surgery, but this book, by ignoring the place of operations, gives less than complete service to physicians on that count.

Neglected trauma is an important subject although an uncommon topic for a three-day meeting. This book is a report of a conference organised at the instigation of Professor B. Mukhopadhyaya, the doyen of orthopaedic teachers in India.

In the subcontinent, because of lack of education and finance and the presence of untrained bone-setters, the effective management of acute trauma is often long delayed. Indeed, even in the UK with the support of well-equipped units, most experienced orthopaedic surgeons have been faced at some time with examples of the suboptimal treatment of fractures. In the Editor’s words “the management of the neglected trauma we see is such that it will test the ingenuity of the best surgeon in the Western Countries”.

The subject is approached on a regional basis. Surgeons who have trauma as a special interest will find much useful advice on the management of the dislocated shoulder after a delay of six weeks, post-traumatic stiffness of the elbow, severe foot trauma and the difficult decision of whether to amputate or attempt to save the severely injured lower limb. The book records valuable experience in the use of Ilizarov’s technique for compound fractures with established infection.

L. Kleenerman.


The mind of the orthopaedic surgeon is not special but spacial. The study of anatomy (three-dimensional geography) is not only central to his or her practice but likely to be a passion. Educators struggle with present-day problems of teaching and training; biochemistry competes with anatomy. The latter has a valuable adjunct in these two CD-ROMS, one on the anatomy of the hand and forearm and one on common surgical procedures in these regions.

The present senior generation will recall with nostalgia the computer game: repeated viewing of a program can induce ennui. The surgical disc is no less impressive demonstrating the various stages of several standard procedures, of which the best is a reconstruction of a severed flexor tendon. The viewer has interactive control up to a point, so that stages can be studied at the right speed with identification of structures when required. Needless to say the functional outcome of the demonstrated case is exceptionally good.

As fascination at the technical achievement fades, the viewer’s lust to touch reminds him or her of exactly what surgery is all about - the doing of it. Virtual reality can be no more than that, but learning and appetite go together. The programmers are to be congratulated and I expect that they will develop their ability to entertain. In fact, the system has one of the weaknesses of the computer game: repeated viewing of a program can induce ennui.

Michael Laurence.


As Stephen Copeland notes in the Preface, the title of this book is beguilingly simplistic. It is unique in addressing the management of joint stiffness from a multidisciplinary standpoint, cutting across boundaries of anatomy, biomechanics, surgical management and rehabilitation. The book is arranged in four anatomical sections: the shoulder, elbow, wrist and fingers. A fifth section, entitled ‘Interrelated Stiffness’, deals with the spastic upper limb, arthrogryposis, compartment syndromes and reflex sympathetic dystrophy. It is about management rather than technique, and draws together fundamental principles of orthopaedics which are often overlooked in operative planning and postoperative care.

The 53 chapters by its 66 contributors are written as a series of short personal essays in varying styles, giving the book an appealing eclectic flavour. At the end of each chapter is a useful short list of relevant key references.

I recommend this book to any surgeon with an interest in the surgery of the upper limb, as an excellent overview of this complex problem.

Brian Cohen.