

Operative maxillofacial surgery. Edited by *J. D. Langdon* and *M. F. Patel*. Pp 510. London: Chapman & Hall, 1998. ISBN: 0-412-56000-3. £195.00.

This is a multiauthor textbook covering most of the surgical aspects of maxillofacial surgery and aimed at the trainee surgeon. It gives an excellent synopsis of the work of the specialty but only parts are of interest to surgeons in orthopaedics and traumatology. The section on emergency management will supplement the basics of Advanced Trauma Life Support (ATLS). For those wishing to gain initial understanding of reconstruction within the head and neck it gives some very clear explanations. It also has a section covering techniques of bone-harvesting, useful to all surgeons.

The section of greatest interest to orthopaedic surgeons is that on trauma. The principles of management and various techniques of fixation are described but not as well as in other standard texts. Monocortical non-compression mini-plating, which is the mainstay of fixation in maxillofacial surgery, is described but is disappointing in detail. The fixation plate in Figure 28.5, page 343, for example, is in the incorrect position. This book, however, is a very useful addition to any library for trainees in traumatology and orthopaedics.

D. M. Adlam.

Disorders of the shoulder: diagnosis and management. Edited by *Joseph P. Iannotti* and *Gerald R. Williams, Jr*. Pp 1141. Philadelphia: Lippincott Williams & Wilkins, 1999. ISBN: 0-7817-1320X. \$295.00.

As the editors of this large book say in the preface, the study of shoulders has come a long way in a short time. During the lifetime of individual surgeons, shoulder and elbow surgery has become a specialty in its own right. A generation ago it was felt appropriate for any orthopaedic surgeon to venture into the shoulder whenever the then indications were observed; but now the field has advanced to the point where a full-time commitment to the joint is expected.

This compilation is intended for such specialists. It is written by about 60 contributors, most of whom are eminent North Americans, with 18 from Philadelphia. It is laid out in the way that has become conventional for such tomes, with the common surgical disorders addressed first, then fractures, and then the less common conditions, among them neoplasms and infection.

As in all such collections, the reader is thrown into a quandary by the variety and volume: is every opinion equally authoritative? This is a serious problem for the inexperienced or junior surgeon who may be tempted to use the book as an operating manual. I would not advise its use in this way, for fear of errors of judgement. It will be most useful to specialist fellows working in an environment of scholarly curiosity with experienced teachers. For them it will be a rich source of opinion, advice and reference. Indeed, were it not for its size and weight I would recommend it to all these trainees for their briefcases, but most will want to keep it on a strong shelf, where it will be a valuable addition to the works of reference already there.

Michael Watson.

Shoulder arthroplasty. Edited by *G. Walch* and *B. Boileau*. Pp 438. Berlin, etc: Springer Verlag, 1999. ISBN: 3-540-63349-9. £103.00

The goals of shoulder arthroplasty are relief from pain, nearly normal shoulder function and long-term survival of the implant. This book is a timely contribution from two surgeons who have promoted the accurate reproduction of 'normal' anatomy using modular prosthetic designs to achieve these objectives, and represents the best of current practice from a distinctly European perspective. Much of the book is essentially a technical manual on these 'third-generation' implants, containing many practical steps, with excellent diagrams and intraoperative colour photographs. Particularly valuable are the sections on anaesthesia, the management of fractures including a biomechanical rationale for reconstruction of the tuberosity, and a new classification of patterns of osteoarthritis of the glenohumeral joint.

The last part of the book reviews short-term multicentre studies, emphasising stratification according to diagnosis, and defining details of rehabilitation. Although these results are encouraging, the challenges of preventing complications such as loosening of the glenoid and the generation of wear debris remain. There is no doubt that the authors have made great advances in the field, but newcomers to shoulder arthroplasty should be reminded that remodelling the *bony* anatomy is only one aspect of the procedure; accurate dynamic soft-tissue balancing is perhaps even more critical, and reliable quantification remains elusive.

Andrew L. Wallace.

Quantitative ultrasound: assessment of osteoporosis and bone status. By *Christopher F. Njeh*, *Didier Hans*, *Claus C. Glier*, *Thomas Fuerst* and *Harry K. Genant*. Pp 432. London: Martin Dunitz Publishers, 1999. ISBN: 1-85317-679-6. £75.00.

Since the pioneering studies reported by Christian Langton and colleagues in the 1980s, much clinical research has been directed at the development of quantitative ultrasound (QUS) measurements of the peripheral skeleton as an alternative to dual-energy X-ray absorptiometry (DEXA) for the assessment of skeletal status. Recent prospective studies have confirmed that, at least in elderly women, both broad-band ultrasonic attenuation and speed-of-sound measurements at the calcaneus can identify those individuals at risk of osteoporotic fractures as reliably as DEXA.

In this book five of the leading workers in the field present the first comprehensive review of QUS technology including descriptions of the basic science of ultrasound, reviews of the wide variety of commercial equipment now available, and the application of QUS to clinical and invitro studies. It seems likely that over the next few years the relatively low cost of QUS technology and the absence of ionising radiation will ensure its ever wider application as a tool for clinical measurement. This is an excellent reference book both for experienced clinicians and scientists already working with QUS as well as those wishing to understand its potential.

Ignac Fogelman.