

Sectional and MRI anatomy of the human body – a photographic atlas. Edited by *Slobodan Marinkovic, et al.* Pp 515. Stuttgart: Georg Thieme Verlag, 2000. ISBN: 0-86577-899-X. DM 248.00.

This atlas of MRI sections joins the relatively crowded market of anatomical texts comparing cryosections with MR images which are mainly T1-weighted, proton density and T2-weighted.

The introduction is relatively short but unfortunately has been written by someone whose native language is not English. The cryosections are of good quality, but are printed only in black and white. Many differ from the 'adjacent' MR sections and others are to be found many pages away, making cross-referencing difficult. The MR images are of moderate quality and in the brain are of insufficient resolution to identify the cranial nerves satisfactorily, although they are visible in the cryosections. The labelling is generally good but is frequently of insufficient detail in those areas where difficulty is encountered, such as the ligaments in the hand and foot. The sections are in conventional axial, coronal and sagittal planes but this is inappropriate for the shoulder where angled coronal and sagittal images are routinely utilised to demonstrate the rotator cuff; the images are therefore of little use in this region. There is some curious juxtapositioning; for example, sagittal images of the hip appear in the knee sections.

The best part of this text is undoubtedly the anatomical slices through the brain, but there are better reference manuals available which use diagrams rather than cryosections and the details are therefore more closely matched. From an orthopaedic point of view, the anatomy is not sufficiently detailed in those areas of most interest. I fear that the expertise of imaging has gone far ahead of this volume. Given the choice of buy, borrow or leave it on the shelf, the last is appropriate.

John Bingham.

Functional reconstruction of the foot and ankle. By *Sigvaard T. Hansen, Jr.* Pp 544. Hagerstown: Lippincott Williams & Wilkins, 2000. ISBN: 0-397-51752-1. \$159.00.

This volume has been written by a single author based on his experience of 30 years. As expected from such an experienced traumatologist, the section on injuries is comprehensive. Professor Hansen has a number of interesting if unorthodox views; he considers the functional anatomy of the foot only from the point of view of the surgeon, and he classifies the joints on the basis of whether or not they can be fused without significant loss of function. Thus, there are joints which are essential, those which are non-essential but useful, and those which are unnecessary. The interphalangeal joints of all the lesser toes fall into the last category, and the calcaneocuboid joint is regarded as non-essential. His stress on the importance of instability of the metatarsal-cuneiform joint of the first ray, and hence fusion of this joint as part of the surgery for correction of hallux valgus, is a view that is not uniformly supported. Whereas in the UK most diabetics wear special shoes which are prescribed for them, the

author strongly recommends operative correction of all deformities. This could create a vast volume of work. Many believe that when there is loss of normal sensation, mobility provides more protection than rigidity, but correction of a fixed deformity is required to prevent the recurrence of an ulcer.

The second half of the book is an atlas of both major and minor surgical procedures. There are detailed descriptions of all the common operations on the fore- and hindfoot, and also a section on 'revision' of previous surgery. I enjoyed the section on triple arthrodesis, which has a strong emphasis on internal fixation with screws. This book is certainly original, provocative and stimulating. It will be a useful addition to the libraries of all committed foot and ankle surgeons, and orthopaedic departments.

Leslie Klenerman.

The foot in diabetes. 3rd edition. Edited by *A. J. M. Boulton, H. Connor and P. R. Cavanagh.* Pp 366. Chichester: John Wiley & Sons Ltd, 2000. ISBN: 0-471-48974-3. £50.00.

This book, now in its third edition, is the result of interdisciplinary conferences held in Malvern every second year since 1986. Andrew Boulton, Professor of Medicine at Manchester University, and Henry Connor, a diabetologist from Hereford, have been involved from the beginning; Peter Cavanagh is an authority on biomechanics.

The book has doubled in size since the first edition and enlists a wide range of experts. I can readily agree with John Ward who states in the first chapter, that "study of so many aspects of the diabetic foot, places it as the single greatest growth area in diabetes work, both research and clinical". Orthopaedic surgeons have a definite role to play. Their expertise is required for the use of total-contact plasters, which are still regarded as the method of choice for the treatment of plantar ulcers. There is also a chapter on the role of prophylactic orthopaedic surgery, and Grace Warren, a veteran missionary surgeon, writes on lessons learned from leprosy. The principles of management are well summarised in the section on 'Practical Guidelines' and nicely illustrated by diagrams. Diabetes affects about 5% of the population, and therefore a careful study of this text will be invaluable to both physician and surgeon.

Leslie Klenerman.

Peer review in health sciences. By *F. Godlee and Tom Jefferson.* Pp 271. London: BMJ Books, 1999. ISBN: 0-7279-1181-3. £30.00.

At first sight this does not appear to be a book that would interest orthopaedic surgeons, but a closer inspection of its contents and wide-ranging chapter topics suggests otherwise. It certainly provides valuable advice to those of us who are called on to read and review papers submitted to learned journals and who referee grant applications for clinical and scientific research. The book also provides help for those on the other side of the peer review 'barrier', since it contains information on how to prepare these documents to ensure a maximum chance of success. Other informative topics with relevance to both author and reviewer are the avoidance of bias, conflicts of interest and unethical research, while revealing the worrying emergence of scientific fraud. A very