Book reviews


This CD ROM begins with the AO classification of fractures of the pelvis and acetabulum. Three ‘types’ of pelvic ring segment and three ‘types’ of acetabular segment are described. The radiological illustrations of each fracture type with superimposable tracings in association with the CT slices and 3D pictures, provide an excellent analysis of the various types of fracture for teaching purposes. Outlining the fragments is always difficult but the ‘overlays’ provide a basis for discussion. Similarly, the dictionary and database are helpful and instructive.

However, the clinical uses and application of the AO classification, particularly in relation to acetabular fractures, are debatable. The importance of a classification of fractures is its relevance to the clinical situation. The classification of acetabular fractures produced by Judet and Letournel came from their surgical experience of operating on all acetabular fractures over a period of 15 years. This is one of the few truly surgically-based classifications of fractures. It is a tribute to their acumen that the advent of axial and 3D-CT scanning confirmed their original analysis. In view of this, I find it hard to justify the invention of a new, complex and not clearly applicable classification which I find unwieldy.

A much more fruitful way forward would be to extend the Letournel morphological classification of acetabular fractures by quantifying the area of articular cartilage on each fragment. If the area of the unfractured acetabulum is taken as 100%, it is then possible to quantify an acetabular fracture by measuring the area of articular cartilage on the displaced portion. In the case of ‘both-column’ fractures in which no articular cartilage remains on the ‘key’, secondary congruence can be estimated by measuring the area of articular cartilage in contact with the femoral head. These measurements can be made from axial CT scans, allowing the quantification of acetabular fractures, with a view to predicting outcome and providing indications for surgery.

This CD ROM is an excellent teaching tool for an understanding of acetabular and pelvic fractures. Perhaps the comprehensiveness and complexity of this system may encourage the practising surgeon towards the simplicity of Letournel and Judet’s work, from which quantification of articular cartilage is the relevant area for research.

R. N. Brueton.


This book provides a comprehensive review of orthopaedic spinal surgical approaches, techniques and implants. It is very well illustrated, with excellent reference to the appropriate anatomy.

Each subject is clearly and concisely summarised with respect to the indications and potential complications. The historical development of each technique is also listed.

The demanding nature of most of these techniques is perhaps underplayed and may have been enhanced by the inclusion of clinical cases, with their special imaging. The use of pedicle screws with hook/rod systems for scoliosis is not discussed, reflecting transatlantic preferences.

This text provides an ideal introduction to complex spinal surgery for the specialist registrar, and a useful revision aide for the Part III Examination.

Stewart Tucker.


This book represents the work of no fewer than 80 contributors, all but seven of whom are from North America. The basis was a workshop held in May 1997 supported by the AAOS, the Orthopaedic Research and Education Foundation and the National Institutes of Arthritis and Musculoskeletal and Skin Diseases, taking as its goal “increasing understanding of skeletal morphogenesis and growth and stimulating new research”.

The 36 chapters are divided into four sections as follows: the formation of the bony skeleton and joints, the function and regulation of the growth plate, disturbances of morphogenesis and areas for therapeutic intervention. Each section commences with a chapter providing an overview of the topic and finishes with one which details areas for future research; both make useful and interesting reading. The chapters in between are orientated towards basic science with information which is extremely relevant to our understanding of the musculoskeletal system if perhaps a trifle heavy going for the uncommitted reader. Nevertheless, this book provides easy access to facts which would otherwise be found only by scouring numerous journals. There is some repetition of material between chapters but since this is not a book which is likely to be read from cover to cover, the repetition is actually a useful revision aid!

This book may not be ideal for bedtime but it would be a useful addition to a departmental library. Both trainees and trainers alike should find time to read at least part of it.

D. M. Eastwood.


The principles espoused in this volume should be of interest and practical use to all orthopaedic surgeons who perform primary total knee replacement (TKR). Inevitably, they will be involved in the assessment of patients who have problems, some of whom will require revision surgery.
In the UK most orthopaedic surgeons perform their own revisions and the key to success is to analyse correctly why the primary procedure failed. If one reads only one chapter from this book then it should be Laskin’s assessment of the condition, covered so comprehensively in Chapter 7. Both the Editor’s chapters are clear and well written; axial and rotational alignment is appropriate to both primary and revision TKRs and the geometry of stem design and fixation is well presented, particularly the section covering osteotomy. The issue of ligament balancing, an essential part of knee replacement, is given proper emphasis; chapters 6 and 12 should be read consecutively.

The removal of the component is not a matter of brute force. Modern techniques are well covered and explained; the use of a Gigli saw is less common nowadays with the advent of high-speed drills with specialised thin drill tips. The facility of ultrasonic instruments to ease well-fixed prostheses and to remove safely intramedullary cement plugs is emphasised. The more specialised areas of extensive bone loss and loss of the medial collateral ligament will be of interest to those dealing with these daunting problems. For most surgeons the extensor mechanism is the bête noire of revision knee surgery; it is pragmatically addressed in Chapter 16. The principles of postoperative care, rehabilitation and the management of infection are not neglected. The final chapter on limb-salvage techniques is a tribute to engineering ingenuity and surgical bravery. Long-term results are awaited.

The work is comprehensively referenced and highly recommended to orthopaedic surgeons in training who have an interest in this subject. Orthopaedic departments, postgraduate libraries and surgeons performing total knee replacement must have access to this book.

Neil Thomas.


This extremely readable book has risen from postgraduate lectures given at the University of Toronto. It has been put together by two senior residents, and it is structured in a concise and stylish manner. It is offered as a clinical guide with a synopsis of the extensive modern literature on both the surgical and oncological management of bone tumours.

The first part deals with the clinical and radiological aspects of musculoskeletal tumours, and analyses in depth the five presenting complaints of swelling, bony enlargement, incidental findings, pain and pathological fracture. There is a profound study on imaging. The book then follows the usual division of primary bone lesions, malignant tumours and lesions which mimic primary bone tumours. I particularly enjoyed the section on biopsy and staging, in which sound principles are laid down and the debate on needle versus open biopsy is presented. The surgical staging system of Enneking is beautifully simplified and expounded into a very easily recognised table which students at every level of seniority will understand.

The second half of the book can really be considered a synopsis of the known literature, much of it probably done as an exercise by the residents. Each section is accompanied by some excellent radiographs, presumably from the records of the University of Toronto, and there are good histopathological illustrations. Plain radiographs and CT and MRI scans are all included.

In the section on primary malignant lesions, the book emphasises the orthopaedic and pathological findings. There is little mention of oncological treatment or the controversies therein. The prognosis on the whole tends to be somewhat simplified but none the less gives the reader a feel for the devastating nature of some of these conditions.

The preface states that the intended readership of the book includes postgraduate students as well as academic and community specialists in pathology, diagnostic imaging, medical oncology, radiation oncology and orthopaedic surgery. I think that this is perhaps too wide a target. It will, however, serve as an excellent synopsis of the problem for postgraduate students, particularly those facing their FRCS(Orth) examination, and its lay-out will give them a clear aide-mémoire to take with them into the examination and on to their future consultant practice.

S. R. Cannon.


This tenth book in the Master Techniques in Orthopaedic Surgery series deals with the surgical treatment of 42 selected fractures. Each chapter covers a different mode of management for each named fracture, and is set out in an identical format, starting with the indications and contraindications for the procedure. An impressive team of authors then deals with preoperative planning, the surgical approach, the technique itself, postoperative management and complications and finally presents an illustrative case.

The book is not intended to be a comprehensive guide to the management of fractures but is more an operative atlas of surgical technique. In his preface Dr Wiss states his intention to “take you into the operating room and let you peer over the shoulder of the surgeon at work”. It does not cover spinal or hand fractures, presumably because they are dealt with elsewhere in the series, but there are some surprising omissions of common techniques, most notably percutaneous K-wiring of distal radial fractures and hemiarthroplasty for displaced subcapital fractures of the hip.

The strength of the book is undoubtedly the superb colour photographs and illustrations which accompany the text. The photographs are backed up by radiological and fluoroscopic images with very helpful line drawings. They illustrate the positioning of the patient in the operating theatre and the siting of the image intensifier, which is so often neglected in teaching and left to awkward trial and error, and then the surgical approach, exposure, procedure and closure. The accompanying text is easy to read, informative and full of invaluable tips and warnings of potential pitfalls.

I found this work to be a very practical addition to my shelf, to be kept alongside a comprehensive text on the management of fractures, and certainly to be consulted when the decision to operate has been made.

S. J. Drew.

Books received