

Book reviews

Atlas of orthopaedic surgery: a multimedia reference

Kenneth J. Koval, Joseph D. Zuckerman, 443 pages, Lippincott Williams & Wilkin, Philadelphia, USA, 2004

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32 coworkers of the New York University Hospital, all experts in a specific field, give the consensus opinion on regularly performed adult orthopedic operations. The target group for this book is orthopedic surgeons and registrars. It is well illustrated with numerous (sometimes full-page) full-color photographs, and it contains a video guide on DVD-ROM. It is also easy to read, because all chapters are more or less arranged in the same way: relevant anatomy; indications for surgery; classification; preoperative planning including equipment, patient positioning; the operative procedure and the aftercare. Each chapter ends with recommended reading.

One can feel the all-American authorship—in the chapter about total hip replacement, for example, where only the hybrid hip is mentioned. The operative procedures mentioned are well described. The chapters are illustrated with a substantial number of bloody color pictures made in theatre. They give the book the appearance of a glossy magazine, but many of the pictures are difficult to interpret and a simple technical drawing would have given more information. Many photographs do not give a better understanding but are more “visually entertaining”.

The book is far from a comprehensive orthopedic atlas. The operations described are regularly performed, but many regularly performed procedures are missing. Considering for example the chapter about the wrist and hand, only external fixation with supplemental K-wires for distal radial fractures is described. Alternatives such as the more regularly performed volar or dorsal plate, or the Karpandji procedure, are not mentioned. I also miss

arthrodesis of the wrist, excision of the trapezium and arthrodesis of the trapezio-metacarpal joint, treatment of nonunion of the navicular bone etc., all regularly performed operations that a registrar should be familiar with. For most of the chapters, one can mention some missing operations; e.g. the arthrodesis of the ankle joint is well described but the subtalar or triple fusion are lacking.

The DVD-ROM has the same content as the atlas and carries a video of the operations described. Each operation has been divided into a number of video clips with a short corresponding text stating which part of the operation is being performed, or sometimes slightly more. Below the text, you can see how the patient is oriented. One can choose to play the entire video procedure or just the individual portions. If you choose to watch an individual portion, you will see the accompanying name below the video but if you choose the whole session, the text does not follow when the clips change and you do not know what part of the operation is being shown. In general, the video clips give a good idea of how the operation is performed, and they certainly add information to the book.

If a new book—in this case a multimedia reference—appears on the market, one should ask what the added value is. Is there a need for this new book, or is it more of the same? The atlas describes and shows the way a number of regular orthopedic operations are performed in the New York University Hospital. In my view, this book is much too restricted to this hospital and too many standard orthopedic operations are missing. The DVD-ROM makes it attractive, but I am not sure how often the videos will be used in daily practice. I

made a comparison with one of the first orthopedic books I bought during my career: *Standard Orthopaedic Operations* by J. Crawford Adams (1985), a book in which most surgical approaches, basic techniques and almost every orthopedic operation are described and illustrated with simple but clear drawings—concise information! The authors of this new atlas have put a great deal of energy and effort into improving understanding with modern techniques. However, the simplicity and completeness of “Crawford Adams” is hard to beat.

This atlas is unnecessarily thick and bulky because of the number and size of the photographs. Too many of these pictures are impressive, but unfortunately not informative. In Europe the price is considerable (239 euros), and there are attractive alternatives.

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Master techniques in orthopaedic surgery—the spine

David S. Bradford and Thomas A. Zdeblick (eds.), second edition, 480 pages, Lippincott Williams & Wilkins, Philadelphia, US2A 2004

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Do we need books in the era of exploding information supply? There was a time when books were the principal purveyors of the accumulated knowledge in a certain discipline. This seems so remote in our “Googling” age; just enter “cervical discectomy” and you get 14 200 hits in 0.61 seconds varying from high-quality research to anything written by commercial parties, or very personal accounts of patients and their relatives or “support groups”. So why bother to write or to buy a textbook? But is it really getting easier for a novice to acquire all necessary information covering a certain subject? As teachers and as publishers, we should think about the role of our conventional trade of writing and selling books and journals. Our role is shifting rapidly from one of information supplier to a supplier of “reliability”, of “editing”. If we want to make sure that the novices in our profession get the necessary information and training, we should be able to provide them with a structure of the ever-expanding body of information in such a way that they would be empowered to understand the basic problems and possible approaches for the solutions—and will not get lost in an embarrassment of riches. Thus, it might be a good idea to ask “masters”, people who have been dealing with these problems for a long time, to give an overview of the field. As long as the “masters” do not fall into “argument from authority” but try to create a basic sketch of the field without losing sight of controversies and gaps in our knowledge, this might work. This book intends to do just that. It seems that the publishers have learned from their earlier experiences and have adopted a more critical approach to avoid their former formulae of presentation of idiosyncrasies by “well-known names”.

The format is well-chosen, and all basic approaches and techniques for cervical, thoracolumbar and lumbar spine are dealt with separately. For each subject indications/contraindications,

preoperative planning, surgery, postoperative management and complications are discussed. At the end of each chapter, a list of recommended reading is provided. It is not always clear, however, why these publications, some of them dating from the 1960s, are recommended. It would probably have been better to separate references from recommended reading. There are, of course, major differences between chapters—as each chapter is written by different authors. It is an understandably difficult task for the editors to select the appropriate ‘masters’ for each subject. They should actually have called the book “US Masters’ Techniques” as, except for one chapter by German authors involving a relatively new technique, all writers are from US centers. There would be nothing wrong with that, as there are many provincial markets for all kinds of products. This is understandably reflected in the book by a strong bias for US preferences and preoccupations. It is apparently difficult for our American friends to overcome the “NIH” (not-invented-here) syndrome. Nevertheless, all contributors have done their best to give a balanced overview of the subject, although background information for the choice of preferred approaches is often inadequate. After all the effort by spine surgeons with very busy practices, it is frustrating to see that their texts are marred by the low-quality of graphics and pictures. Of course, we have been spoiled by the high-quality graphics everywhere these days. Our visual tastes are constantly being refined. It is extra painful, therefore, to have to endure the amateurish drawings, poor-quality scans from other sources, uncorrected all-red-hue peroperative photographs, radiographs with blue-green tints, one of them even printed upside-down. Any high school child with some interest in computers could have made all the figures and pictures more palatable with a couple of hours’ work. It is unfair to the authors who have done their best to

present their valuable experiences in a format that is meant to be a teaching instrument. It is the publisher's and editors' shared responsibility to assure good professional technical support for the efforts of the professionals in the subject. Almost all of the recent textbooks and most of the internet sites about spine surgery have better-quality graphics. This is a major flaw in a book which was meant to be a technical guide to the surgery of a very complex organ.

So, do we still need books? Structuring of the chaotically expanding body of knowledge is becoming an urgent problem, especially in relatively young or rapidly changing specialties such as spinal surgery. The approach of asking experienced specialists to give a balanced overview of the field with emphasis on what we know and what we do not

know is not such a bad idea after all—as long as this helps our novices to critically assess existing practices and to create their ideas and preferences about how to proceed further in research and clinical practice. But this should be compatible with the cosmopolitan and visually sophisticated tastes of the younger generation. Yes, we do need books, but our students, residents and fellows deserve better than this one.

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