

Book reviews

The elements of fracture fixation

A. J. Thakur, 187 pages, Churchill Livingstone, New York 1997
ISBN O 443 05547 5

“The true cause of internal fixation failure is not the failure of the device but in fact the failure of the surgeon to understand the principles of fixation and limitations of the implant” the author claims in his preface. Starting with elements of mechanics involved in different fracture patterns and metallurgic comments on the various materials used in implants for fracture fixation, he then describes the properties of different implants and comments on the indications for application. The presentation is on a basic level and could be understood without prior knowledge of mechanics, but is nevertheless essential for understanding operative fracture treatment. The author’s ambition is to give new trainees in the speciality basic knowledge in a concise form.

The field of operative fracture fixation is in constant progress and some clinical guidelines in this book seem already slightly out of date. Double plating is recommended for subtrochanteric and supracondylar fractures of the femur, which are preferably treated with intramedullary osteosynthesis, as also are “fractures of the femoral shaft in patients under 60 years of age”. “Open nailing”—i.e., nailing through the fracture site—“may be performed in less than ideal operation room conditions”. Perhaps it is safer to recommend external fixation under such circumstances.

One chapter is dedicated to hip fixation, including advice on how to reduce hip fractures. For the reduction of a trochanter fracture, traction in a semi-abducted, slightly flexed position and internal rotation are recommended. While working with the Gamma-nail (Howmedica) and later with the Proximal Femoral Nail (AO/ASIF), I have obtained better reduction results with traction in a maximally adducted, slightly

flexed position (about 20 degrees) and the foot in a neutral, “normal” position.

The chapter on external fixation deals with the AO fixator, the Orthofix fixator and the Ilizarov ring fixator. The author seems unfamiliar with the Hoffman external fixation system which has more degrees of freedom and variability in mounting, reduction procedures and rigidity than the AO/ASIF and Orthofix designs. The “unprecedented freedom of pin placement”, which the author ascribes to the Modular frame, has always been one of the distinctive features of the Hoffman system.

The illustrations produced by the author in a computer are informative. Photographs would perhaps have given more exact information on the design of implants—for instance, the difference between cortical and cancellous bone screws. Some clinical examples in the form of radiographs of successful or failed cases, treated with different types of fixation, would have made the presentation of the problems connected with fracture treatment with implants more concrete, but it would, of course, have meant a much larger book. In the present version, the author has reached his goal of giving a good introduction to the commonest methods of osteosynthesis.

The book should be studied by every young colleague, planning to attend a basic course on fracture treatment and by the more experienced fracture surgeon, who wonders why he has so many implant failures in his practice.

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Joint stiffness of the upper limb

Stephen A Copeland, Norbert Gschwend, Antonio Landi and Philippe Saffar (editors), 401 pages, Martin Dunitz, London 1997
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The editors state in the foreword that this book was published to accompany an instructional course on upper limb joint stiffness, given at the 4th Congress of the Federation of European Societies for Surgery of the Hand. The aim was to give a state-of-the-art text, rather than a formal textbook on the subject.

The 400 pages are divided into 5 sections: shoulder, elbow, wrist, finger and interrelated stiffness, with approximately 80 pages in each section. With 66 contributors, many of them well-known authorities, the intention has been to provide a variety of knowledge between different categories of specialists having an interest in upper limb joint stiffness.

The editors seem to have used their own preferences in editing and layout for their part of the book in order to cover cause, treatment and rehabilitation of joint stiffness. This unfortunately makes the text somewhat incoherent and often similar information is given repeatedly in the different sections. Unlike to what is stated in the foreword, the treatment of the whole upper limb as well as collaborative treatment between different subspecialties is only infrequently discussed.

The illustrations are all black-and-white drawings or photographs of varying quality. The texts accompanying the figures are very short and give hardly any help in interpreting the figures.

The bibliography varies—some chapters having no references at all, others being almost exclusively referenced by the author's own publications and some chapters with very adequate and up-to-date references.

Basic science concerning joint stiffness, anatomy and non-surgical treatment are, throughout the entire book, given a somewhat shallow survey, containing little new data. All sections focus on surgical techniques and arthroplasties, which are more thoroughly described in numerous already existing excellent textbooks.

In conclusion, this book presents very little new information on the cause and treatment of joint stiffness of the upper limb.

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