Book reviews

The musician's hand—A clinical guide

Ian Winsbur and Christopher B. Wynn Parry, 240 pages, Martin Dunitz Ltd, London 1998
ISBN 1-85317-492-0

Professional musicians, like athletes, require top performance of the locomotor system many hours a day. Many live in a highly competitive social environment and are subjected to severe psychological stress during performance. Unlike athletes, little medical and paramedical attention has been paid to musicians, who therefore can avoid surgical overtreatment given by sports medicine enthusiasts. On the other hand, colleges of music tend to encourage treatment of locomotor system pathology by yoga, deep-breathing and the like.

The musician's hand appears to be written with a great passion for musicians, their problems and hand surgery, but without overestimating surgical possibilities. Reading this book is like listening to a wordy retired colleague telling interesting stories about clinical observations during a long career. This can be quite entertaining, but does not help if one wants to base clinical decisions on evidence. In general, there are many paragraphs and even pages with words giving no clear message and many statements are self-evident, e.g., "rock musicians need regular and properly balanced meals". It is not clear which readers this book is addressed to; the hand surgeon learns nothing new in his own field, but he might be interested in reading, for example, the chapter about the psychosocial secrets of a symphony orchestra. On the other hand, the music teacher could find some interest in reading a several-page case report on a toe-to-thumb transfer in a bagpiper, including a photograph of the foot after toe amputation. There is another case report with 10 illustrations (cover uncounted) about a PIP joint arthrodesis in the left hand of a violinist. Although the outcome is described as good, I wonder how her vibrato sounded. The chapter on Dupuytren's contracture starts with one and a half pages of historical background, with emphasis on the high prevalence of this disease in Scotland and a full-figure photograph of a bagpiper, not yet afflicted with the disease. There is another chapter about re-designing musical instruments to make them more ergonomically acceptable. Some of the ideas appear good, but probably few musicians would accept them. Several chapters deal with pain due to muscle tension and posture problems while playing various instruments. They are written by music teachers specialized on the different instruments. Although these authors may be able to help many musicians efficiently, their writing suffers from vague terminology and diffuse theory. Musicians with these common problems would probably be as much confused as helped by the book. Real insight into these problems would probably be possible only if musicians and hand surgeons together could realize how little they know, cut away all the dogmas, create a simple terminology based on biomechanics and physiology and start collecting measurable data!

In short, this book provides some entertaining reading, but can give only limited help to the musician, music teacher or hand surgeon with a problem.

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Reconstructive surgery in hand mutilation

Guy Foucher (editor), 204 pages, Martin Dunitz Ltd, London 1997
ISBN 1-85317-301-01

Quite a few volumes have been published recently on the treatment of hand injuries, and many of these have been edited by French hand surgeons, in collaboration with colleagues mainly from the U.K. and the U.S. In this book, edited by one of the pioneers of microsurgery, Guy Foucher from Strassbourg, France, some famous European hand surgeons participate, including Dieter Buck-Gramcko, Antonio Landi and Ivan Matev. After an introduction with a historical review and a chapter on functional assessment after hand injury, the book is divided into three parts: injury to the thumb, unidigital and multidigital injuries. These chapters mainly describe various surgical techniques like distraction—lengthening, pollicization and osteoplastic reconstruction. The book concludes with miscellaneous topics, like reconstruction in children, psychological aspects and prosthetic replacement.

No target audience for this book is given in the preface and it is, indeed, difficult to imagine the category of orthopedic, hand or plastic surgeons or residents that it would suit. Some chapters are very general and some very specialized. Examples of the latter are the two chapters on toe-to-hand transfer. In these chapters, some excellent technical points on the procedures are given by surgeons on the frontier of microsurgery. However, these points seem directed to the small number of hand surgeons dedicated to toe-to-hand transfer and may have limited interest for most surgeons dealing with hand mutilation.

The book is rather uneven in quality and not well organized. Much information is repeated in the different chapters and the terminology is not consistent. This makes reading unnecessarily difficult. Illustrations are comprehensive in some chapters, but poor in others.

In conclusion, this book contains some good technical points on difficult procedures involved in the treatment of hand mutilation but it cannot be recommended for general use as reference literature.

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An atlas of shoulder surgery

Freddie H. Fu, Jonathan B. Ticker and Andreas B. Imhoff, 336 pages, Martin Dunitz Ltd, London 1998
ISBN 1 85317 289 8

This atlas comprises 65 contributions from America and Europe and will be most appreciated by the orthopedic surgeon who is in basic training or by those developing a special interest in shoulder surgery. As the title implies, the book contains many illustrations, both as drawings and as photographs. Many of the drawings, in both color and black-and-white, are excellent and really add to the value of the atlas. However, many photographs from arthroscopic surgery are poorly digitized.

More than half of the 300 pages deal with instability and rotator cuff problems. When treating instability, capsular shift is an important procedure. This is also presented in four variations. The atlas suffers from the fact that some important procedures are not presented at all. The open Bankart procedure is still the gold standard in anterior instability, but is mentioned only as a potentially hazardous procedure (!) or with marked modifications.

Open rotator cuff repair is well described in several chapters. Indeed, initial steps in some procedures are described in detail in several places—perhaps the editors could have reduced these contributions. The most important part of the cuff repair—the suturing of the tendons to bone—could be described very briefly and show old and inadequate techniques. The way the suture should be passed through the tendon is well described in modern literature, but such knowledge is not included in this atlas.

Both open and arthroscopic techniques are described in detail. All descriptions are well illustrated and the text adds to understanding of the procedures.

The fractures are treated with minimal osteosynthesis—a trend today. The use of modified Ender nails in displaced two-part and three-part fractures is well described. The scapular fractures and their treatment are well covered but the supporting bibliography is remarkably short and even deficient.

Being an atlas, this book does not—and should not—discuss the value of surgical treatment versus closed treatment. Therefore, it will certainly help the less experienced surgeon to understand and learn several procedures used in shoulder surgery.

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The spine in sports

Robert G. Watkins, 700 pages, Mosby, St Louis, 1996
ISBN 0-8016-7502-2

Although the target audience is spinal surgeons, the first section of this book is a more or less common textbook on spinal surgery, including chapters on anatomy and biomechanics, clinical and radiological evaluation, as well as descriptions of various surgical procedures. The part describing surgical techniques includes conventional disc and decompressive surgery as well as a thorough description of spinal endoscopy. Included are also descriptions of thoracoscopic and laparoscopic techniques, reflecting the interest of the editor in minimal invasive surgery. Intradiscal therapy is given one chapter. Several of the figures describing surgical technique have been published previously

Differential diagnoses have two chapters, one for each of the upper and lower extremities. Surprisingly, vascular disorders have a separate subheading for upper extremity problems, but not in the chapter on the lower extremity.

The second section of the book contains descriptions of spinal problems in specific sports. The selection of sports has an American profile; soccer is given one chapter (6 pages) while football has 4 chapters in a total of 105 pages.

As a result of contributions by a number of authors, there is a wide variation in the quality of this section. Some of the chapters—for example, those describing gymnastics and equestrian sports—are well written and followed by up-to-date reference lists, while other chapters are mainly case reports. The chapters dealing with figure skating, water polo and sumo wrestling (!) have no reference lists at all, while the author of the chapter on track and field includes only his own publications as suggested reading.

Most chapters have descriptions of mechanisms of injury, prevention and rehabilitation programs, leading to some repetition of information; trunk stabilization exercises are described for a number of different sports.

In short, this book covers the treatment of common lumbar spine disorders and injuries in athletes and, despite its shortcomings it provides valuable practical guidelines. It can be recommended not only to spinal specialists with interest in treating athletes but also to general orthopedic surgeons dealing with sports injuries and interested in learning more about spinal problems.

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Elsevier interactive anatomy, upper limb

Berend Hillen and Gerbrand J. Grohen, Elsevier, Amsterdam, 1996. Volume 2
ISBN: The shoulder joint & axilla 0-444-82257-7, The hand & wrist 0-444-82258-5

Elsevier Science is producing, and Dr. Berend Hillen is the editor of an anatomical atlas of continuous cross-sections of the body on CD-Rom and CD-I. Volume 1 in this series has already been published, with 3 discs on the Head and Neck, and the series is being continued with volume 2, The Upper Limb. This volume was edited by Drs Berend Hillen and Gerbrand J Grohen from the Department of Functional Anatomy, Utrecht University, The Netherlands, with the help of 5 experts from the advisory board and 9 from the production team.

Volume 2 is for hand, plastic and reconstructive surgeons, traumatologists, general and orthopedic surgeons, radiologists, anatomists and neurosurgeons.

This review concerns volume 2, discs I and II, The Shoulder Joint & Axilla (JN) and The Hand & Wrist (BV). The CD-I version was not tested because no authority we contacted was familiar with that format. We worked with both the PC and the Mac. Unfortunately, the producer did not make it compatible with Macintosh, but we tried a PC-emulator (Softwindows) and it worked well, although more slowly. Installation of the program is straightforward and poses no problems. It is easy to work with and one quickly masters different techniques for exploring the anatomy.

Each disc offers several thousands of images of normal anatomy with correlative images from CT, MRI and histology. The anatomical images are photographs of the surface of a tissue block in a microtome (cryosectioning). All structures can be displayed in coronal, sagittal and axial planes. The quality of the anatomical images is high, and one can magnify the cross-sectional images up to 4 times. The CT and MRI images are not of the same high quality. The anatomical images, CT, MRI and histology can be viewed in a split-screen mode enabling the same anatomical part to be displayed by various imaging techniques. One disadvantage of the cross-section technique is that it displays the image two-dimensionally, there is no depth. To get a more comprehensive three-dimensional view, especially of the soft tissues, the animation technique must be used.

All anatomical structures are labeled irrespective of direction, and are indexed according to Nomina Anatomica or the English equivalent.

The increased use of different radiological imaging techniques in upper extremity surgery demands considerable knowledge of human anatomy, which is not always exposed in the same way as in standard anatomical textbooks. We believe that this cross-section technique with the "split screen mode" is especially helpful to radiologists who more and more frequently must interpret MRI images of the upper extremity.

As surgeons, we have found the anatomical atlas, illustrations in modern textbooks and "arthroscopic anatomy" to be more useful in preparation for a surgical procedure. But if one already has a good knowledge of anatomy, it is fascinating and very instructive to use the animation technique to explore a specific structure and its relation to the surrounding tissues. From our point of view, here "The Upper Limb" serves its major purpose.

"The Upper Limb" offers high quality anatomical images and the possibility of interactively exploring areas of interest. This has a great teaching potential. However, it is an adjunct to the standard atlas and does not replace it. An admirable amount of meticulous work has been put into this volume by all those involved in its creation. We believe it was worth the effort.

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