Book Reviews

Childhood Osteology: Bone Tumours and Dysplasias. By M. V. VOLKOV, Director of the Moscow Central Institute of Traumatology and Orthopaedic Surgery. Translated from the Russian by Ludmila Aksenova, M.D. 24.5×17.5 cm. Pp. 466, with 232 figures. 1972. Moscow: Mir Publishers.

The more I read this magnificent work, the more I admire the author's encyclopaedic knowledge, ability and energy. Based on an experience of 1,560 children with bone tumours and dysplasias studied at the Central Institute of Traumatology and Orthopaedics in Moscow, this book is undoubtedly the authoritative work on childhood osteology, and a worthy successor to the author's earlier volume on bone tumours in children.

To those accustomed to using the European Society of Paediatric Radiologists classification, the classification in this book may present difficulties. The author's Group One, developmental anomalies of individual bones, corresponds to Group Three of the European classification. His Group Two, dysplasias of the skeleton, includes both the chondrodysplasias corresponding to Group One (European) and anomalies of bone density, Group Two (European). His second group of dystrophic and atrophic processes corresponds fairly closely to the European Society's Group Four of known etiology. One minor criticism: I cannot see any reference to hemimelic epiphyseal dysplasia.

The author defines dysplasias as changes in the properties of cell elements which are transmitted to subsequent generations, and defines dystrophy as a condition of the tissues, caused by relatively simple factors, which disturb their function and formation, but is reversible. This seems to be entirely logical and consistent, but he unfortunately calls achondroplasia by its alternative, chondrodystrophy, and also includes melorheostosis, osteopetrosis, Engelmann's disease, all as examples of hyperostosis; that is dysplasias, and the European Society would call them anomalies of bone density. However, these are relatively minor matters.

His discussion of the relationship between dysplasias and bone tumours is excellent. He has a good section on the complications of radiotherapy. It was interesting to observe his advocacy of the faggot method of grafting.

This book will long be a classic, containing all the information one could wish for about the bone tumours and dysplasias in childhood. It is copiously illustrated with clinical photographs, radiographs and histological sections, and is by any standards an outstanding scientific work.—Robert ROAF.

Homotransplantation of Bone Tissue in Children. By M. V. VOLKOV, Director of the Moscow Central Institute of Traumatology and Orthopaedic Surgery; and V. BRZER, Head of the Clinic of Radiotherapy of Diseases of the Bones and Joints. Translated from the Russian by Ludmila Aksenova, M.D. 21×13.5 cm. Pp. 232, with 64 figures, plus 4 colour plates and 11 tables. Index. 1972. Moscow: Mir Publishers. Price 95p.

This excellent little monograph by two eminent authors deals specifically with the problems of homotransplantation of bone tissue in children. It starts off with a historical review, then discusses the theoretical basis for their procedures. There follows an extensive clinical section which includes diagrams, radiographs and other illustrations indicating both techniques and results: this ends with a section on homotransplantation of joints, and the pictures show some impressive results. The authors conclude that a homotransplant if properly treated is nearly as effective as an autotransplant and provides both an ideal scaffolding for bones and a biological stimulus for the growth of new bone from the graft bed. Altogether they have performed 552 homoplasty operations in children, of which 492 have been fully followed up and in 472 the result was favourable. The clinical conditions treated included: benign and malignant tumours, bone dysplasia, congenital dislocation of the hip, coxa vara and pseudarthrosis; the operations included spine fusions, osteotomies, arthrodesis of joints and joint replacement. The advantages of using a source other than the patient's own bones, especially in children, are self evident, and the authors have shown that with careful attention to technique the successful use of homografts can be achieved.—Robert ROAF.