Classification and diagnosis in orthopaedic trauma

Edited by R. Anwar, K. Tuson and S. A. Khan

Pp. 253. Cambridge: Cambridge University Press. 2008.

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I thought from the title that this was going to be a simple concise summary of classification systems, and therefore of use to registrars five minutes before the morning trauma meeting, to add sparks of scholarship to the presentation of the previous night's admissions. The book does fulfil that role and is just about small enough to be carried around in the pocket of a white coat - if any Trusts still allow such fomite-bearing attire. However, the book does more than this, and has a section outlining the pathology of fracture healing and a summary of the 'Advanced Trauma Life Support' protocol. It also adds lines on treatment for each diagnostic category. The comments on treatment are concise but probably not complete enough to be the only text used in making decisions, however, they would be very valuable to the junior trainee in that vital minute before the meeting.

The book is published in the United Kingdom and one assumes that it is aimed at a UK readership. The foreword expresses the hope that it will also be of use in developing countries. It is a noble hope, and I am sure that the classification outlines will be useful everywhere. The treatment summaries do, in the main, assume that internal fixation is available and safe, which is not the case in many parts of the globe. The section on hip fractures does not refer to any conservative methods, and the section on femoral shaft fractures in adults does not mention traction, which at a global level is probably the most common mode of management. The book may annoy classical pedants as it spells neurapraxia with an 'o' instead of an 'a' in the middle, but I assume this to be a typographical error. I would have liked references to the original sources of the classification systems somewhere in the book and I hope this will be corrected in the second edition. Overall I liked it and will keep my copy in the room where our morning trauma meetings are held.

C. Lavy

Medicine challenged

Edited by A. Sarmiento

Pp. 166. Baltimore: Publishamerica, 2008. ISBN: 11-604474-456-1. \$19.95.

Few of the eminent leaders of orthopaedics have the privilege of self-indulgent dual publication, which probably explains why this compressed little book has been personally produced. It is also clearly revealed in the book, why Professor Sarmiento has not enjoyed the support of industry. The source material comprises

44 references, every one written by Sarmiento, on the subject of the ethics, organisation, education and economics of orthopaedic practice. None refers to his very considerable contribution to surgical science.

Every chapter is headed by at least six well chosen aphorisms from great philosophers of previous ages, but the text itself is as richly packed with those of Sarmiento himself. According to Popper, - curiously not quoted - science advances through biased opinions, challenged, and either defeated or supported. Sarmiento's thesis is to encourage confrontation and constructive argument, which he considers the essence of education (as opposed to training). His principle attack is on the current tendency of vested commerce to control the science of surgery, through the censorship of teaching programmes.

There is no shortage of bias in this monograph. Sarmiento invites dissent, but in setting himself up as the conscience of orthopaedics, as well as a surgical Cassandra, he deserves close attention and balanced debate. He is clearly the teacher of teachers, which he considers our highest duty.

His text is pervaded by metaphors of 'dark clouds gathering'. He attacks the deforming forces of hard nosed commerce, of tabloid publicity and ignorant public expectation and demand. There are apparent contraindications between the neglect of the impoverished and elderly, and the prevalence of unnecessary surgical procedures on the paying customer. He fears the reduction of orthopaedic surgeons into "the cosmetic surgeons of the musculoskeletal system". I was reminded of a comment by a friend (from a different specialty) who described us as internet practitioners, for whom 'www.' stood for 'wounding the walking-well'.

Professor Sarmiento is critical of the unchecked fragmentation of orthopaedics into subspecialties, blinkered from adjacent anatomical areas, not to mention other disciplines. He fears the power of information emanating from industry which cannot be unbiased, because best practice depends upon reported 'bitter experience', unlikely to come from the private sector. He makes a plea for judgement to be based upon the appropriate rather than the possible. He decries the clinical approach of "what operation is required for this fracture" rather than "what is best for the patient".

The writing is taut and tense while running smoothly before the reader's eye. One significant omission from the argument is that of raw economics, only briefly mentioned at the end of the book. It is an unavoidable fact at the root of all medical problems, that technical invention has priced the best orthopaedics over the budgeting horizon of even Sarmiento's own country. The awful, unethical word 'rationing', redolent of days of deprivation, has been introduced by successful science. At this celebratory turning point, 60 years of the National Health Service in the United Kingdom, it has yet to be honestly addressed in relation to the country's gross national product. The education of the orthopaedic surgeon is not complete until he or she has addressed every point raised in this remarkable little book.

M. Laurence