from the PCCC database, which now reviews information on 8000 patients per year. The information presented includes operative death rates for various patient subsets and the factors that affect these death rates as well as length-of-stay data. The format of each chapter is surprisingly uniform despite the multiauthored nature of the book.

This book provides invaluable information that is not available from any other source. It is clearly not intended for medical students or even postgraduate trainees but will be invaluable for pediatric cardiologists, cardiac surgeons and institutions by providing them with valid information by which to compare their own results.

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SURGICAL APPROACHES TO THE SPINE. Todd J. Albert, Richard A. Balderston and Bruce E. Northrup. 224 pp. Illust. W.B. Saunders Company, Philadelphia; Harcourt Brace & Co. Canada, Ltd., Toronto. 1997. Can\$188. ISBN 0-7216-4554-2

The development of spine surgery over the last 15 years has been erratic owing to the explosion in sophisticated imaging methods, which have allowed more precise diagnoses, to the progress in anesthesia techniques for these complex conditions and to an unsurpassed development of new devices to correct, reconstruct and stabilize the diseased, deformed and injured spine. In terms of anatomy and surgical approaches, there has been nothing substantially new in the past few years, except the introduction of minimally invasive techniques. In this sense this book deals with solid knowledge, which can be presented in different forms.

The book is directed to surgeons who specialize in spine surgery and need to approach the spine at any level and anteriorly, posteriorly or from the side. The fact that the book contains contributions from 22 authors demonstrates how complex spine surgery has become, with further subspecialization into specific disorders or regions of the spine, creating experts for specific approaches.

Although the content of this book is established knowledge, the way this knowledge is communicated to the reader has some merit. All chapters have a useful section in which the complications of each approach are mentioned. The book is organized "vertically"; that is, the approaches are presented from top to bottom of the spine. The book begins with a chapter of the relevant surgical anatomy. However, it does not include such a chapter for the thoracic or, more importantly, the lumbar and sacral spine. The vertical organization is not followed for the second and third chapters, where the upper cervical spine would logically come before the middle and the lower cervical spine. The chapter on the cervical spine includes the mandibular splitting approach, which is not included in most spine surgery textbooks and is a definite advantage of this book.

Unlike other chapters, chapter 8 includes the technical aspects of fixation techniques, information that does not belong in this book. Unfortunately no chapter deals with the approach to the sacrum from either the back or the front, both of which are important aspects for surgeons who manage tumours in this region. The anatomy section in the chapter on the posterior lumbar approach is superficial and does not go beyond the level of medical student knowledge.

The book is easy to read and gives a rounded view about spinal approaches with the exceptions already noted and the usual problems relating to multiauthored books. The book will certainly be helpful to those who are training in spine surgery and to the experienced spine surgeon who may have occasion to refer to it.

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VARICOSE VEINS, VENOUS DISORDERS, AND LYMPHATIC PROBLEMS IN THE LOWER LIMBS. David J. Tibbs, David C. Sabiston Jr., Mark G. Davies, Peter S. Mortimer and John H. Scurr. 254 pp. Illust. Oxford University Press, London, England; Oxford University Press, Canada, Toronto. 1997. Can\$268.95. ISBN 0-19-262762-7

P eople with an interest in venous disease will be excited about this new book by Mr. Tibbs and Drs. Sabiston, Davies, Mortimer and Scurr.

The book features superb coloured illustrations and exceptional diagrams explaining venous physiology, anatomy and pathology and the management of venous disease. This book is all-inclusive in its description of all congenital and acquired venous disease and discussion of disease management. Details and description of deep valvular repair and valve transplantation are minimal.

Venous thromboembolic disease and lymphatic problems are covered in much less detail than the coverage of venous problems.

The cost of this book will discourage many potential buyers.