HANDBOOK OF BREAST SURGERY. Adrian Shervington Ball and Peter M. Arnstein. 166 pp. Illust. Arnold, London, UK; Oxford University Press Canada, Toronto. 1999. Can\$56. ISBN 0-340-74161-9

T his concise, clearly written handbook is useful as an overview of surgical procedures on the breast for the general surgical trainee or as a primer for those planning to specialize in diseases of the breast. It is also a useful reference for general practitioners who wish to discuss intelligently the possibilities their patients may face when referred to a breast specialist.

Topics include preoperative preparation and investigations, and the complete spectrum of standard surgical breast procedures, from fineneedle aspiration to radical mastectomy. All the standard plastic surgery reconstructive procedures are included. Each procedure is described with its indications, required preparation, technical details and potential complications where pertinent.

Mostly the illustrations enhance the text. However, in describing some of the complex reconstructive procedures there is a paucity of diagrams, and the few that are provided are simplified to the point of not being helpful. I find the authors somewhat dogmatic on the subject of "adequate margins," and they might acknowledge that this is a controversial topic. Minor criticisms include the following: some of the technical terminology is not explained (e.g., cytology — C3, C4); the use of glass slides for cytology as recommended by the authors leads to air drying. I prefer suspending the cells in 50% alcohol; the authors use drains very liberally and perhaps excessively; log sheets are provided throughout the book, but the purpose of these is unclear and the terminology on the sheets is not explained; the authors do not do bone scanning or liver ultrasonography as part of their preoperative work-up,

which I think may lead to unnecessary axillary dissections.

In spite of these minor disagreements, I thoroughly enjoyed reading this book. Written with British literary style, the book is clear, concise, comprehensive and very easy to read. Organized in a procedure-by-procedure manner, it is convenient to pick up and put down between doing other things. It was a useful review for me, and I would expect trainees and others to find it an excellent overview or introductory text. I give it two thumbs up!

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MANAGEMENT OF ABDOMINAL HERNIAS. 2nd edition. H. Brendan Devlin and Andrew Kingsnorth, with Patrick J. O'Dwyer and Karen Bloor. 324 pp. Illust. Chapman & Hall Medical, London, UK; Oxford University Press Canada, Toronto. 1998. Can\$216. ISBN 0-412-73820-1

The hernia community has lost a prolific author and practitioner with the recent passing of Hugh "Brendan" Devlin. His first edition of this book, which appeared in 1988, displayed broad scope, clarity and an engaging style. This new edition, with coauthor Andrew Kingsnorth, has the clear prose of its predecessor and larger type for readability. The volume is bound sturdily, with an attractive red hard cover.

The book is organized logically, starting with scientific principles, followed by descriptions of clinical conditions and specific operations. It is targetted to residents and qualified general surgeons interested in abdominal wall hernias. Since most general surgeons repair hernias, this book has broad appeal.

Herniology has exploded since 1988, with new appreciation of anatomy, perioperative care, outcome measures, economics, laparoscopy and the acceptance of prosthetic mesh. The current edition has addressed these issues. New chapters are devoted to laparoscopic groin hernia repair and outcomes of inguinal hernia repair. Coverage of logistics and economics, has increased, and the section on anatomy contains added material on the space of Bogros and views from a laparoscopic perspective. Over 300 new references have been added, for a total of 1010 citations listed alphabetically at the end of the book.

In the preface to the first edition, Devlin stated that he did not want to write an exhaustive text: this edition of Management of Abdominal Hernias is by no means exhaustive. The book omits or covers superficially some important areas of clinical care, such as how to manage hernias during pregnancy, hernia repair concomitant with other operations, flank incisional hernias, groin hernia repair in women, antibiotic prophylaxis, postoperative analgesia and management of multiply recurrent groin hernias. In many parts, especially those covering logistics and economics, a United Kingdom perspective makes the discussion less relevant to North American readers.

The early chapters on the history of hernia repair, anatomy and etiology are the most valuable. Explanatory line drawings complement textual descriptions of the relevant anatomy; colour photographs are not used except for the section on laparoscopic procedures. Coverage of the indications and specific techniques of hernia repair must be criticized. The advocacy of some surgical techniques and methods of repair over others is variously arbitrary, confusing or unexplained. For example, the Shouldice repair is recommended for first-time