

groin recurrences on page 158, but on page 197, the use of extraperitoneal prosthetic mesh is advocated for that indication. Important methods of primary groin and incisional hernia repairs have been omitted. Descriptions of some operative techniques are confusing, such as the Cooper's ligament transition stitch. Unsupported recommendations include the advocacy of drains, even in umbilical hernia repairs, with no mention of the increased infection rates associated with their use. Although the book generally is well edited, typographic errors can be found.

Despite its limitations, this text should be in medical libraries. It is rich in useful information. Devlin has achieved his goal of writing a "neat practical book" about hernias.

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MINIMAL ACCESS THORACIC SURGERY.

Edited by Klaus Manncke and R. David Rosin. 284 pp. Illust. Chapman & Hall, London, UK; Oxford University Press Canada, Toronto. 1998. Can\$176. ISBN 0-412-81600-8

Emerging technologies will change the way we practise surgery in the not-too-distant future. Minimal access thoracic surgery is an example of how technologic advances are making an impact on the performance of thoracic operations. Current editions of thoracic surgical textbooks contain little information on this emerging technology; often, journal reports are presented to show that a minimally invasive thoracic procedure is possible, but there is little discussion as to whether the procedure should be done by this technique.

This book is a well-written synthesis of current experience with new minimally invasive techniques in cardiothoracic surgery. Enough technical detail is included for an experienced thoracic surgeon to expand his repertoire of operations. I believe that the strength of this book, in addition to the technical detail, lies in the reasoned discussion of the context in which the procedures should be done. There is an admirable display of restraint, which is sometimes lacking in journal articles demonstrating a particular surgeon's success with and enthusiasm for a particular technique.

Although this text is primarily for thoracic surgeons, it will also be of interest to those who are curious about future options for treatment in thoracic surgery. It is also useful for decision-makers and health administrators, who will find the balanced discussions of this new technology, which has budgetary implications, quite helpful.

The 18 chapters making up the book are remarkably uniform in approach and quality despite having been written by 22 contributors from 7 countries. Following introductory chapters on history, anatomy, anesthesia and instrumentation, there are chapters on surgery of the esophagus, lung, mediastinum, pleura and heart. Other chapters cover sympathectomy and vagotomy, oncology, palliation, complications and future trends. The descriptions vary from the fairly standard apical resection for pneumothorax to esophagectomy and major lung resections and even cardiac valve replacement. Each chapter is written by surgeons with extensive experience in their areas.

I found the information generally useful and helpful in evaluating the potential for adopting certain procedures. Far from being esoteric, the material covered broadens the reader's appreciation of the possible applications of these techniques, from stag-

ing to minor thoracic procedures and to more complex operations.

On the negative side, the chapter on video-assisted surgery for pneumothorax was overly complicated and confusing. Pneumothorax in young, healthy people was not differentiated clearly from that occurring in elderly emphysematous patients. The suggested thoracoscopy under local anesthesia and computed tomography for uncomplicated pneumothorax is not a common practice and in my opinion is unnecessary.

I believe this book is valuable in that it covers a fast-breaking field in which thoughtful, reflective commentary is lacking, and it should be a welcome addition to any thoracic surgeon's book collection.

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SURGERY FOR ISCHAEMIC HEART DISEASE.

Edited by Ravi Pillai and John E.C. Wright. 296 pp. Illust. Oxford University Press, Oxford, UK; Oxford University Press Canada, Toronto. 1999. Can\$201.95. ISBN 0-19-262466-0

This interesting book about the medical and surgical aspects of coronary artery ischemia has been written for trainees and certified surgeons who are searching for a "refresher course" or a "summary" of the general aspects of investigations and therapeutic agents related to coronary artery disease. The format and writing style are convenient and smooth, making reading truly manageable.

The whole spectrum of coronary artery disease is debated in this book. Among the different topics reviewed by the editors, the overview on the investigation of ischemic heart disease is particularly clear and concise. All as-

pects of the noninvasive methods, including their pros and cons, are covered in detail. As a nonradiologist clinician who has to deal on a daily basis with these investigations, I found this section quite helpful.

The overview of myocardial protection and myocardial reperfusion injury is concise and structured, bringing the reader straight to the essential topics, avoiding the so-common "molecular dryness" of such a basic topic. The diagrams and tables are not too complex and are succinct, and the major points are efficiently discussed and summarized by the author, which I particularly appreciated.

The chapters on the surgical complications of ischemic heart disease and conduits for coronary artery surgery fulfil the reader's expectations on all aspects of these subjects. All classic complications related either to percutaneous transluminal coronary angiography or to ischemic disease itself are discussed with an adequate and updated literature review. The same comments apply to the section on vascular conduits where reference to survival, related complications and specific biologic properties of all types of conduits in current use are extensively discussed.

Two chapters devoted to alternative approaches for coronary bypass grafting are interesting but are redundant and provide limited coverage of the subject. The practice of ventricular fibrillation with intermittent aortic cross-clamping is discussed and presented as an actual alternative technique, which is surprising.

In general, this book offers a decent, honest overview and fulfils the need of any surgeon looking for a brief, concise, current review of coronary artery surgery.

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SURGICAL MANAGEMENT OF CUTANEOUS ULCERS AND PRESSURE SORES. Edited by Bok Y. Lee and Burton L. Herz. 263 pp. Illust. Chapman & Hall (International Thompson Publishing Asia), Singapore; Oxford University Press Canada, Toronto. 1998. Can\$152. ISBN 0-412-99421-6

The authors have written a useful text, targeting primarily practitioners involved in the care of patients with pressure sores and cutaneous ulcers. The multidisciplinary approach, which is the foundation of modern ulcer care, is clearly reflected in this text and in the choice of authors. The book is informative, and the chapters are written with clarity and expertise. The book offers state-of-the-art information with respect to the biologic, physiologic and medical treatment of ulcers. The text with respect to the various surgical techniques is not encyclopedic but is concise and offers an extensive bibliography for additional reference.

The first 4 chapters take the reader from the history to the basic biology of wound healing. The text in this section is well organized. The schematic drawings illustrate well the physiologic and biologic aspects of wound healing. The next chapter is dedicated almost entirely to topical therapy. The text is particularly useful on 2 levels: first, in providing the reader with clear guidelines for the management of various ulcers; second, in clarifying the vast array of commercially available topical products.

Two chapters follow that direct the reader to ulcers of arterial and venous disease. Again the text is concise and up to date and especially reflects the author's experience in the treatment of venous ulcers.

Noteworthy chapters include chapter 9 with its comprehensive review of pressure ulcers and risk assessment tables and chapter 14 in which the approach to the diabetic foot is complete and concise. Both chapters will certainly help the reconstructive surgeon in the decision-making process.

The chapter on the use of the carbon dioxide laser is enlightening, given the experience of the senior author. Chapters 15 to 18 give a good overview of the various surgical options in pressure ulcers and provide representative colour illustrations. It is evident though that it was not the authors' intent to provide a comprehensive description of the surgical techniques. However, they do provide a good bibliography for additional reference.

In summary, this book was written with the purpose of addressing the overall management of pressure sores and cutaneous ulcers. As well, the authors provide a concise, state-of-the-art review of the biologic aspects of wound healing. The practising physician involved in the care of patients with ulcers will find this book a good addition to the library.

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