BOOK REVIEWS

The Care of the Rheumatoid Hand. By ADRIAN E. FLATT. 1963. Pp. 222, 101 figs. Mosby, St. Louis; Kimpton, London. (86s.)

Many orthopaedic and plastic surgeons have devoted their professional lives to the surgery of the hand and through their work the modern principles of hand surgery have evolved. Based upon this sound foundation of what might be termed the "general surgery" of the hand, a number of specialties have evolved. Men like Paul Brand of Velore for example have spent so much of their time studying the surgical reconstruction of the hand in leprosy that advances have been made in this field which have quite changed our concepts of the treatment of this horrible disease. In reviewing Adrian Flatt's book, "The Care of the Rheumatoid Hand" I could do him no greater honour than to compare his work in this field to that of Brand. Both have concentrated their researches in one niche of hand surgery and, as is so often the case, we have seen more progress in a few years than was achieved in the same number of decades in the past.

Although now associate professor of Orthopaedic Surgery at Iowa, the author (lately senior registrar in Orthopaedic Surgery at the London Hospital), owes much to his early training with Vaughan Jackson whose interest in this field is well known. He has now honoured his teachers by producing a monograph on the Rheumatoid Hand second to none that I know.

The book is not long, but its 200 pages provide a thorough guide to surgical care. Opening with a chapter on functional anatomy dignified by the title "Kinesiology", the main body of the book is then divided into two parts, namely, soft tissue and joint disease, each dealing first with the general aspects of the disorder and secondly, in a separate section, with the details of the operative procedure advised. There are separate chapters on ulnar drift and the problem of the thumb and finally 14 pages on non-operative management and the principles and practice of splinting and physiotherapy. The text throughout is well illustrated with photographs, x rays, and drawings, and just enough operative detail is given to act as a guide to the surgeon without boring the interested physician.

This book is just what is needed to-day. It will serve three functions: a guide to the physician, giving him an up-to-date and reasonably concise account of what the surgeon has to offer; a work of reference for the established surgeon; and a stimulus to the younger man embarking on a surgical career and interested in the surgery of the hand.

The author has widely avoided "hobby horses" and I congratulate him on devoting only 1 per cent. of the text to prosthetic replacement of digital joints—a field in

which he is supreme, but one which is still largely experimental. We await with interest further information about this and an account of his long-term results.

I admire his honesty—"The correction of boutonnière deformity caused by trauma is difficult. The correction of boutonnière deformity caused by rheumatoid disease is virtually impossible", but I am not certain about his dogma—"Ulnar drift is considered by many to be the usual and inevitable result of rheumatoid disease of the hand. If I have described the aetiology correctly it might be more accurate to consider the deformity as the inevitable result of neglect". Perhaps he is right.

This is an excellent book. It may be trite to say that it should be read by all rheumatologists, but that also is probably true.

D. R. SWEETNAM.

Treating Rheumatism (Traiter les rhumatismes—comment choisir—comment prescrire). By the Doctors of the Centre Viggo Petersen under the Direction of S. DE SÈZE and M. LESQUESNE. 1963. Pp. 268. L'Expansion Scientifique Française, Paris. (NF 50.)

A book on the treatment of rheumatic diseases from another country is intriguing. It also gives us a glimpse of what is considered to be the content of rheumatology in that country. This book contains a chapter on paroxysmal headaches but none on systemic lupus or Reiter's syndrome and the space devoted to rheumatoid arthritis is less than that allotted to the chapters on metastatic cancer of the breast and prostate. These differences in emphasis apart, there is a great deal of common ground, and not the least interesting aspect of this book is the brief but lucid account of the main points of diagnosis which heads the chapters on each condition, as well as their classification within a disciplined system of types and stages in the French manner which the reader is to follow before embarking on the actual prescription of remedies. Indeed, the book as a whole shows the mark of firm editorial handling, despite the fact that there are thirty contributors. It is one book, not a collection of essays.

When one turns to the treatment advised for individual diseases, one is a little disappointed to find that the accent is mostly on medication and much less on management and regime. Patients with early rheumatoid arthritis do not inevitably progress to helpless deformity and it is of the utmost value to the patient to tell her so, but advice on this aspect of management is not given and the reader might assume from the text that Stage I of rheumatoid arthritis (treated with aspirin, anti-malarials, gold, and if severe, with corticosteroids) will inevitably progress through Stage II (aspirin, anti-malarials, and corticosteroids) to Stage III (aspirin, corticosteroids, and ana-