

BOOK REVIEWS

MANUAL OF BURNS. Edited by W. SCOTT MCDUGALL, C. LAWRENCE SLADE and BASIL A. PRUITT (Jr.). Pp. 165, with 214 colour illustrations. (Springer-Verlag: New York, Berlin, Heidelberg.) Price £34.50.

This volume in the series of Manuals of Surgical Specialties is very concise and provides an excellent guide to the overall management of the burned patient. The text is easy to read and is divided into 6 sections, covering the main problems with burned patients from the initial treatment to dealing with the secondary problems.

The colour illustrations are excellent and probably the best that have yet appeared in a volume dealing with burns. These illustrations often clarify problems which are difficult to explain in the text, and, particularly because of this, the book will not only prove valuable to doctors dealing with burns, but also to nurses and personnel from associated disciplines.

It is a book which merits a place in every burns unit and probably in every hospital which has to deal with burned patients occasionally.

W. H. REID

CLEFT CRAFT. THE EVOLUTION OF ITS SURGERY. II. BILATERAL AND RARE DEFORMITIES. Edited by RALPH D. MILLARD, Jr., M.D., F.A.C.S. Pp. 922. Illustrations: innumerable. (Boston: Little Brown and Company.) Price £61.75.

This second volume of Ralph Millard's epic work on the surgery of cleft lips and palates conforms in general outline to Cleft Craft I. As noted above, the illustrations are innumerable since there are no figure numbers but they are interposed in the text at exactly the place where they are required. They range from drawings and diagrams to clinical photographs and in the wide margins there are artists' portraits of most of the great figures who have been concerned in the evolution of the treatment of bilateral clefts during the past 100 years. In addition, there are hand-written remarks by Millard, sometimes agreeing, sometimes disagreeing with the work of other authors whom he is reporting.

The book is packed full of information, not only relating to Millard's own contributions to the primary and secondary treatment of the bilateral cleft, but also to the work of most other authors who have been concerned in this field. There are interesting vignettes of many of the previous authors and much of real historical value.

One cannot but commend the immense labour which went into the production of this volume. It will be a lasting memorial to Ralph Millard and will long be the major reference work in this field.

TOM GIBSON

OPHTHALMIC PLASTIC SURGERY FOR THE GENERAL OPHTHALMOLOGIST. By MURRAY A. MELTZER. Pp. 81 + 60 illustrations. (Baltimore: Williams & Wilkins Company.) Price \$20.75.

In this slim volume Dr Meltzer, ophthalmic surgeon in New York, describes the surgical anatomy and basic techniques of selected eyelid operations. He includes tarsorrhaphy, canthoplasty, blepharoplasty, a choice of methods for the correction of ptosis, entropion and ectropion, and a section on the treatment of eyelid tumours. The text is clearly illustrated by a large number of simple line drawings which make the steps easy to follow.

The operations for functional and age deformities of the eyelids are on the whole well chosen and well explained. The choice of reconstructive techniques suffers predictably from the lack of many good options available to a formally trained plastic surgeon, and from the broader view which this training provides. Anything outside the two inch hole in the ophthalmic surgical towel is treated as forbidden territory. Of four procedures offered for the repair of eyelid defects, one employs a "rotation flap" which barely extends beyond the orbital rim, and the other three all steal from the vertical height of the opposing tarsus. The methods illustrated for the treatment of cicatricial ectropion and cicatricial entropion would lead to inadequate correction if the causes were burn scar contracture and trachoma respectively.

Dr Meltzer's stated purpose is to encourage general ophthalmic surgeons to do their own plastic surgery. He makes it all sound simple. He warns his colleagues against becoming involved in "swinging large flaps from other parts of the face". He fails to acknowledge that a bolder plan, which they have not the experience to conceive or to execute, may often permit a more pleasing, and a better functional repair.

DAVID J. CROCKETT