

Book Reviews

Atlas of the Qatari Method for Treatment of Burns. By Abdulla A. Al-Baker. Pp. 89 with 414 colour illustrations. (Doha, Qatar: Ali Bin Ali Printing Press, 1986. Distributed by Orient Public Relations, PO Box 4244, Doha, Qatar). Price £30.

This book records the experiences of one surgeon in the care of the burned patient over a period of 8 years. He describes the Qatari Method—the bathing of patients in salt water baths (4.5 g common salt per litre) twice daily, the areas being kept moist with soaks of the same solution between baths. The treatment is continued through to healing whether this involves grafting or not. From the second or third day post-graft, both graft and donor site receive the same treatment.

The results, confirmed by a series of patients whose care is documented in detailed colour photographs, are impressive. The more superficial injuries heal rapidly, the deeper areas become receptive for grafting in 3 to 4 weeks and most of the donor sites heal at around 7 days.

The introduction presents the statistics. It has to be noted that around 75% of the patients had burns of less than 20% of body surface area involved, and over 50% had under 10% involvement, but all ages were treated, about one-third being children under the age of 6 years. It is unfortunate that no attempt was made to present burn depth, difficult though this can be. Out of 1900 cases there were only 130 grafting procedures, suggesting either that a large number were superficial or that the method allows healing of deeper burns which would not be expected to heal by other accepted methods.

Despite the author's claim that "few nurses and few hours of work are required", it would seem to this reviewer that the twice daily bathing and the care of the saline soaks at all times, must make considerable demands both on nursing time and on the skills and experience of staff. There is, however, no doubt that much of the credit for the success of the method must go to Dr Al-Baker. This book is evidence of his personal involvement in delivery of good burn care using a simple, effective routine. In addition, he is to be congratulated on the quality of the Atlas and the clear documentation of the material.

A. B. SUTHERLAND

The Early Development of Morphology and Patterns of the Face in the Human Embryo. *Advances in Anatomy, Embryology and Cell Biology*, Vol. 98. By Klaus Hinrichsen. Pp. VII + 79 with 82 figures. (Berlin, Heidelberg, New York, Tokyo: Springer-Verlag, 1985). Price DM 68 (soft cover).

In this monograph the author describes the scanning electron microscopic appearances of the developing faces of a series of human embryos. The SEM photographs are supplemented by appropriate sections and the findings discussed in relation to previous work. There is a useful list of references and an index. The study concentrates on the development of the nose and the primary and secondary palates with quick looks at the eye and ear.

The photographs are superb in their clarity and wealth of detail. They give the reader the feeling of flying over a changing landscape, and diving, for example, into the developing nasal cavities and landing to inspect and ponder on the degenerating ectodermal cells in their depths. The text keeps the non-embryologist firmly earthbound, being translated from the German into quaint and sometimes inaccurate English but it is well worth spending time on as, taken with the illustrations, it makes the early development of this difficult area beautifully clear. Some received ideas are shown to be false; the earliest signs of the "secondary" palate appear before those of the true "primary" palate and the nasal septum does not develop as a keel hanging from the roof of the nose but from before backwards as the palatal shelves fuse.

This study does not shed any new light on the mechanism of clefting although this malformation is discussed briefly. It illuminates the normal embryology of the area in a dramatic and beautiful way and, quite literally, lights up some hitherto dark corners. It can be recommended to anyone with an interest in facial development.

A. C. H. WATSON

Complications in Hand Surgery. By John A. Boswick. Pp. xiii + 401 with 386 figures and tables. (Philadelphia, London, Toronto, Mexico City, Rio de Janeiro, Sydney, Tokyo, Hong Kong: W. B. Saunders Co., 1986. Distributed by Holt-Saunders, Essex). Price £85.

This book presents the complications encountered in patients undergoing hand surgery. It is based on contributions from several authors and inevitably not all the chapters are of the same standard. It is presumably not written for experienced hand surgeons since they will have met most of the complications listed in the text. It will be most useful for the more junior surgeon as it identifies various pitfalls and warns of complications which may occur.

One criticism of the book is that many topics are dealt with rather superficially. Although it is stated that anatomy "needs to be known" and most of the topics start off with a review of the appropriate anatomy, this review is by no means detailed enough for the practising surgeon. For example there is a very inadequate description given of the origins of the flexor digitorum superficialis and the flexor digitorum profundus. Indeed it is quite difficult to understand the origins of these muscles from the description given. Again, the description of the course of the radial artery distal to the forearm is extremely vague.

It is of course a book written by experts and possibly they make certain operations seem very easy. Certainly not enough emphasis is laid on the difficulties of operating on the flexor tendons within zone 2 in the finger. On occasions operations are mentioned without identifying some of the complications, for example in describing the abductor digiti minimi transfer for opposition of the thumb, no mention is made of the considerable cosmetic defect which results on the ulnar side of the hand.

The problem of pain in an amputation stump is well recognised and it is well established that further amputation will not cure the pain unless there are specific reasons such as a tight amputation stump. In the chapter on complications following amputations of parts of the hand, this difficult problem is not really dealt with and it would have been a helpful inclusion in the chapter.