

**Diseases of the Salivary Glands.** By G. Seifert, A. Miehke, J. Haubrich and R. Chilla. Translated from German by P. M. Stell. Pp. xii + 393, with 630 illustrations and 39 tables. (Stuttgart, New York: Georg Thieme Verlag, 1986). Price DM298. ISBN 3 13 689101 5.

This is a genuine "state of the art" publication on diseases of the salivary glands, written in German and superbly translated into English by multilinguist Philip Stell, of Liverpool University. Thus, the reader does not suffer from the uncomfortable feeling often experienced when reading translated material. The senior author is a Professor of Pathology with a mammoth experience in salivary diseases, as shown by his extensive research and publications on the subject. His co-authors are three Professors of Ear, Nose and Throat surgery from other establishments in Germany.

As expected from a comprehensive work, all conditions affecting the salivary glands are dealt with in detail, including rarer conditions. The reader will find the chapters on sialadenosis and sialadenitis particularly enlightening. Those more academically minded will derive very useful information from the chapter on the histology of salivary glands, which includes some recent work by the senior author on immunocytochemistry. Benign and malignant tumours and their management, followed by well illustrated operative procedures, take up the second half of the book. For the sake of completeness an excellent chapter on facial palsy has been included.

Clinicians may feel there is a slight bias towards histopathology at the expense of clinical diagnosis, although limited clinical information is included in individual chapters. This book would have benefited greatly from a purely clinical chapter on the diagnosis of parotid swellings, often a difficult problem. The illustrations, some in colour, are excellent but, sadly, those in the chapter on anatomy are inadequate.

This book will be for many years one of the main references on diseases of the salivary glands. It should have a prominent place in all medical libraries and should be meticulously read by those involved in the management of salivary diseases.

M. N. SAAD

**Oculoplastic Surgery.** 2nd Edition. By Clinton D. McCord and Myron Tanenbaum. Pp. x + 502 with 285 figures. (New York: Raven Press, 1986). Price \$80.

The first edition, edited by McCord only, appeared in 1981 and was reviewed briefly in the *British Journal of Plastic Surgery* (1982, 35, 540). As I did not read the first edition, the book is new to me.

The seventeen contributors are mainly ophthalmic surgeons and the book is written for ophthalmic surgeons. Many of the eighteen chapters analyse clinical problems often seen by plastic surgeons in this country, and operations to correct them are described; most operative detail is given in excellent line drawings. There is a chapter on acute orbital trauma, an interesting chapter on Graves' ophthalmopathy and another on essential blepharospasm. The chapter on the evaluation and management of the ptosis patient is excellent. In a book from America it is not surprising to find a chapter devoted to blepharoplasty, cosmetic and functional.

On the negative side are Chapter 1 on skin and tissue

techniques (40 pages) and Chapter 9 on eyelid tumours (27 pages). The general outline of reconstructive techniques is, of necessity, inadequate to prepare an inexperienced surgeon for the demands of lid reconstruction and orbital surgery after tumour excision, while for the trained plastic surgeon there is room for criticism, for example the suturing shown in some of the operative photographic sequences is particularly bad. Full and partial thickness free skin grafts are advocated but only the electric dermatome is described (when, so often, small pieces of skin only are required). Skin cancers involving the lids demand a greater understanding of their pathology than is given. Moh's technique is outlined briefly, along with a poor reconstruction using "multiple full thickness skin grafts". In the chapter on evisceration, enucleation and exenteration (19 pages) the recommended lining for the orbit is the free partial thickness skin graft—many of us would settle for a quick healing flap. The anatomy chapter (33 pages) is good for revision, with nice line drawings, but its place in a surgical textbook can be questioned.

I agree with John Bennett who wrote that "this is a book which will interest trainees and specialists interested in the fascinating problems of oculoplastic surgery. It can be recommended." It is not a book from which the trainee plastic or trainee ophthalmic surgeon could learn unaided how to perform plastic surgical operations around the orbit.

A. F. WALLACE

**Practical Guide to Free Tissue Transfer.** By M. H. C. Webster and D. S. Soutar. Pp. ix + 125 with 104 line drawings. (London, Boston, Durban, Singapore, Sydney, Toronto, Wellington: Butterworths, 1986). Price £22.50. ISBN 0409 00243 X.

Surgical manuals share similarities with cookbooks. Some, like the *Larousse Gastronomique* (or Rob & Smith's *Operative Surgery*) set things out in such exhaustive detail that they have certainly earned their expensive, and weighty, place on every reference library shelf. This, however, is a "cookbook" of a different nature. With only 125 pages and even in hard cover, this slim volume would fit unobtrusively into the slimmest briefcase, and at £22.50 it is surprisingly affordable for a medical textbook.

The two Canniesburn authors draw on a wealth of personal experience in reconstructive surgery. In twenty chapters they describe twenty-five separate free flaps and their variants. Each chapter follows a standard form, reviewing the vascular basis, the technique of raising the flap, the donor defect and the advantages and disadvantages of the individual transfer. Every chapter, except for that on the pectoralis minor flap, is supported by references to published work.

Many of the line drawings are in two colours. The clear, uniform style of illustration and the use of red to highlight the vessels are particularly helpful. There are in fact more than 104 illustrations because many of the figures are composites of several drawings.

There is blank space on every page. This could be used by each owner to personalise the book, by adding drawings, new references and personal notes. These would be helpful because the book does not pretend to be a complete record of every tissue transfer that has been described. Many transfers are alluded to, rather than having specific headings devoted to them. For example, Chapter 20 on dorsalis pedis flaps shows illustrations of second toe and great toe "wraparound" transfers, and the text also mentions the first web sensory flap, but specific detail on