

though the text is directed primarily towards the physical and occupational therapists, it can be used as an adjunct book by chiropractic clinicians. This book deals exclusively with the diagnosis and management of common orthopaedic conditions seen in the elderly population.

Chapter 1 gives a brief overview of the musculoskeletal, nervous and cardiopulmonary systems of the elderly and discusses the aging process affecting these systems. It emphasizes the importance of recognizing that each person is an individual and that the effects of aging vary greatly amongst individuals.

Chapter 2 deals with the "how to's" of taking a proper history, performing a physical examination and devising appropriate exercise programs for these patients.

Chapters 3–16 address the different joints in the body and their common related problems. Each joint is discussed utilizing two chapters, one directed to reviewing the relevant anatomy and kinetics of the joint, and the second, at the treatment of common problems. Each section finishes with a brief summary that can be useful as a quick refresher of anatomy and a review of the aims in the rehabilitation of the condition being addressed. When applicable, the rehabilitation section contains a step by step approach. This approach has further been divided into phases that address three important issues: 1) an exercise program, 2) a mobility/ambulation program and 3) a program for activities of daily living. This format is quite useful in giving the reader an in-depth, easy to follow procedure for rehabilitation.

Although at times this book may be too detailed for chiropractors, it does offer some interesting educational information in areas not commonly treated by chiropractors (i.e. fractures of lower and upper extremities). For the clinician, there are some useful exercises and ideas that can be added to the management of some frequently seen conditions. For example, in chapter 4 Goldstein illustrates exercises for hip fracture and osteoarthritis of the hip patients. One frustrating point that this reviewer had was that although the author's utilization of diagrams to illustrate exercises was for the most part beneficial, on several occasions the reader was not given sufficient information to understand the mechanics of the stretch or how to instruct the patient.

Of minor note were a few anatomical errors relating to the branching of the brachial plexus and muscular innervation. However, these could just have been typo's or a proof-reader's oversight.

The chapters on the spine offer a review of the key issues of concern in the elderly, mainly, osteoporosis, compression fractures and cervical arthritis. However, the section on conservative therapy for low back pain left this reviewer a little frustrated. It is assumed that the comment "the only conservative measures that have scientific studies validating their effectiveness are back schools, exercises and epidural blocks" is directly related to conservative therapy in the elderly and not the general population. To give a complete assessment of the conservative treatment of low back pain, some mention of the role of spinal manipulative therapy should be addressed.

Overall, the text is well organized, illustrated well, easy to read, offers a good review of the anatomy and kinetics of each joint, and offers good rehabilitation programs. I think that this book can be a useful tool in many health practitioner's offices, and every clinician planning on treating patient's, especially those classified as geriatrics would gain by having this book in their library.

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**How to Break Bad News:
A Guide for Health Care Professionals**
Robert Buckman
University of Toronto Press, 1992
223 pages, \$17.00 Cdn.
ISBN 0-8020-6790-5

I was recently asked by a chiropractic intern, who was deeply concerned about a patient whose x-rays demonstrated metastasis, how best to approach the matter. I attempted to share with the intern my extremely limited experience in dealing with similar situations but it left me reflecting on the question, "how are we trained to deliver bad news?" For most of us it is usually by trial and error which typically means little trial and lots of error, and usually at the patient's expense. Robert Buckman, with Yvonne Kason, has recognized this deficiency in the training of health care professionals and have written an excellent text, "How to Break Bad News: A Guide for Health Care Professionals" to address this issue.

The book is divided into six chapters. In Chapter 1, the author introduces the reader to the objective of the book and discusses why the task of breaking bad news is worth doing well. Chapter 2 explores doctor and patient fears concerning bad news, social and personal attitudes towards death and the process of dying; a review of the current theories on the stages of the process of dying is conducted. Basic communication skills, including preparing to listen, questioning, effective listening and hearing, and methods of response are detailed in Chapter 3. The following chapter describes the six-step protocol for breaking bad news; the physical setting, determining what the patient knows and wants to know, effective delivery of information, responding to the patient's feelings and development of planning and follow through are discussed. Chapter 5 provides valuable insight into patient reactions and how best to deal with them. The final chapter addresses the effect of bad news on family.

Buckman and Kason draw on their considerable personal experience in educational clinical settings to describe actual case histories and patient-doctor dialogue that effectively illustrates patient-doctor responses in a variety of bad news situations. In Chapter 5 the reader is given a choice of closed or open questions, factual, direct or empathic responses in relation to a particular patient scenario. The pros and cons of each response are then discussed and in this fashion the reader acquires skill in discussing questions and addressing issues patients may have about terminal and life threatening conditions. At significant points in the text the authors provide ground rule statements or guidelines which must be adhered to, and practice points, time out sections where issues relevant to a particular circumstance are discussed. An Appendix provides a lengthy doctor-patient interview where all the concepts of skill and empathy developed in the text are employed and reinforced.

At first glance this book appears to be overwhelmingly medical in context and the subject matter dealing primarily with terminal illness; one may question the relevance to chiropractic practice. However, as Buckman relates "bad news is any news that drastically and negatively alters the patient's view of her or his future". Using this definition, most chiropractors regularly dispense bad news; from the patient with grade III spondylolisthesis requiring referral for surgery to the injured worker who may have been unable to return to his job.

This is an excellent book for chiropractic students who will, inevitably, encounter a situation early in their training where skill and compassion will be necessary when delivering a diagnosis or prognosis. It is also most appropriate for experienced practitioners who wish to improve their interpersonal skills in what is, for most professionals, a difficult subject area. As Buckman states, it is a job worth doing well, for "if we do it badly, the patient or family may never forgive us; if we do it well they will never forget us".

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to understand manner. Perhaps the only drawback to the textbook is its lack of references. At the end of every chapter the author has included a small list of references, which should more appropriately be referred to as "suggested reading material" or as "bibliography". The references provided do not correspond to any particular statement within the textbook. This unfortunately prevents the reader from verifying the information given throughout the textbook. Consequently, its lack of references makes it less suitable for postgraduate students.

Correlative Neuroanatomy is an excellent book for either the practicing chiropractor or the chiropractic team. Due to the complexities of neurology, one should constantly review it in order to refresh one's memory on this difficult subject. This textbook allows the reader to review the basic, yet important, aspects of neuroanatomy.

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Correlative Neuroanatomy, 21st ed.

Jack deGroot
a LANGE medical book
Appleton & Lange, 1991, 319 pages

Correlative Neuroanatomy by Jack deGroot is a textbook in neuroanatomy for students in health sciences. According to the author, it is intended for use in an initial course on the subject, as a reviewer or for reference in a variety of clinical courses, as well as in postgraduate studies.

This textbook contains 24 chapters which are relatively brief but nevertheless concise. It is divided into six sections. It begins with some basic principles of the nervous system, such as the cellular elements and how neurons respond to and transmit stimuli. The second section deals with the developmental aspect of the spinal cord with some examples of congenital disorders. Different types of imaging techniques for the spine and the spinal cord are also discussed. The third section covers the functional anatomy of the brain and its vascularization, all the cranial nerves and their pathways. The fourth section summarizes the functional integration of the entire nervous system. It discusses control of movement, the somatosensory system, the visual, the auditory and the reticular systems, the limbic system, the autonomic nervous system and higher cortical functions. The fifth section is entitled "Diagnostic Aids". It presents the different types of imaging of the brain used for diagnostic purposes and the commonly used electrodiagnostic tests.

The last section discusses the clinical cases presented throughout the textbook. Each case emphasizes the importance of understanding the relationship between the patient's signs and symptoms to the location and nature of the lesion. In addition, there are many cross-sectional pictures of the brain, photographs of diagnostic imaging, and diagrams to further illustrate the location and type of lesion related to each particular case. A thorough appendix complements the textbook with some of the basics of a neurologic examination and muscle testing, and some diagrams of the spinal nerves and plexuses. And finally, a brief question and answer section allows the reader to test his or her understanding of the material covered throughout the textbook.

This textbook provides a good overview of the nervous system and its related lesions. The overall organization and presentation of the textbook is well done. There are many tables, figures, diagrams, diagnostic images and black and white photographs throughout.

The author successfully presents a complex topic in a relatively easy

Practical Orthopedics, 3rd ed.

Lonnie R. Mercier
Mosby-Year Book, Inc., Toronto, 1991
454 pages, \$56.00
ISBN 0-8151-5865-3

Lonnie R. Mercier is a clinical instructor in orthopaedics who has realized that most textbooks on musculoskeletal disorders are oriented towards orthopaedic surgery at the expense of other forms of treatment. In this text, he summarizes the orthopaedic knowledge of musculoskeletal disorders that practitioners are confronted with in their daily practice.

The eighteen chapters in this book present an overview of musculoskeletal disorders with an emphasis on their clinical presentation and management. The opening chapters deal with the disorders affecting specific anatomical body parts, like the peripheral joints and the spine. The author first familiarizes the reader with the general anatomy of the area. Each disorder is then defined and described according to its clinical signs and symptoms. The short descriptions are informative and give a very good idea of the disorder's presentation. The reader is introduced to the basic treatments available for these conditions including medication (aspirin and other NSAID), bracing and physical therapy. Common surgical procedures, including joint replacement, are also briefly described. These chapters are very enlightening and very practical. The reader will also find an extensive bibliography at the end of each chapter.

I was, however, troubled by the fact that the text is not referenced. This leaves room for opinions which may not be substantiated, especially when discussing controversial issues like the etiology of mechanical back pain. This reader would have appreciated references supporting the opinion of the author. Furthermore, the author proposed an algorithm for the diagnosis and treatment of back pain but leaves one wondering how this was created.

The last chapters deal with other common musculoskeletal disorders capable of affecting a variety of areas. Hence the reader is introduced to the arthritides, the infections of bone and joints and common sport injuries. There is also a chapter dedicated to radiology as it relates to the musculoskeletal system. In the final chapter, the author reviews special