Book Reviews


Maurizio Ponz de Leon, a leading Italian scientist, has produced a fine monograph on large bowel cancer, with balanced analyses of the state of our current understanding. I particularly enjoyed his observation that ‘colorectal cancer cannot be considered one more metabolic disorder induced by energy imbalance...one more price that modern society pays for the many advantages [sic] (low need for physical activity, excess food and drink, and tobacco smoking) offered by progress and civilization.’

There are clear summaries of the causative factors, with thorough overviews of premalignant states. It is worth emphasising (as Ponz de Leon reminds us) that colorectal cancer offers unique opportunities for prophylaxis via removal of the premalignant polyp. In addition, he is especially valuable on the molecular genetic aspects, which may be unfamiliar to many practising surgeons, including not only the gene mechanisms in sporadic cancer, FAP and HNPCC, but also the less frequent inherited syndromes.

The survival figures quoted for rectal cancer are much poorer than have been obtained with TME instead of the old-fashioned standard protocolbred; indeed, at least one Italian centre has published its ‘before’ and ‘after’ figures, showing clear benefits. Surgeons need to be aware that no other mode of resection is acceptable, and that cases should be centralised in order to maximise patient benefit.

The chapter on chemoprevention is a balanced review of an extremely complex and murky area, and should be required reading for all who attempt to answer the anxious question of cancer patients, namely ‘What can I do?’ Another vexed area is the question of follow-up; Ponz de Leon argues convincingly what I have long suspected (but not yet had the courage to practise), which is that follow-up does not add any survival benefit.

All in all this is an accessible, rounded, up-to-date review.

G. J. Oettle


This comprehensive textbook on oesophageal surgery is aimed at thoracic and general surgeons with an interest in benign and malignant oesophageal conditions. It is multi-authored with contributors mainly from Canada and the USA. A companion textbook on thoracic surgery aimed at thoracic surgeons is not reviewed here.

The chapters on physiology, anatomy and testing are comprehensive. The addition of chapters on PET scanning and endoscopic ultrasound is timely. The section on rigid oesophagoscopy is long and in my opinion mainly of historical interest for general surgeons adept at using flexible endoscopes.

The sections on antireflux surgery are comprehensive and allow expert debate on issues regarding the indications and performance of laparoscopic anti-reflux surgery. Dr Csendes from Chile presents his data on combined operations for reflux, proposing somewhat liberal additions of HSV and/or duodenal switch operations for patients with columnar lined oesophagus. This approach is cautioned against by the Editor and I would recommend restraint before embarking on such radical surgery for a condition that can often be treated medically.

The paucity of controlled trials proving superiority of any of the various different fundoplication techniques is emphasised. David Watson, however, gives a summary of the evidence to date.

Motility disorders and other benign conditions are reasonably well covered. A major criticism involves the chapter on pharyngeal and cricopharyngeal disorders. Durandau covers the pathophysiology and indications for management of cricopharyngeal dysfunction and Zenker’s diverticulum. There is no mention however of other therapeutic options (flexible and rigid endoscopic options) apart from open surgery.

The management of oesophageal malignancy is extremely well covered by the who’s who of oesophageal surgery. I would highly recommend this book to any surgeon embarking on a career in oesophageal surgery and as a reference for those already practising.

Damon Bizos


This is the fifth edition of the Atlas of Human Anatomy. The fourth edition had three volumes, now reduced to two. The Atlas is well thought out and contains high-quality illustrations and photographs. The difference between this atlas and those I used as a medical student lies in the incorporation of colour anatomy photographs and two-dimensional imaging such as ultrasonography, MRI and CT scanning. There are fewer pictures of pro-sections in this atlas than in standard atlases. The layout is logical and easy to follow. The index is extensive. As with most atlases there is very little explanation, but for those refreshing their knowledge of anatomy it is a very easy atlas to use. For those learning anatomy it would be a good adjunct to dissection and formal anatomical texts.

Adult education should rely on the relevance of the content learned. I suspect that the inclusion of radiological images would help students at an early stage to interpret images better as they progress. I expect the next version will probably have 3-D reconstructions of MRI and CT scans that would further enhance the multidimensional aspect of this atlas.

Overall this is a high-quality atlas which has moved with the times. I would recommend it to both students and specialists in those disciplines requiring detailed human anatomy.

Damon B. Bizos


Ernst Stein’s Proktologie has long enjoyed favour in its German original; this is a newly translated English version of the fourth edition. In every respect it is a Springer spectacular — the book itself is a bibliophile’s delight, well-bound, beautifully printed on high-quality paper, while the pictures are all of the quality that the older among us were wont to speak of as ‘Hamilton-Bailey cases’. Through the references there is a useful entrée to the German and other continental literature, particularly valuable to the xenophobic Anglophone.

The author is a physician and a dermatologist, and this shows. The sections on conditions affecting the perianal skin are laconic, while advice on the treatment of rectal prolapse is confined to proposing a high-fibre diet! Although the