Atlas of Breast Surgery

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EXTENT P/H	133 p, hardback
PRICE/ISBN	£100.00 3540243518
PUBLISHER	Springer (Berlin), 2005
REVIEWER	Hugh Bishop
STAR RATING	****

This is a practical and convenient atlas of breast surgery. The authors are well recognised in their field, with a considerable reputation for oncoplastic breast surgery. Unlike many atlases of surgery, this is a slim and convenient volume to carry in a briefcase.

Does it fulfil its promise? The answer is yes: mostly. Let us deal first with the weaker parts. In the seven chapters in this atlas, one is devoted to diagnostic procedures. I cannot see the relevance of this chapter to a breast surgeon as the book is described as an atlas of breast surgery not a handbook for radiologists. Furthermore, the description of how breast abscesses are drained reflects a style of practice that is less often seen these days in the NHS. While some breast abscesses will always need incision and drainage, the majority can be managed by repeated ultrasound aspiration.

I so enjoyed the historical section and appreciated the chapter that contained a photograph of the late and much-lamented John Bostwick, who did so much to advance and teach oncoplastic techniques.

The basis of any surgical procedure is anatomy and the chapter dealing with this is pertinent and pithy even if the section on the lymphatic drainage of the breast has been transferred to the section on axillary surgery. There are good practical tips for the surgical trainee with numerous line drawings. In particular, there are excellent diagrams for the placing of incisions on the breast.

Some of the incisions for approaching gynaecomastia were new to me and, in addition, the authors also stress that excision of a gynaecomastia is often combined with liposuction. The photograph of a disastrous aesthetic outcome from poorly thought-out breast-conserving surgery, one of the few photographs in the book, is a stark reminder that poorly planned conservation surgery can be associated with a truly dreadful aesthetic result. The helpful photograph beneath shows the incisions needed to avoid an ugly divot in the breast. There are also useful hints on how to place incisions for the patient who needs a mastectomy but whose tumour is eccentrically placed in the breast.

The description of the incisions needed to achieve a reasonable aesthetic result in breast-conserving surgery is excellent and includes a good series of illustrations demonstrating the mammoplastic technique. The final chapter on plastic and reconstructive surgery is excellent, with clear

diagrams and lots of useful tips for both trainees and the more experienced.

This is an atlas and so one can forgive the fact that indications and contra-indications are omitted. The authors assume that the reader has enough knowledge to match the right operation to the right patient. Indeed, there is no mention of any complications. More importantly, I would have appreciated tips on how to avoid trouble or where the procedure is most at risk. The authors assume that the surgeon has an excellent anaesthetist who can perfuse a patient's brain and also the flap they have dissected without damage. In addition, some thoughts on the management of flaps postoperatively would have been useful.

What would I add to a future addition? Not much. I would remove the chapter on diagnostic procedures, substituting a chapter on marking up a patient pre-operatively and include line diagrams of how that often difficult process is achieved. Finally, trainees frequently find measuring a patient for an implant difficult. I would include a chapter on this in a future edition.

This is a useful book to have in theatre or out-patients and I recommend it.

Understanding Doctors' Performance

JIM COX, JENNIFER KING, ALLEN HUTCHINSON, PAULINE McAVOY

EXTENT P/H	184 p, paperback
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PUBLISHER	Radcliffe (Oxford), 2005
REVIEWER	Tony Giddings
STAR RATING	***

This book is a scholarly and concise review of the evidence so far. This shows a disturbing picture of committed professionals experiencing disproportionate stress and failure in a hostile workplace. The book is short, well written and authoritative. Many chapters are a model of the painstaking evaluation of evidence. Particularly useful are those on stress and depression (including some reference to organisational causes), the psychological factors linked to performance and the account of workload, sleep loss and shift work.

Perhaps not surprisingly in a first edition, it has not ventured into detailed consideration about the defects in training and organisation that have produced such a challenging workplace and poor record of caring for the vulnerable employee. There is evidence that working for the NHS carries a higher risk of personal stress and failure than other British institutions and that depression and suicide are uncomfortably common especially in women.

This is of particular concern at a time when the feminisation of the work-force proceeds apace and our dependence on women in medicine is growing and irreversible. It is perhaps