becomes slightly irritating if the book is used as a whole. There are a small number of errors (such as Chapter 2, Figure 1 that purports to show a normal carotid bifurcation, where there is a clear stenosis; in Chapter 3 there is a statement that all self-expanding carotid stents are made of Nitinol); however, in general, these are of minor importance.

I felt that Chapter 4, including radiation physics and radiation protection, is a good one and an area often overlooked. In the chapter on arterial access, The omission of the option of ultrasound guidance for accurate positioning was a mistake and the recommendation of routine selective angiography (Chapter 10) is unnecessary with modern imaging chains. Chapter 13 ('The Endovascular Treatment of Acute Ischaemic Stroke') is very interesting and well informed; however, its relevance to the basics of carotid artery stenting seemed less clear than if it had been directed towards the treatment of the neurological complications of carotid stenting.

Overall, I felt that this book is both well presented and highly useful for the target audience.

Musculoskeletal Outcomes Measures and Instruments, 2nd edn

MICHAEL SUK, BEATE P HANSON, DANIEL C NORVELL,
DAVID L HELFET

EXTENT P/H	814 pages, Paperback, 2 volumes
PRICE/ISBN	€129.95 9783131410627
PUBLISHER	Thieme (Stuttgart), 2009
REVIEWER	Matt Freudmann
STAR RATING	****

Outcome measures and scoring systems are an important part of musculoskeletal research and can play an important role in the development of new treatments. This AO handbook sets out to be a quick-reference guide, summarising hundreds of commonly used outcome instruments and providing information on how they are used, whether they are patient or clinician friendly, in what population they were tested and whether or not the methodology has been tested and validated. It then attempts to give each an overall score out of ten.

The book is aimed at anyone involved in musculoskeletal/orthopaedic research or audit and anyone who regularly comes into contact with outcomes measures within these fields. It is well laid out by anatomic region in two volumes and provides concise, easily read information, much of which is in table format. The overall scoring system it uses is of questionable validity but provides a handy 'at-a-glance' guide to the most useful systems.

Anyone searching for the outcomes measure that best suits their research will find that this book provides valuable assistance in arriving at a decision. However, once a decision has been made, precise detail of that measuring system will have to be sought elsewhere as the nature of the book means that full specifics of individual systems are not provided. The book will also prove useful to those wishing to find out quickly about an individual outcomes measure, perhaps in order to aid critical assessment of an academic journal article. They will find the text easy to use and understand.

Overall, this is a great reference guidebook that would sit well on a library shelf in any musculoskeletal or orthopaedic institution. This fact, along with its price, means that it will be purchased by very few individual clinicians.

Musculoskeletal Trauma Simplified

AMNA DIWAN, SHIVANI GUPTA, R MALCOLM SMITH,
ROBERT PERONE, CORNELIA WENOKOR

EXTENT P/H	262 pages, Paperback
PRICE/ISBN	£45.00 9781903378632
PUBLISHER	tfm (Shrewsbury), 2009
REVIEWER	David Warwick
STAR RATING	****

This is a unique book. There are so many orthopaedic books out there, some of which are comprehensive texts covering trauma in depth. For the orthopaedic trainee and consultant, those in-depth tomes are an essential to develop a thorough knowledge, to provide reference for small-print facts and to revise principles and techniques. This book is different. It is a case-based trauma book that is easy and actually rather fun to read. A clinical case, based on a history and a radiograph is presented, followed by a series of questions. The questions are then answered with enough detail to understand the important clinical points. There are frequent summary boxes as well.

The book can be read in just a few hours; the reader will then feel either re-assured that his or her trauma knowledge was not so bad after all, or will have been reminded of the most important facts and principles. Probably both.

Some of the surgical techniques espoused are a little dated, for example K-wire fixation of a thumb ulnar collateral bone avulsion or ulnar styloid fragment. Small fragment screws are a better modern option. Some of the references are far too old, for example, to previous editions of *Green's Operative Hand Surgery* book when there are newer editions or to papers from the 1980s and 1990s when there are better papers from the past few years.