

## RECENSIONI DI LIBRI



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Michael Trede  
*The art of surgery*  
 G. Thieme Verlag  
 Stuttgart - New York 1999  
 ISBN 3-13-116561-8

È esperienza comune di tutti i chirurghi quella di dover aggiungere uno schizzo grafico esplicativo nella descrizione di certi particolari interventi. In genere si tratta di iniziative sporadiche, non meraviglia però che un chirurgo come Trede, forte della tradizione britannica che fa capo addirittura al fondatore della Chirurgia inglese J. Hunter, abbia fatto di questo espediente un fatto di rilevante contenuto non solo chirurgico ma anche artistico. Hunter aveva ricostruito situazioni anatomiche, anatomopatologiche ed anatomochirurgiche in forma plastica di tale interesse da costituire attualmente il Museo Hunteriano ricostruito nel 1963 dopo gli effetti laceranti del bombardamento del 1941. Le descrizioni di Trede in forma grafica ed a colori testimoniano la ricerca razionale di un maestro della chirurgia verso soluzioni inedite e l'ansia di poterle documentare al meglio per le generazioni coeve e a venire. Il pregio aggiunto di questa opera è che ogni caso descritto è corredato da opportuna documentazione clinica.

Il volume trova il suo posto d'onore nella biblioteca di chirurghi giovani e di chirurghi maturi ed è un utile strumento per ragionare, meditare e ricordare.

Nicola Picardi

Virginio Forcheri  
*Le sofferenze anorettali*  
 Ed. Minerva medica  
 Torino 2000  
 ISBN 88-7711-346-4

#### Dalla prefazione dell'Autore

Il capitolo dei dolori anorettali costituiscono un argomento di proctologia di indiscusso interesse.

È un tema che presenta evidenti certezze per quanto riguarda l'eziopatogenesi e la terapia della sintomatologia dolorosa legata ad affezioni comuni e frequenti quali le emorroidi, le ragadi, le sepsi anali e perianali, le

neoplasie. Peraltro esso è caratterizzato da una spesso dubbia casualità quando il sospetto eziologico concerne la patologia utero-annessiale; quella prostatica, le discopatie, le radicoliti, le nevriti ed è talvolta problematico. Il riscontro eziopatogenetico di altre patologie algiche anorettali, mal definite nella loro essenza e nei loro confini condizionate da fattori casuali controversi e mal precisabili.

In questo volume si accenna brevemente alle varie proctologie di cui è nota l'eziopatogenesi e che conseguentemente rispondono ai noti razionali trattamenti.

Ci si sofferma poi maggiormente sull'analisi delle rare ma possibili correlazioni tra affezioni degli organi endopelvici ed algie anorettali.

Si tenta, infine, di chiarire per quanto possibile, la natura delle varie algie anorettali criptogenetiche con una razionale analisi delle varie terapie proposte per tali affezioni e con i relativi risultati quali emergono nelle casistiche riferite dalla letteratura sull'argomento.

Questo volume fornisce un contributo di notevole interesse per una razionale meditazione e per opportune riflessioni su patologie impegnative non solo sul piano organico, diagnostico e terapeutico ma anche sotto il profilo psicologico.

H. Dancygier, Ch. J. Lightdale  
*Endosonography in gastroenterology*  
 G. Thieme Verlag  
 Stuttgart - New York 1999  
 ISBN 3-13-116471-9

Since its clinical inception around 17 years ago, endoscopic ultrasonography (EUS) has developed into an established technique for obtaining additional diagnostic information to supplement the findings of endoscopy, conventional sonography, and computed tomography in specific applications. The performance of EUS is still restricted to experienced specialists; however, this book is intended not only for endosonographic specialists, but also to demonstrate the clinical significance of EUS to practicing internists, gastroenterologists, and surgeons.

The other goals of the book are to stimulate a critical discussion on EUS and to provide a reference work for those interested in learning the technique. The chapters are systematically structured, and numerous schematic

illustrations are presented for easier comprehension. Whenever possible, endosonographic findings are presented together with data of clinical studies to permit an assessment the clinical usefulness of EUS. This book has been written mainly by gastroenterologists and surgeons. In it there will be found different interpretations from different authors, in order to illustrate problematic areas and the ongoing debates in the field of endoscopic ultrasonography. Contributions from Europe and the United States are included to illustrate technical variations and broad clinical utility.

H. Dancygier, Offenbach  
C.J. Lightdale, New York

G. Loda  
*Atlas of Thumb and finger reconstruction*  
G. Thieme Verlag  
Stuttgart - New York 1999  
ISBN 3-13-101191-2

Each decade in reconstructive surgery implies that techniques as well as concepts are to be reviewed. This is why, now that I am writing the preface of my own book, I experience a strange mix of pride, joy, and perhaps apprehension-or maybe this is due to the emotion any author feels when his or her work is finished.

It has taken many years of careful work to condense my own experiences. It should be remembered that, as Sir John Denham (1615-1669) said, any book must be a guidance toward the following goals: wisdom, piety, joy, or use-fulness.

It is frequently said that hand surgery is both science and art. Learning, and the knowledge of scientific bases are the grounds for science, while art is rooted in the skill of combining procedures and adapting these procedures to each reconstructive case. Real art, however, is immortal. Science may vary but science also ages. Hence Seneca's statement that nothing would ever be discovered if we were satisfied with things that had already been discovered or done. Far from being satisfied, I have aimed only at showing the reconstructive possibilities that have been achieved in Argentina, pursuant to my own experience. This book is widely enriched with photos, drawings, and tables taken from personal archives-i.e., of patients who have been treated both privately as well as non-privately.

The text also includes strategies allowing specialists to become aware of a whole range of reconstructive possibilities; thus the "absolute truth concept", which does not exist in medicine, has been deemed to be unacceptable. Hence, thumb and finger reconstructive surgery becomes a genuine laboratory for the development of an exciting subject where the specialist's cleverness is enhanced. However, let us not forget that "creativity and inspi-

ration are the product of everyday work," as Baudelaire said.

"Without a sound knowledge of anatomy, there is no physiology, no surgery, no medicine" (Cruveilhier, 1834). Therefore, this book begins with anatomical bases and variants that are of assistance in practical reconstructive surgery. Precisely the search for such bases led me to study the fingertip innervation in fetuses, with the invaluable cooperation of distinguished colleagues pertaining to other disciplines. In turn, a good knowledge of innervation led me to classify the different sensitive skin qualities so that fingertip reconstructive procedures could be adapted to each relevant clinical case.

The modern concept of reconstructive surgery is aimed at minimizing sequelae originating in the donor area as well as increasing the so-called winning surgery. So, it will be easily understood that "the donor sites are, for microvascular surgeons, as fabric materials are for tailors" (Berish Strauch). We could also say, as R. Guy Pulvertaft aptly put it that "reconstructive surgery demands imagination and good judgment, the technical ability to achieve success, and integrity between patients and doctors." This formed the basis of my development of the vascular rein technique for thumb reconstruction, as discussed in Chapter 2.

Replantations and revascularizations pertaining to my personal archives are nonetheless, as always, the product of a full, well-trained surgical team. In this regard, may I express my gratitude for the invaluable, qualified help offered by my colleagues at the Hand Surgery Ward of "Hospital Francés" (The French Hospital) of Buenos Aires.

Thumb reconstruction-an extensive, complex subject-is analyzed in terms of the reconstructive possibilities of the hand involved.

In the chapter on the mutilated hand, by means of a comparison of the author's experience with that of distinguished specialists from different continents, it can be observed how the different social, economic, environmental, and even religious milieus exert a strong influence on the respective indications for severe bilateral amputation cases-with, however, similarly successful functional achievement coupled with patient satisfaction.

Technological advances and current research aimed at achieving a method likely to transmit sensitivity to protheses set the grounds for dynamic progress-progress likely to overtake what has been written in this book. So, as John Hunter said in 1962: "Never ask me what I have said or what I have written. But, if you ask me what my present opinion is...I will tell you". His words still ring true today. Now I will adopt words from the US philosopher Amos Bronson Alcott: "A good book is opened with expectations, and closed with profit." I hope this has been the case.

I wish to express my gratitude to my teachers, all of them pioneers in the field of hand surgery: Dr. Fernando Enriquez de Salamanca (Spain), Dr. Marc Iselin (France),

and Raoul Tubiana (France). My special thanks go to my Argentine teacher, Dr. Eduardo A. Zancolli. My sincere appreciation goes to distinguished surgeons, teachers, and friends: Robert Carroll (USA), Adrian Flatt (UK), Harold Kleinert (USA), William Littler (USA), Alfred Swanson (USA), and Kauko Vainio (Finland). I continue to enjoy the friendship of my most admired colleagues, Dr. François Iselin, Dr. Alain Gilbert, and

Dr. Michel Merle from France, and Dr. Giorgio Brunelli from Italy. I am most indebted to them all.

I have just finished writing these concepts, and, at a glance, I realize I am surrounded by original manuscript chapters, photocopied chapters, photos of patients, photos of my children, Patricia and Guillermo-both are studying Medicine ... I meditate in silence. Hopefully, my reader will understand this silence.

**Guillermo Loda**