
The author is an orthopaedic surgeon from Wayne State University in Detroit. This is obviously a labour of love for the author, who has taken the opportunity to commit to text his philosophy and experiences in treating shoulder problems, not just in sport. The book is divided into three parts: analysis and diagnosis, injuries, and rehabilitation. There are ample black and white x rays and other illustrations, including pictures taken at arthroscopy.

The only reference used from later than 1990 is by the author himself, and many references are much older. As a result, much that is written has been superseded, and some of the biomechanics incorrect. Dr Cuillo has strong opinions on how history and examination should be undertaken and this comes across well. However, the concepts and explanations of the pathomechanics of shoulder injuries do not fit well with the current literature. Much of the clinical material is anecdotal, unrefereced or without any quoted supporting evidence, and is not up to date. Reading the book, I gained the impression that a SLAP lesion is the most common injury the author encounters, and that the classic glenoid labral tear found in 80–90% of acute dislocators is a rare event. There is some confusion in the understanding of the terms of shoulder laxity and instability. Insufficient attention is paid to rehabilitation.

The book has flaws. I am afraid that there are too many idiosyncrasies and faults to recommend this book.

**ROGER HACKNEY**


This well produced text is very much oriented to general practitioners who would wish to undertake corticosteroid injections for the many soft tissue injuries presenting within the surgery. The text is very good at revisiting the basic principles of, “why”, “where”, and “how often” steroids can be injected into soft tissue lesions.

This book is well laid out, with excellent photographs and anatomical line drawings showing the route of administration, and would be a very useful book for immediate reference when presented with a soft tissue injury that might respond to corticosteroid injection.

However, there is no real sporting emphasis in this text, there being no mention of the need to inform governing bodies of the administration of any corticosteroid to any athletes, nor of the banned status of a number of local anaesthetics mentioned in the text.

There is a good description of many of the soft tissue shoulder problems that present in general practice, and excellent coverage of wrist, hand, and elbow soft tissue disorders. Unfortunately, there is very little on the knee and, in the sporting context, there is no mention of the many entheseopathies of the pelvic rim and patellar region that could respond to local corticosteroid injections.

This is an excellent textbook, well priced at £19.95, for those wishing to undertake corticosteroid administration for soft tissues, but is not really suitable for those experienced practitioners who are already caring for many soft tissue injuries presenting in athletes.

**GERRY HAGGERTY**
Joint and soft tissue injection

Gerry Haggerty

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