Many textbooks either report research, without any practical application, or are too technical for the average reader for whom they were written, or too biased, or too elementary. In general, this book avoids most of these faults, and fills an important need by searching the published literature thoroughly, and abstracting from many facts that would take any reader a long time and access to a good library to accumulate for himself. The book is divided into three parts, and there is an appendix section as well. Part 1 states the problem of injuries, then deals briefly and in simple terms with the anatomy and essential physiology of running and exercise. Part 2 is devoted to a description of the many congenital and acquired orthopaedic conditions, both severe and mild, that might pre-dispose to muscle imbalance, defects of bones and joints, all of which can contribute to injury and incapacity, in sport and in everyday life. Part 3 gives detailed and most useful schedules of remedial and training exercise, continued into the appendices.

In general, I found the book helpful and interesting, especially those long sections devoted to the place from which so many injuries arise — the feet. The author has drawn heavily upon published work of podiatrists as well as orthopaedic surgeons and sports medicine specialists such as our own Hon. Secretary, Peter Sperryn. In reading the book, however, I had some feelings of schizophrenia, unable to reconcile the extremely simple descriptions written for the layman with no medical knowledge with the full and technical details of much that was very controversial. A simple primer seemed to be merged with a Chairman’s summing up of a highly technical controversy, all within one cover.

There were several minor points that were overlooked either in the original manuscript or in proof, starting with the Dedication. Dr. W. E. Tucker, Orthopaedic Physician, is primarily an Orthopaedic Surgeon, and I am sure that T. McClurg, Physiotherapist, would prefer his surname of Anderson to be inserted. There was no need to give a lengthy quotation from Hugh Burry’s paper to the R.S.M. on pages 47 and 68. On pages 106 and 109, spondylolisthesis was described as ‘slipped disc’! I wondered what evidence there was to support the view on page 111 that ‘accumulation of waste products in the spinal canal lowers the vitality of spinal nerve centres’. The anatomist who did so much to describe the functional anatomy of the hand and foot was Sir Arthur (not Sir Robert) Keith (page 166), and a naif description of foot musculature was followed by an erudite discussion of the role of the foot muscles in a highly controversial fashion (page 160 onwards). I am sure that both professions will take exception to the statement on pages 174 and 235 that Chiropodists are now known as Podiatrists, ignoring the latter’s extra special training. On page 196 Subotnick is mentioned in the text, as Sabotnick (but correct in the references). Apart from these relatively minor errors there are many good points that far outweigh the faults.

The reader is warned that sports of some types can produce asymmetrical muscle development; spastic weak (or flat) foot is common in many young athletes, perhaps due to spasm from overuse of the lateral tibial and fibular muscles; the likely relationship, propounded by Hiss in 1937 and L. Jones in 1947, between foot problems and chronic lower back pain; an interesting discussion on psychosomatic problems in the athlete; but only an inconclusive discussion on shin splints. There is a useful table of joint ranges, drawn from many sources and descriptions of tests for postural defects and other aspects of functional anatomy. Slocum’s view that pre-competition examination by the coach (also by the doctor if possible) should include posture and joint flexibility as well as cardio-respiratory screening is emphasized, and an important point is stated in ‘Exercise for an hour a day coupled with faulty stance during the remaining 15 working hours will not correct postural faults’. (Yet how many patients of physiotherapy departments do just this?) Finally the author makes an appeal, much in agreement with B.A.S.M.’s views, that the study of the injuries athletes sustain must be multi-disciplinary and involve doctors, biomechanics, physiologists, coaches, physical educationists, therapists, officials who make the rules of sports, and manufacturers of shoes and other equipment.

The illustrations in this paperback are good and clear line drawings, the index and glossary are adequate, and the extensive references in the English language valuable to the clinician or sports scientist starting a special topic of investigation. I would recommend this book to doctors, therapists, and coaches, all of whom will find many sections useful and at the right level.

H. E. Robson