BOOK REVIEW

Title: TEXTBOOK OF ORTHOPAEDIC MEDICINE — VOL. II — Treatment by manipulation and injection

Authors: J. Cyriax and Gillean Russell.
Price: £12.50  480 pages  161 half tone photographs

When this book was first published in 1944, its aim was to teach the techniques of manipulation, in a safe and effective way, to physiotherapists and to doctors. It was based upon the scheme the original author used in the Physical Medicine Department of St. Thomas’ Hospital, and had already been used effectively for many years. The 10th edition, published this year, maintains the detailed instructions for manipulations of the earlier editions, but also gives details of intra-articular and other soft-tissue topical injections that are the field of the physician rather than the physiotherapist, a development within the last few editions. This is the work of an enthusiast, based upon long and successful procedures which we know give excellent results in his hands, and in the hands of those whom he has trained himself, such as Miss Russell, his co-author. The book is written, however, to show clearly the techniques used so that others can incorporate them in their own practice armamentarium, whether in orthopaedic or general medical practice, or hospital and private physiotherapy practice. Much of the authors’ experience has been in the treatment of the injured sportsman, and illustrates that the majority of sports injuries can be treated with the minimum of equipment, a great advantage for those accompanying teams overseas or on tour. The most important item of equipment is the hands of the therapist, combined with the knowledge to control them properly. All that is needed besides these are a few syringes, local anaesthetic and a cortisone preparation.

The earlier chapters give a review of the various techniques and underlying philosophies of the osteopathic, chiropractic and bone-setters’ methods, together with the massage techniques used by physiotherapists, with special emphasis on the use and contra-indications for deep frictions and manipulation based upon a sound knowledge of anatomy, physiology and pathology. The role of topical steroid injection is discussed critically, together with the indications and contra-indications, though many doctors in sports medicine will disagree strongly with Achilles tendon injections, despite warnings that rest is necessary for a week following this procedure. The indications for injection include lesions of the supraspinatus, infraspinatus and subscapularis tendons; precise treatment after precise diagnosis, and avoidance of blanket terms such as “rotator cuff lesions”. Injection into the anterior cruciate ligament of the knee will not only be much more difficult, but could also be hazardous despite a week’s rest. Equally risks could be run with injections into partially-ruptured tendons, especially in the lower limb.

It is possible that some of the descriptions of physiotherapy techniques in the earlier editions might have been revised and updated. Is short-wave diathermy the ONLY way a physiotherapist can treat sepsis? There is no discussion of the uses of such techniques as interferential therapy, or of ultrasound (except when combined with steroids in steroid phonophoresis), not even to condemn such procedures.

Part II of the book is devoted to photographs of the manipulative, deep friction and injection techniques used, together with a description of the method, position of the patient and the therapist, diagnosis and expected results. “Fibrositis” is accepted as a clinical entity, despite the lack of pathological evidence of its existence (though in general practice we certainly see plenty!) The first few plates show the procedures used for the cervical spine, but the result of cervical traction of around 100 kg resulting in X-Ray evidence of a distance increase from C4 to C8 of “7-8 CENTIMETRES during traction” seems a result that Jack Ketch or Pierrepoint could well have envied! 7 MILLIMETRES we could well accept. The various types of cervical collars are discussed, with their indications. There are nine techniques described for the treatment of the elbow epicondylitis, both medial (“golfer’s”) and lateral (“Tennis elbow”). Thirteen procedures are given in detail for the treatment of lumbar intervertebral disc lesions, the bugbear of general, orthopaedic and physiotherapeutic practice, starting with simple direct pressure, and becoming more forceful as the condition resists treatment, and as the therapist becomes more experienced. Sclerosant injection therapy to stabilise recurrent disc lesions and other vertebral joints is described by Dr. R. Barbor, Dr. Cyriax’ colleague of long standing. The traction table for spinal traction is illustrated by clear drawings. Posterior ramus nerve blocks are also shown, and the indications and methods of epidural anaesthesia are described. The various manipulations for lesions of the hip, knee and ankle will all be of use to the therapist treating sports injuries.

Provided that care is taken with some of the injections recommended, and perhaps avoided altogether in sportsmen liable to resume training before it is advisable, I would regard this as a valuable book for all who practice sports medicine, and also of value to those who, like the reviewer, are more concerned with the day-to-day treatment of the non-sporting public. At the price, good value, and unlikely to become out of date for a long time.

H. E. Robson