Overall, Crossman has provided one of the most complete and credible injury texts available, and a valuable resource for all sports medicine practitioners. This book will become a working resource in my practice and hopefully with my colleagues.

Coping with sports injuries: psychological strategies for rehabilitation

This is the first injury specific text that, I have felt, brings together, and acknowledges, all parties involved in rehabilitation (medical staff to athlete to support networks). My medical colleagues (doctors, physiotherapists, massage therapists, etc) should read this book and recognise that, if psychological recovery from injury is not included, they run the risk of an incomplete, possibly extended, rehabilitation programme for their athletes.

One of the main attractions of this book is that it teaches others how to make assessments and implement programmes without necessarily requiring a psychologist for the entire rehabilitation programme. I enjoyed the journey from injury, assessment, rehabilitation, recovery, and return to sport. However, I feel that the acknowledgement of the support networks, although important, became a little confusing at times, and possibly would have been best placed within chapter 6 on creating an environment conducive to recovery.

Chapter 2 was by far the most valuable. The explanations offered for various assessment procedures take away some of the uncertainty often held in psychological assessments, and led nicely into subsequent chapters acknowledging the roles of physicians and physiotherapists in the rehabilitation process. Periodising the mental rehabilitation programme in conjunction with the rest of the medical areas was refreshing and clear, and once again validated the psychological aspects of recovery.

A thorough explanation, and demystifying, of relaxation strategies was important in chapter 7, but some of the most practical information was provided by Andersen on the effect of injury on the athlete. The referred model of injury explained in this chapter was simple, practical, and something all practitioners could work through and understand in relation to athletes that they are currently treating.

In summary, I found the inclusion of other practitioners, the establishment of the need for a team approach, and cross referring very appealing and helpful in educating colleagues and re-educating myself. This is the first injury rehabilitation book that I feel hits every consideration necessary for everyone involved in the process, from the athlete to those involved beyond recovery.

At times the language moved quickly from technical to practical viewpoints, and became quite verbose in overexplaining what should have been quite simple concepts. It did create moments of confusion, but overall I felt it was logically presented and considered the target audience.

Peripheral nerve injuries in the athlete
Edited by J H Fienberg, N I Spielholz. Published by Human Kinetics, 2003, pp 280, £38.00, hardcover. ISBN 0736044906

Increasingly it has been recognised that neurological problems, such as nerve entrapment syndromes, contribute to a variety of exercise related problems in athletes. This increased awareness is reflected by the large number of books as well as review articles currently available on the topic of nerve injuries. This new book by Fienberg and Spielholz is yet another addition to this area. The book reads as being written primarily by rehabilitation physicians or physiatrists rather than by neurologists or sports physicians. As such it is very strong in the rehabilitation area (which comprises almost half the book) as well as the understanding of radiculopathies and other spinal problems. The rehabilitation of nerve injuries is an area that is relevant not just to sports medicine but the wider church of physiotherapy, athletic trainers, and other providers of rehabilitation for athletes.

The book is weakest in the clinical perspective of the myriad of peripheral nerve entrapments, where the majority are presented as theoretical constructs rather than giving the reader the impression that the authors of the various sections have actually seen the conditions first hand. One can contrast their approach to that of Pecina et al (Tunnel syndromes, 3rd edition, CRC Press, Boca Raton, FL, 2001) where the authors not only provide an understanding of the anatomical and aetiological basis of the various syndromes but also the clinical perspective, clearly bringing their own thoughts to the interpretation of the published literature.

The other annoying aspect of the book by Fienberg and Spielholz is the dated references that are cited. There are few references from the last five years and surprisingly few citations from the non-US literature. The references that are cited are not classified by any evidence based approach. If readers are looking for a more thorough review of the literature on nerve entrapment syndromes, then they would do well to find the book Focal peripheral neuropathies by John Stewart 3rd edition, Lippincott Williams & Wilkins, Philadelphia, PA, 2000, which is the standard reference for neurologists in this field.

In summary, this is a very frustrating book. Its weaknesses are in the syndromes it sets out to define. Fortunately better references and better references exist in this regard. Its strength is in the rehabilitation of these nerve injuries. This is the only book that I have seen in the sports neurology literature that discusses this topic in any depth. I cannot help thinking that the authors should have written the entire book on the subject of nerve injury rehabilitation, in which case it would have been a classic.

Textbook of adult emergency medicine, 2nd edition
Edited by P Cameron et al. Published by Churchill Livingstone, 2004, pp 952, £45.99, softcover. ISBN 0443072892

Interested in emergency medicine? Then this is the book for you. This book summarises the literature in this field concisely and provides both an Australian and UK perspective on how these various issues may be dealt with. Apart from trauma, the book details a systematic approach to organ system problems and furthermore encompasses medicolegal issues, environmental problems, E.D systems, and research. The book is clear and concise and the brief summaries of the issues in each chapter are pithy.

There is absolutely nothing in this book related to sports medicine in the purist sense. There is a section on orthopaedic emergencies (mainly fractures and dislocations) and a section on rheumatological emergencies (mainly acute monoarthritis and polyarthritis), but that is as close as it gets to sports medicine. This would seem somewhat of an oversight, as I am assured that one or two athletes do attend emergency departments with acute problems. It is interesting to appreciate the different insight that an ED physician brings to clinical sports injuries. In the section on acute knee injuries for example, much is made of the use of imaging modalities, especially magnetic resonance scanning, rather than the details of clinical diagnosis. There is impressively little on first aid of such injuries such as “RICE” treatment.

J Louder

Rating
- Presentation: 18/20
- Comprehensiveness: 19/20
- Readability: 17/20
- Relevance: 18/20
- Evidence basis: 15/20
- Total: 87/100

P McCrory

Rating
- Presentation: 10/20
- Comprehensiveness: 5/20
- Readability: 8/20
- Relevance: 8/20
- Evidence basis: 0/20
- Total: 31/100

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but rather the assumption that most injuries require operative intervention. This different approach highlights the role that sports physicians could play in this environment by triaging the huge number of sporting injuries that can be managed conservatively.

But I am being picky. This book is written for ED specialists who spend their lives contemplating such emergencies. As such it is a triumph.

It is not a book for sports physicians.

**Rating**

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P McCrory

**Surgical techniques in orthopaedics and sports traumatology**

Edited by J Duparc et al. Published by Elsevier (Harcourt Publishers), April 2003, £396.00 paperback.

This impressive set of volumes is enough to make any orthopaedic surgeon salivate. Try to imagine an eight volume set of textbooks, written by 59 well respected European orthopaedists and covering all aspects of orthopaedic surgical techniques, and this is what we have here.

The collection is published under the auspices of the European Federation of National Association of Orthopaedics and Traumatology and is an impressive attempt to standardise the training and knowledge basis of European orthopaedists.

For sports physicians, this series of textbooks are way too technical in nature and difficult to justify the cost of almost £400. However, as we move toward a more standardised approach to aspects of medical practice, the challenge is now before us: we as sports doctors need to emulate the orthopaedic surgeons and develop a standard European (and ultimately global) core curriculum as the basic minimum qualification for sports physicians.

This congress will provide the world’s leading sports medicine experts with an opportunity to present their work to an international audience made up of physicians, therapists, scientists, and coaches. The congress will present scientific information on sports injury epidemiology, risk factors, injury mechanics and injury prevention methods with a multidisciplinary perspective. Panel discussions will conclude symposia in key areas providing recommendations to address the prevention issue in relation to particular injuries and sports.

Further details: Oslo Sports Trauma Research Centre and Department of Sports Medicine, University of Sport and Physical Education, Sognsveien 220, 0806 Oslo, Norway. Email: 2005congress@nih.no; website: www.ostrc.no

**UK Radiological Congress 2005 (UKRC 2005)**

6–8 June 2005, Manchester, UK

The UK Radiological Congress (UKRC) meeting will encompass the medical, scientific, educational, and management issues that are of interest and relevance to all those involved in the diverse fields of radiological sciences and oncology.

The UKRC provides a forum in which to bring together clinicians, scientists, radiographers, technicians, and other professionals to present and discuss the latest developments and challenges in diagnostic imaging, radiotherapy, and allied radiological sciences. Key subjects to be covered include: diagnostic radiology; ultrasound; nuclear medicine; interventional radiology; veterinary radiology; emerging technologies; image analysis; computer applications; PACS; radiobiology; radiological physics; management & audit; computed tomography; magnetic resonance; equipment development.

Expected attendance (conference and exhibition): 4000

Further details: UKRC 2005 Organisers, PO Box 2895, London W1A 5RS, UK; Website: www.ukrc.org.uk; Fax: +44 (0)20 7307 1414; Conference tel: +44 (0)20 7307 1410, Email: conference@ukrc.org.uk; Exhibition tel: +44 (0)20 7307 1420, Email: exhibition@ukrc.org.uk

**CALENDAR OF EVENTS**

**Osteosynthese International 2005**

15–17 September 2005, Curiohaus, Hamburg Congress-Chairman: Johannes M. Rueger, M.D., Professor and Chair

Topics:

- Innovations in intramedullary osteosynthesis
- New frontiers in osteoporosis and fracture treatment
- Current trauma research
- Special topic: Recent development in pelvic and acetabular fractures

Abstract submission deadline: 31 March 2005

Further details: INTERCONGRESS GmbH, Martin Berndt, Düsseldorfer Str. 101, 40545 Düsseldorf-Germany. Tel: +49 211 585897-80; fax: +49 211 585897-99; email: martin.berndt@intercongress.de; website: www. osteoinst2005.de

**4th European Sports Medicine Congress**

13–15 October 2005, Lemesos, Cyprus

Further details: email: pyrgos.com@cytanet.com.cy

**BASEM Conference 2005**

10–12 November 2005, Edinburgh, Scotland

Further details: email: BASEMinfo@aol.com; website: www.basem.co.uk

**BASEM Conference 2006**

5–7 October 2006, Oxford, UK

Further details: email: BASEMinfo@aol.com; website: www.basem.co.uk

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Expression of concern about content of which Dr Paul McCrory is a single author

This paper is authored by Dr Paul McCrory. During 2021 and 2022 there was an investigation by BJSM and BMJ which found that some of his work was the product of publication misconduct. Such misconduct includes plagiarism, duplicate publication, misquotation and misrepresentation in publications in respect of which he was listed as the sole author. We are placing a notice to readers on all content in relation to which he is identified as the sole author to alert them to the conclusions of our investigation.

REFERENCE