

BOOK REVIEWS

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PHYSICAL THERAPY MANAGEMENT OF PATIENTS WITH SPINAL PAIN: AN EVIDENCE-BASED APPROACH

Stetts DM, Carpenter JG. Thorofare, NJ: SLACK Incorporated, 2014, 656 pp, hardcover, illus, \$92.95.

This comprehensive textbook addresses evaluation and treatment of spinal pain as evidence-based physical therapy (EBPT). The table of contents for the 6 chapters, each with subchapters, clearly lists descriptive titles. The index is also well organized, allowing efficient perusing of the book for specific information. There are 2 different case studies for each spinal area. Evaluation and treatment techniques are available as online videos.

Chapter 1, Evidence-Based Practice in Physical Therapy, is a well-constructed overview of the concepts of evidence-based medicine and how they relate to physical therapy practice. It covers the topic well, including less than randomized controlled trial-level evidence that informs physical therapy practice. It is clear the authors put much energy into making EBPT spinal evaluation and treatment accessible to their readers. Chapter 2, Subjective Examination: A Patient's History, presents excellent ideas to efficiently gain information to guide the physical therapist toward evidence-based choices. This is one of the best chapters on subjective evaluation for physical therapy that this reviewer has recently encountered. It focuses on information seeking in an organized manner, so that answering specific questions leads the evaluator toward appropriate

evidence-based examination procedures. The approach emphasizes an economy of questioning that leads to new information. Chapter 3, Components of the Basic Neuromusculoskeletal Examination: Tests and Measures, addresses global aspects of orthopaedic spine evaluation. Reliability and validity of tests are presented. Tests are presented in order of use, with the understanding that no patient will require all tests. The authors guide the reader in applying the decisions necessary to select the appropriate tests in a way very helpful to students and entry-level practitioners. Chapters 4, 5, and 6 are Evidence-Based Physical Therapy Practice for Low Back Pain, Thoracic Spinal Pain, and Neck Pain, respectively. Each chapter presents regional diagnosis, evaluation, diagnostic classifications, and prognosis. They present the available evidence for clinical prediction rules (CPRs). The authors have been meticulous in not promoting or dismissing any of the standard approaches or CPRs, but, rather, present the evidence as currently available. Case studies follow as appendices. These demonstrate evaluation, diagnosis, clinical reasoning leading to treatment decisions and prognosis, and all using an evidence-based approach. Chapters 3 through 6 are well illustrated, with online videos further demonstrating tests and techniques.

The book is comprehensive within the scope of orthopaedic practice. It is also well organized and well written, making it an excellent entry-level text, with adequate information for new graduates to enjoy the book well into their careers. The case studies demonstrate the application of the chapters, giving the reader a sense of how a simple versus complex patient might be approached. The video clips are neatly filmed and straightforward. This is an excellent text to have on hand in a clinic or department. It is also an excellent text to quickly review evidence-based regional tests, either to justify or to enhance practice, or to justify economy of effort by omitting tests that have a poor evidence

basis. This reviewer feels comfortable with EBPT and still found the book to be valuable, especially due to its excellent organization and ease of finding information.

The drawback of a book like this is that, as more evidence appears, rapidly and in greater volume, the current applicability of the text is at risk. Frequent new editions will be needed to accommodate the expansion of information. The text does not address any specific approach to practice directly, but, rather, presents regional techniques based on evidence, leaving advanced practice to other venues. Regardless, this is an excellent text that takes evidence-based practice and sculpts it into a clinical reality. The price is reasonable, making it an easy addition to a personal library.

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TRAUMATOLOGY FOR THE PHYSICAL THERAPIST

Krischak G. New York, NY: Thieme Medical Publishers, Inc, 2013, 240 pp, paperback, illus, \$64.99.

The main goal of this book is to describe a wide range of trauma in terms of clinical signs and symptoms, and clinical assessments utilizing physical examination and diagnostic imaging. Part 1 includes wound healing and treatment, surgical infection, soft tissue trauma, fractures, vascular problems, and joint injury. Part 2 explains axial skeleton injuries, abdominal trauma, and specific injuries of the upper and lower quadrant. Part 3 describes the assessment of multiple trauma and first aid.

Generally, each of the 18 chapters presents how the trauma occurs, the classification system used to describe the trauma, how a diagnosis is reached, and how the treatment is administered. At the end of each topic is a summary. In the back of the book is a glossary.

The author is a gifted writer. The material is clearly written without being verbose. Case studies are used to add further clarification of material presented. The illustrations are excellent and add further clarity. The material is effectively presented. It is obvious that Dr Krischak's clinical experiences as department head of Orthopedics and Traumatology at Federsee Clinic in Bad Buchau, Germany have provided the necessary experience to write this book.

The book should be very informative for the nurse, athletic trainer, or therapist working in a hospital, rehabilitation, or outpatient environment. When appropriate, the clinician could use the book to explain to a patient how and why a procedure was performed. For example, chapter 9, Complications of Fractures and Fracture Healing, describes the surgical care of complex fractures. A clinician could use the descriptions and illustrations to explain the procedure to the patient.

As a physical therapist treating patients with orthopaedic injuries, I found the chapter titled Conservative and Surgical Fracture Therapy very informative. The author explains osteosynthesis, screw synthesis, and plate synthesis in a concise, clear, and interesting style.

Chapter 10, Joint Injuries, could be expanded to discuss labral injuries of the shoulder and hip. Chapter 11, Skull Injuries, presents the Glasgow Coma Scale, a useful clinical tool. This chapter could be expanded to include an explanation of the mechanics and identification and examination of concussion. Trainers and therapists frequently see this type of injury and would find the information very useful.

Chapter 13, Thoracic Injuries, covers trauma to the thoracic wall, pleura, and thoracic organs. The chapter immediately following presents blunt and sharp abdominal trauma, and specific abdominal and urogenital injuries. Personally, I wish these 2 chapters were more extensive, as some trainers and therapists

do not have enough education on these topics. Expanding these chapters may allow trainers or therapists practicing in a direct-access clinical environment to better identify potential visceral problems.

This book is appropriate for nurses, athletic trainers, physical and occupational therapists, or those studying to prepare to enter one of these health care fields. The book contains an extensive bibliography to support the material presented. With the exception that the reader may wish the book was more extensive, I believe that the book achieves its goal of educating the reader about trauma and how it is treated.

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EVIDENCE-BASED REHABILITATION: A GUIDE TO PRACTICE, THIRD EDITION

Law M, MacDermid J. Thorofare, NJ: SLACK Incorporated, 2014, 352 pp, hardcover, \$57.95.

The third edition of this textbook is an update without an extensive revision. The intended audience includes both students and practitioners, with an emphasis on occupational and physical therapists. Most of the contributors are occupational therapists.

The 12 chapters in the text address most aspects of the spectrum of evidence in rehabilitation, beginning with an overview and ending with practical tips for translating evidence into practice. Several chapters address the “nuts and bolts” of evidence-based rehabilitation, from asking a question that can be answered through evidence, appraising the evidence, and applying the answer to the specific clinical situation. Specific topics include the appraisal of research to answer questions related to diagnosis, prognosis, intervention, and risk or harm, as

well as appraisal of reports of systematic reviews and meta-analysis research.

Several topics often overlooked or given a cursory treatment in other resources addressing evidence-based practice (EBP) are well addressed in this text. These topics include the consideration of the economics of changes in practice as a result of new evidence, how outcome measures fit into the domain of EBP, and communication of evidence to the stakeholders (patients, supervisors, and payers). Several appendices include forms or checklists and guides to appraising evidence.

All chapters begin with explicit learning objectives, and most chapters end with “take-home messages” and “learning and exploration activities.” These are great summaries of the chapters and effective tools for teaching. Several chapters include many URLs for websites that provide helpful supplemental information.

This is a good, but not great, resource for clinicians and students. Although most important topics dealing with EBP are addressed in the book, at times the information is superficial, lacks organization, and is repetitive. Some chapters include a very brief explanation of the statistical concepts needed to conduct a critical appraisal, but, for the most part, the explanation is insufficient or is nothing more than a URL for a website. The specifics of what to consider in a critical appraisal are repeated in several chapters. There are a few distracting and potentially confusing errors, especially if the reader is not well versed in statistics. For example, in the chapter dealing with outcome measurements, the standard error of measurement is called the standard error of the mean. The discussion of quantifying measurement error is accurate, but the name of the statistic is incorrect. The primary advantage this text has over other texts dealing with EBP, such as the *JAMA Users' Guide to the Medical Literature* and Stephen Simon's *Statistical Evidence in Medical Trials: What Do*

the Data Really Tell Us?, is that the text by Drs Law and MacDermid is oriented toward rehabilitation. This is an insufficient reason to use this text for teaching students or for a quick reference for clinicians. There is enough unique information in this text to warrant its place on the shelf for more experienced clinicians and as a supplement for teaching.

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HEALING THROUGH TRIGGER POINT THERAPY: A GUIDE TO FIBROMYALGIA, MYOFASCIAL PAIN, AND DYSFUNCTION

Starlanyl DJ, Sharkey J. Chichester, UK: Lotus Publishing; Berkeley, CA: North Atlantic Books, 2013, 264 pp, paperback, illus, \$29.95.

The authors of *Healing Through Trigger Point Therapy* seek to reach a wide and varied audience to spread knowledge regarding trigger points, fibromyalgia, chronic myofascial pain, and how they are related to and possibly cause pathology. The text is meant as a tool for patients and clinicians who come in contact with patients with any of the aforementioned conditions. Specifically, the focus is placed on trigger points and their identification, pain patterns, treatment, and perpetuating factors. In the authors' own words, "This book offers empowerment and hope to patients and direction to care providers." They succeed in this goal by presenting the information in a thorough, positive, and understandable manner. Most of the book is written in a way that is approachable to patients and those who do not have a background in health care. Detailed illustrations help to facilitate a deeper understanding of complex patterns of pain referral and also demonstrate location of muscles. Throughout the text, the authors give cues to readers when the content is aimed more toward

health care professionals. This strategy ensures that readers who are not health care professionals do not become discouraged if the content is too complex.

This book is divided into 3 primary parts, which are further divided into separate chapters. The 3 parts are as follows: part 1, What You Need to Know; part 2, The Gallery: Identifying the Symptom Source; and part 3, Where Do We Go From Here? Each part builds on the knowledge gained from previous parts to progress and refine understanding of this complex subject, and the authors do well at easing the reader into the information.

Part 1 begins with a quick overview of the text and its designed purpose, as well as introducing the concepts to patients and clinicians. Included in the first chapter is an overview of the musculoskeletal system, its constituent parts, and its interaction with the nervous system. After this foundation has been established, the authors go into great detail regarding trigger points, with a specific focus on causes, types of trigger points, and, briefly, the effect they have in the body. The next chapter focuses on understanding and identifying fibromyalgia, trigger points, and chronic myofascial pain, and how these conditions interact and coexist. Moving forward, the authors introduce the concept of kinetic chains and the complex muscular interactions that provide stability and control. The effect of fibromyalgia on this complex interaction of muscular kinetic chains and the central nervous system is briefly examined. The heart of part 1 includes a chapter dedicated to symptom management and speaks at length about the identification and control of perpetuating factors. Analogy and metaphor are used extensively in this chapter, because, it is presumed, the use of this material by patients can be so helpful. Part 1 ends with an extensive list of signs and symptoms and the corresponding sites of trigger points.

Part 2 comprises the bulk of the text and is dedicated to the identification and control of trigger points. The list of

muscles identified and indexed is comprehensive and divided into different muscle groupings: the face, head, and neck; the trunk; the shoulder, arm, and hand; the hip and thigh; the lower leg and foot; and beyond the myofascia. Each grouping begins with an introduction to the body region and an overview of important concepts and factors that relate to the pathologies. In-depth analysis for each individual muscle in these regions includes detailed illustrations of anatomy and pain-referral patterns, commentary on actions of the muscle, notes on identification of trigger points, perpetuating factors, hints for control (patients and care providers), stretching, and self-treatment. The final chapter of this segment introduces the reader to trigger points associated with scars, ligaments, the dural tube, the cardiac system, and the digestive system. Although evidence seems to be lacking when talking of trigger points outside of the musculoskeletal system, the authors introduce interesting concepts worthy of more research and consideration.

Part 3 is dedicated to the examination and treatment of trigger points, fibromyalgia, and chronic myofascial pain, and the roles and responsibilities of both clinicians and patients. The authors go into detail about how patients should prepare for their appointment and how patients and clinicians can best identify important parts of the history and exam. General manual therapy techniques are described for the exam, and more detailed techniques are outlined in the treatment section. Also included in the treatment section are notes on general body work, barrier and scar release techniques, various stretching techniques, needling, etc. The final segment closes with commentary on how patients and clinicians can continue to expand their knowledge in this area and spread these concepts in varying aspects of the health care spectrum.

The only critique I would mention is that while reading through part 2, I

found myself wishing that the authors had discussed treatment prior to outlining identification and pain patterns of trigger points. It would have been helpful to visualize hand placements and treatment techniques for specific muscles as I progressed through the text. Overall, I feel this text is a great resource for patients with trigger points, fibromyalgia, and chronic myofascial pain, and can be a great tool for making the patient an active participant in their care. In addition to being a resource for patients, this book would be a great addition to any student's or clinician's library and would go a long way toward facilitating more successful outcomes with patients in this population.

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YOUR HEADACHE ISN'T ALL IN YOUR HEAD: NEUROSCIENCE EDUCATION FOR PATIENTS WITH HEADACHE PAIN

Louw A, Diener I. Minneapolis, MN: Orthopedic Physical Therapy Products, 2014, 48 pp, softcover, illus, \$17.95.

Your Headache Isn't All in Your Head: Neuroscience Education for Patients With Headache Pain is a 48-page, spiral-bound, softcover book designed to educate patients on the causes, treatments, and contributing factors of headache pain. This book educates and explains headache neuroscience to patients and discusses the causes of headache pain. The material and explanations are easily understood with supporting examples and illustrations. This book is laid out in a very logical and easy-to-read manner and uses current literature to support topics.

In section 1, the authors explain that pain is a normal experience and list causes of headache pain. The authors provide evidence-based rationale for the

explanation of pain and effectively communicate why the body senses pain. The authors also explain the difference between pain and tissue damage.

In section 2, the authors explain headache neuroscience and discuss how headaches are a common problem for most people. The authors briefly describe headache types and the way information is communicated from the body to the brain.

In section 3, the authors explain causes of headache pain. The authors have a Take Away Message section that clearly summarizes previously discussed sections. This section also emphasizes important concepts of headache neuroscience and reassures the reader of their symptoms. The authors also have an evidence-based checklist section designed to help determine if symptoms are due to increased nerve excitability. The causes of nerve hyperexcitability are discussed along with the complex causative factors. Each causative factor is explained in an easily understood manner. How the brain processes sensory information is also discussed.

In section 4, the authors explain ways to decrease pain and headache symptoms. The authors also list ways to deal with headache pain, which include knowledge of the condition, manual therapy, neck and aerobic exercises, medication, cryotherapy, relaxation techniques, sleep, posture, and stress management. The authors give evidence and rationale for their suggested treatments.

It is a difficult task for any author or editor to give complete coverage of any subject to a patient, let alone a multifactorial topic such as the neuroscience of headaches. However, these editors and authors did an impressive job of giving clear, concise information in a way that anyone can understand. The book is well illustrated and highlights key points with excellent color photographs and drawings. The key points are referenced and provide evidence for the authors' explanations. The one perceived weakness of

the book is that it doesn't discuss in detail specific neck exercises that may be beneficial for patients. Although the authors do show illustrations of 3 commonly performed neck exercises, no explanation is given on how to perform them or how many sets and repetitions should be performed.

This book will be useful to the physical therapist who practices in a rehabilitation setting and treats patients who have frequent headaches. This book would be a good resource for a clinician to issue to patients who have headache pain in conjunction with a specific home exercise program.

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DISORDERS OF THE SHOULDER: DIAGNOSIS AND MANAGEMENT PACKAGE, THIRD EDITION

Philadelphia, PA: Lippincott Williams & Wilkins, 2013, 3 vols, hardcover, illus, \$549.99.

Iannotti JP, Williams GR. Disorders of the Shoulder: Diagnosis and Management: Shoulder Reconstruction, 3rd ed, 2013, 832 pp

Miniaci A. Disorders of the Shoulder: Diagnosis and Management: Sports Injuries, 3rd ed, 2013, 576 pp

Zuckerman JD. Disorders of the Shoulder: Diagnosis and Management: Shoulder Trauma, 3rd ed, 2013, 328 pp

The *Disorders of the Shoulder: Diagnosis and Management* package, published in 2013, is now in its third edition. The third edition was written to add depth to previous sections and to add 2 additional volumes covering sports injuries and shoulder trauma in response to the most recent changes in clinical practice. The 3-volume series is intended to be used as reference texts for those providers who regularly treat shoulder disorders. Vol-

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ume 1 offers extensive coverage of shoulder reconstruction, volume 2 presents diagnosis and management of common shoulder injuries related to sports, and volume 3 covers management of shoulder trauma. All 3 volumes are written and edited by world-renowned, expert physicians who treat various shoulder disorders at some of the most prestigious hospitals and clinics in the world.

Volume 1, *Shoulder Reconstruction*, is the primary textbook in the package and is divided into 8 well-organized sections covering, in part, the evaluation and surgical and nonsurgical interventions for glenohumeral instability, arthritis and arthritis-related disorders, rotator cuff and biceps pathologies, management of the frozen shoulder, and neurologic shoulder problems. Volume 1 provides complete, detailed information on the anatomy, biomechanics, and evaluation of the shoulder girdle complex, operative procedures, and surgical management of complex shoulder disorders. The text supports a multidisciplinary approach with extensive information on the basic science, clinical presentation and examination, clinical decision making, illustrations, surgical techniques and management, and cutting-edge information on alternatives to arthroplasty, humeral resurfacing, and the role of biologics in shoulder management. Each chapter has a complete and extensive bibliography.

There are minimal rehabilitation guidelines presented in volume 1. Provided, for example, are shoulder disorder management with general principles of physical therapy, deltoid re-education for the irreparable rotator cuff tear, and management of the frozen shoulder, but there are no specific chapters dedicated to the physical therapy rehabilitation management of shoulder disorders. It should be noted that this is not the intent of the text.

Volume 2, *Sports Injuries*, is an en-

tirely new volume to the *Disorders of the Shoulder: Diagnosis and Management* package. It was added as its own textbook volume, as the surgical management of shoulder injuries from sport-related activities has expanded and is now better understood. The goal of volume 2 is to present to the clinician the surgical management of sports-related shoulder disorders. Volume 2 is edited by Dr Anthony Miniaci, Professor of Surgery at the Cleveland Clinic Lerner College of Medicine. The second volume is divided into 8 well-defined sections on sports-related injuries, including an introduction to the athlete's shoulder, anatomy of the shoulder girdle, and glenohumeral and scapular biomechanics. The specific chapters provide clinically useful and relevant information on examination of the shoulder to include imaging, arthroscopy, rehabilitation, and sport-specific disorders of the shoulder commonly seen in the clinic.

The text presents specifics on examination technique for shoulder instability, cuff and biceps disorders, surgical rationale, and decision making on open versus arthroscopic approaches. The section on sport-specific disorders of the shoulder has excellent chapters covering shoulder injuries in the overhead athlete, shoulder injuries in contact sports, and adolescent athlete shoulder injuries. This volume presents more information on the rehabilitation aspect of shoulder injuries and restoring scapular mechanics compared to volume 1. Readers will find a useful summary of the various clinical shoulder tests, including an analysis of each test's validity.

Volume 3, *Shoulder Trauma*, is the second new volume added to the *Disorders of the Shoulder: Diagnosis and Management* 2013 edition. This last volume was edited by Dr Joseph Zuckerman, Professor and Chairman of the Department of Orthopedic Surgery, New York University Hospital for Joint Diseases,

New York University Langone Medical Center. The *Shoulder Trauma* text is organized into 6 parts and focuses on fracture management. The chapters include clinical evaluation, imaging, and surgical techniques, as well as nonoperative management of shoulder fractures. Included in volume 3 is a chapter written on the management of fractures in adolescents. This third-volume text has no significant recommendations for rehabilitation of shoulder fractures and, of the 3 volumes, has the least amount of rehabilitation guidelines.

The authors and editors of all 3 volumes certainly meet their objective of presenting a complete medical textbook covering shoulder reconstruction, sports injuries involving the shoulder, and trauma management of shoulder disorders. Volume 2, *Sports Injuries*, is the most relevant to the physical therapist treating shoulder injuries in the clinical setting. The sections on anatomy and biomechanics, various clinical shoulder testing validity, imaging, and rehabilitation are useful references to aid in the management of shoulder cases commonly seen in the physical therapy setting.

The third edition of the *Disorders of the Shoulder: Diagnosis and Management* package, as a whole, is not a physical therapy rehabilitation guideline and was not intended as such by the authors and editors. In this 3-volume set, the reader will have all of the current information, complete with extensive and relevant bibliographies, on the surgical and, in some cases, nonsurgical management of shoulder disorders. This 3-volume set is a useful reference for physicians and physical therapists who are seeing patients with shoulder disorders.

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