

# Book Reviews

**PHYSIOTHERAPY IN PAEDIATRICS**, by Roberta B. Shepherd, Dip.Phty.(Syd.), Wm. Heinemann Medical Books Ltd., 1974. Pp. 428. Illus. Price R11,80. P.O. Box 11190, Johannesburg, 2000.

This book is an admirable attempt to fill the long-felt need for a comprehensive book on paediatric physiotherapy. Introductory sections on the child, his parents and the physiotherapist as well as on the nature of movement have been planned with insight and are well-presented. Line diagrams are clearly reproduced but are not sufficiently discussed in the text to be really instructive. Despite one or two rather arbitrary statements the author brings out the important aspects of motor development and illustrates these with photographs. Unfortunately some of the photographs do not really illustrate the features mentioned in the captions. It is a pity that the analysis of normal movement is dealt with so briefly; one hopes that the reader will (in the words of the author) be stimulated to make further discoveries.

Section II covers developmental and neurological disorders and more than two thirds of this section is devoted to cerebral palsy. The author's approach to the assessment and treatment of cerebral palsy has a sound basis in the principles of neurodevelopmental therapy as developed by Dr. and Mrs. Bobath. The problems of assessing a young baby are well analysed and include an astute evaluation of the parents' comments on the baby's reactions to feeding, dressing and other aspects of handling at home. Other approaches to therapy are mentioned briefly; one question, however, the view that Vojta's approach may have particular relevance in the treatment of young babies.

From the point of view of physiotherapists in South Africa it is a pity that both head injuries and acute polineuritis have been accorded only a brief two pages.

This last observation perhaps reflects a general criticism of the book; it is not, in fact, a comprehensive review of paediatric physiotherapy but rather reflects the particular interests of the author and her colleagues. Cerebral palsy and spina bifida dominate the book, followed by talipes equinovarus, with a surprising amount on muscular torticollis to the exclusion of many other rather common neurological and orthopaedic disorders. Even muscular dystrophy is rather briefly covered, although this might be due to the fact that in Australia, as in South Africa, the incidence is low in comparison to that in the northern hemisphere.

The section on respiratory disorders has a very good introduction and gives many practical points which will be of assistance in the management of cystic fibrosis and asthma. Cardiac conditions and the surgical treatment of chest diseases are not adequately covered.

There are, unfortunately, a few errors in the text which should have been eliminated during proof-reading, including grammatical errors and reference to pages which in fact are unrelated to the subject under discussion.

Despite the adverse comments above, this book gives excellent coverage in certain aspects of paediatric physiotherapy. In particular the references and reading lists given at the end of each chapter are really comprehensive and should stimulate the physiotherapy student, for whom the book is intended, to make further study in her own field of interest.

S. IRWIN-CARRUTHERS.

## INLEIDING IN DE KINESIOLOGIE VAN DE MENS —

Dr. R. H. Rozandal. Uitgewery: Stam Technische Boeken, B.V., 1974, Culemborg, Nederland. Not available.

Hierdie 3de druk van bogenoemde boek wat in 1968 vir die eerste keer verskyn het, is op baie plekke heeltemal hersien; o.a. is die hoofstukke oor staan en die kinesiologie van loop herskrywe om aan te pas aan moderne ondersoek op hierdie gebied.

Die hoofstukke omvat sitologie en histologie, die skelet, vegetatiewe stelsels, sindesmologie, miologie, senuweestelsel, funksionele anatomie van arm, been en romp en die hoofstukke oor staan en loop.

Wat 'n groot verbetering is, is dat in die hoofstukke oor funksionele anatomie van arm, been en romp ruim aandag geskenk is aan oppervlaksanatomie en topografiese anatomie van bloedvate en senuwees. Hierdie hoofstukke bevat, naas tabelle oor senuweevoorsiening en wortelwaardes van die spiere, ook skematiese oorsigte van die spiere met hulle vernaamste funksies, waarby aangegee is die funksie van die spier alleen en in samewerking met andere spiere. Dit is baie insiggewend om die funksies van spiere op een bladsy naas mekaar te hê.

Soos reeds gesê is die kinesiologie van loop uitvoerig behandel en om een en ander duideliker te maak is 'n apart hoofstuk oor teoretiese meganika toegevoeg.

Die hele boek is ruim geïllustreer met tekeninge om die teks nader toe te lig en vir elke hoofstuk is daar 'n uitgebreide literatuurlys vir verdere studie.

As geheel gesien is hierdie druk 'n groot verbetering op die eerste druk en kan dit van groot nut wees nie net vir veral die Afrikaans sprekende fisioterapiestudent nie, maar ook vir die gekwalifiseerde fisioterapeut wat hier baie gegewens kry wat in haar daaglikse werk van waarde kan wees.

B. GOEDHART.

## Abstracts

**AN APPROACH TO THE PROBLEMS OF OROFACIAL DYSFUNCTION IN THE ADULT** by M. C. de Jersey. Aust.J.Physiother., XXI(1), 5-10.

The muscles of the face, tongue and throat have been discussed with special reference to their function in speech expression and swallowing.

The problems facing the patient with orofacial dysfunction are outlined and their assessment and treatment described.

I believe that physiotherapists have a great deal to offer patients in this generally neglected area. We know best how to re-educate muscles, using the same principles of re-education for the facial muscles and the muscles of the tongue, palate and throat as we do for the biceps or the tibialis anterior.

Psychologically, and functionally the facial area is of vital importance so that our patients can eat socially, speak intelligibly and convey emotion through facial expression.

Progress in this area, as in most others, comes in small amounts through much hard work on the part of both therapist and patient.

The best results, however, come when the patient and the members of the medical professions work together to achieve functional goals which are realistic and oriented towards the needs of the most important member of the team — the patient.

Author's Summary.