Holism and Complementary Medicine
Origins and Principles
Vincent Di Stefano
Allen & Unwin, 2006
ISBN 174-114-846-4, $45.00

Complementary medicine is rapidly increasing in popularity in the western world. This book by Vincent Di Stefano is very timely. He has qualifications in osteopathy, western herbal medicine, naturopathy and acupuncture, and has been involved in teaching philosophical concepts of healing at university level to undergraduate and postgraduate students.

The book is in two parts. The first examines the early origins of medicine in ancient Egypt to the current era from a historical context. There is a systematic review of traditional healing practices, the development of the western biomedical model, and holistic philosophy, which is the basis of complementary medicine in the western world.

The second part reviews complementary medicine from a medical/philosophical perspective and includes chapters on holism and reductionism in medicine, the healing relationship, and therapeutic aims of holistic medicine. The last three chapters compare and contrast biomedicine and complementary medicine. The differences between holistic and conventional biomedical traditions and approaches are examined from a philosophical point of view.

Also explored, are the key practice issues and the role of holistic principles in current medical practice. A substantial number of references are included which are very useful in this vast subject.

A minor criticism of the text is that no mention is made of the pioneering role of medical graduates in Australia in the establishment of integrative medicine. Examples include the first College of Nutritional Medicine, the first National Integrative Medicine Association, and the first Postgraduate Medical School in Integrative Medicine.

Holism and Complementary Medicine is a useful for students, health professionals and for the increasing number of the public who have an interest in the origins, principles and philosophy of natural medicine.

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Guide to Arthrocentesis and Soft Tissue Injection
Bruce Carl Anderson
Elsevier Saunders, 2005
ISBN 141-602-205-8, $69.00

The thought of reviewing this book excited me. Previously, there are few good references on this important topic available for general practitioners. The skills needed for success often require good applied anatomical knowledge and a specific technique.

Guide to Arthrocentesis and Soft Tissue Injection deals with far more than the title suggests. Despite the title it also includes some conditions where injection is not part of the treatment. It endeavours to summarise the diagnosis and management of most common soft tissue problems. While this is an admirable goal it unfortunately overwhelms the reader with innumerable facts and fine detail. The medical terminology used is Americanised tending to further reduce clarity for an Australian reader. These factors made it an impossible book to sit down and read from cover to cover. However, if used as a reference for a specific condition it was generally a very handy, concise source of detailed information.

The design of the book into body regions where common conditions are discussed and indexed on the contents pages allows it to be used rapidly in a consultation setting. I liked that injections were not usually the immediate first treatment option and only recommended when simpler measures failed. Conditions such as Achilles tendonitis where injections are known to have potential for poor outcomes were also dealt with by well balanced clear instructions. Guidelines for adjunctive therapy such as recovery exercises or immobilisation after injections were given clear emphasis. In most instances guidelines for surgical referral after failed conservative therapy were included. The frequency and number of injections before this point was reached were typically discussed.

The line drawings and injection techniques were generally handled well. For this alone I believe it would be a useful shelf reference text and the detailed and concise management information an every day bonus to the busy GP.

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