

Anatomy and Human Movement Pocketbook.

N Palastang, R Soames and D Palastanga, 2008. Elsevier, Philadelphia. ISBN 978-0-443-06912-3 Softcover, 246 pages RRP: \$NZ 54.94

This book is designed as a reference text for practitioners in the clinical setting and a revision text for students. It is not a stand alone textbook but focuses on the main features of the musculoskeletal system. The text is concise and clear with many simply illustrated diagrams throughout the book. There are five chapters. The Introduction outlines basic anatomical terminology and overviews the essential anatomical and mechanical features of the musculoskeletal system. While an outline is given of the major features of bone, joint, muscle and nerve tissue, a superficial note of the integumentary and lymphatic systems conclude the introduction. The remainder of the book covers the anatomy regionally with chapters on the upper limb, lower limb, trunk and neck, and a final small chapter on the head and brain. Each section includes information on the specific bones, joints, muscles, and movements (both physiological and accessory) and summarises the major nerve and blood supply to the region. Useful tables of muscles and movements are presented in each chapter, and handy information is given on palpation. Throughout the book there are interesting inserts of applied anatomy and useful clinical examples are given. While the textbook does cover each region in turn, the Trunk and Neck chapter does give a scant overview of the digestive, urinary and reproductive systems predominantly located in this area.

Overall, this is a well presented book that would be useful as a supplementary textbook for clinicians and students working in the musculoskeletal area. The soft cover and small size of the book would allow it to be carried in a large clothing pocket, making it a useful portable resource for daily practice.

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The Book of Touch, Constance Classen (ed) 2005, Berg, Oxford. ISBN 184520059-4. Soft cover, 463 pages. NZD \$46.13

Touch is at the very heart of physiotherapy practice. It is written into our history, our principal therapeutic modalities, and it underpins, in many respects, how we are viewed by the public at large. Learning to touch is the first principal of physiotherapy education and the thing that we most obviously recognise when done badly by a novice practitioner. And yet it is hard to find evidence that touch is understood in all its complexity by the profession. It is assumed that the

many facets of touch – its social, cultural, political, spiritual, technological, and sensual qualities – are inherent and understood by us all, and that we all share a common understanding of its power and possibilities. But is this so?

Constance Classen's book is a collection of writings on touch ranging across all of these spheres. Classen provides excellent editorial interventions throughout the text, which supplement her skill at compiling and organising the selected pieces into an impressive and very readable volume.

The book is divided into nine parts, covering; Contact, Pleasure, Pain, Male Bonding, Women's Touch, Control, Uncommon Touch, Tactile Therapies, and Touch and Technology, and each one is populated by writings from authors as diverse as Silas Weir Mitchell (the nineteenth century neurologist who pioneered the 'rest cure method'), Donna Haraway and Klaus Theweleit.

The contents range across genres and themes, across time periods and cultures. There are pieces written about childbirth and weaning in Inuit communities, schooling male bodies in colonial India, through to cyberculture and the golden age of electrotherapy.

References to physiotherapy are tangential, but there is much that physiotherapists will recognise in this volume: Ruth Finnegan's piece on tactile communication; Classen's introduction to the section on pain; Temple Grandin's 'Autism and "The Squeeze Machine"'; and Drew Leder's 'Visceral Perception', are no exceptions.

Classen makes it clear that her book is not an attempt to write a guide to the science of the haptic system, or yet another book on how to do massage. She argues (quoting Sander Gilman) that 'there is a tendency among writers on touch "to return over and over again to the physiological 'realities' for their understanding of the history or culture of touch". I believe, however, that attempts to explain tactile culture through scientific models are often more informative about the culture of science than about the scientific basis of culture' (p.4).

If this identifies Classen's goal in collating this text, then she has done a fine job. This book will open many practitioners eyes to the breadth of possibilities offered by touch and, while I cannot see it being used in undergraduate programs – where the emphasis is too much upon only the technical aspects of massage training – I believe there is a wide and receptive audience for a work of this breadth and quality.

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The Brain that Changes Itself. Norman Doidge 2008. Scribe Publications. ISBN 978-1-921-21582-7. Soft cover, 422 pages. NZ\$39.99

Diane Damiano recalled the fascination with which she had read *The Brain that Changes Itself* during her keynote address at the 2008 conference of the NZ Society of Physiotherapists. Interesting. The week following conference the author, Norman Doidge, was interviewed on New Zealand radio. Fascinating. According to the press release *The Brain that Changes Itself* is a collection of stories of personal triumph from the frontiers of brain science. I had to read this book.

The aim of this book is to illustrate the science of neuroplasticity, which is the ability of the brain to change, through stories of people who are living proof of what the brain is capable of. From curing phantom limb pain in an amputee with mirrors to how depression can diminish a person's memory capability, the use of everyday examples demonstrates that the brain is not fixed and unchanging but is able to respond to stimulus and change functionally and structurally throughout the course of a person's life.

The dust jacket description of neuroplasticity as an astonishing new scientific discovery is somewhat sensational and inaccurate. The author himself contradicts this statement as he traces the history of neuroplasticity from Freud in 1888 through to present day and more appropriately describes the neuroplastic revolution as the medical world slowly shifting from the belief of a the brain as a rigid organ to one which continually changes. The introduction of the term neuroplasticians to describe clinicians that provide interventions through thought and activity to change brain function and structure captures the wide range of professionals that do so and somewhat challenges the professional silos within which we work.

This book is written for the general public not health professionals and as such makes a complex scientific topic relevant and accessible to a reader with no scientific knowledge. It is an entertaining and thought provoking book which would be useful and interesting to undergraduate physiotherapy students and experienced clinicians alike, firstly as it brings neuroplasticity and its implications to life in everyday situations and secondly as it illustrates the over reaching role of neuroplasticity in learning, movement, memory and pain, all aspects of physiotherapy treatments. For those who would pursue the content to a deeper level, the book is well referenced and noted to provide more information and historical notes. Highly recommended.

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Qualitative Research for Occupational and Physical Therapists. Christine Carpenter & Melinda Suto 2008. Blackwell, Oxford. ISBN 978-1-4051-4435-3. Soft cover, 186 pages. NZD \$59.39

Qualitative research is becoming increasingly well understood and utilised by physiotherapists, and this book makes a very welcome addition to what is a relatively discrete field. Christine Carpenter (Reader in Physiotherapy at Coventry University in the UK), and Melinda Suto (Assistant Professor in the Department of Occupational Science and Occupational Therapy at Vancouver University, Canada) have crafted a well written, concise, informative text that will be of use to any therapist trying to understand or use qualitative research.

The book follows a clear structure, moving through explanations of the theoretical and practical application of qualitative research with ease; gently walking the reader through some of the more contentious aspects of the genre. Qualitative research is quickly contextualised to rehabilitation, so that we are able not only to see how the paradigm might be understood, but also how it might be applied to clinical practice and scholarship.

I was particularly drawn to the first two chapters, which explain what qualitative research is, and why we should do it. Despite nearly half a century of qualitative research, it seems that we still need to justify the use of these methods and assume that our audience is still skeptical. I personally doubt whether this is still the case, but appreciate the clarity with which Carpenter and Suto make their case.

One of the inherent complexities in writing about qualitative research (as opposed to quantitative), is that they are grounded on the assumption of multiple realities (rather than a single, objective truth). Any text that seeks to summarise these disparate interests faces (at least) two problems: Firstly, how to deal with the volume and complexity of competing interests (phenomenology, ethnography, grounded theory, critical theory, postmodernism, etc. all have their own idiosyncracies); and secondly; whether these perspectives should be presented in a neutral tone that does not favour one over the other. In the past, these problems have been solved by presenting a massive volume of works from expert specialists in their field (see, for instance, Denzin and Lincoln's 'Sage Handbook of Qualitative Research' which runs to a pocket-bulging 1210 pages). Rarely has a single, small volume succeeded in addressing these tensions (with the possible exception of Holloway and Wheeler's superb 'Qualitative Research for Nurses'.

Carpenter and Suto take a neutral line to some extent and, in doing so, do a superb job of summarising

some of the complexities of qualitative research. They are particularly strong on areas pertinent to rehabilitation. Their text, in this regard, stands up well against Elizabeth Domholdt's 'Rehabilitation Research'.

Given that qualitative research is poorly understood by physiotherapists, and that it is now an integral part of most undergraduate and postgraduate programs, Carpenter and Suto's book is a welcome addition to the field. It is concise, well written and balanced.

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