

Book, DVD-ROM and DVD reviews

Save Your Hands! The Complete Guide to Injury Prevention and Ergonomics for Manual Therapists, 2nd edn

By Lauriann Greene & Richard W. Goggins, with contributions by Janet M. Peterson
Body of Work Books, Coconut Creek, FL, 2008, 352 pages, paperback, US\$39.95
ISBN 0-967954-90-8

The title suggests that this book is devoted to the prevention of work-related injuries to the hands. However, *Save Your Hands!* sells itself short because it has a far broader scope. The authors take a holistic approach to injury prevention and ergonomics for manual therapists by considering many joint, muscle and nerve-related injuries and conditions, as well as nutrition, a good sleep pattern, psychosocial factors, a healthy lifestyle and time management. Perhaps a title such as *Keeping Fit to Work* would have been more appropriate? It would certainly attract a wider audience.

The book is divided into three parts: the risk factors; injury prevention; and injury types, including treatment and recovery. Useful tables summarize key points in the text, and the authors also provide a basic but practical self-risk assessment tool so that readers can identify the hazards that are most applicable to them.

Many photographs and diagrams provide excellent illustrations of various important features, exercises and difficult concepts, such as the principles of biomechanics. Unfortunately, some others are of questionable accuracy. For example, the wrist flexor stretch on page 190 appears to be applying a hyperextension force upon the metacarpophalangeal (MCP) joints of the fingers rather than applying a direct palm-to-palm force. This may cause some unnecessary ligamentous/joint irritation to the MCP joints.

Part One considers why manual therapists get injured. Limited statistics are given regarding work-related injuries (e.g. days off work, causes of injury and the injured individual's level of experience). Unfortunately, no comparison of these statistics is made with the general population, and therefore, it is difficult to evaluate the scale of the problem. The second chapter in this section considers the most vulnerable joints, i.e.

the 'weak links'. This section is kept simple and contains a few interesting facts, but it lacks any reference to the extensive evidence base that is available and the material could easily have been summarized in a couple of paragraphs elsewhere.

Chapter 3 deals with the risk factors for musculoskeletal disorders. Considering the wide audience the book targets (e.g. qualified physiotherapists, massage therapists, assistant staff and students), it is good that the authors have managed to highlight the point that work-related musculoskeletal disorders are a multifaceted problem encompassing personal factors (both physical and emotional), as well as workplace and off-work issues. Unfortunately, they do not directly address the increased risks associated with the ante- and postnatal periods, or the menopause. These issues are touched upon in Part Two (preventing injury), but there is a lack of reference to the influence of stress and strain on the pelvic floor muscle complex. Arguably, any training or literature regarding manual handling and subsequent increases in intra-abdominal pressure should consider the effects on this important muscle complex and the organs it supports. Likewise, the influence of obesity is discussed, but not the factors associated with being underweight or malnourished. Chapter 10 does provide a brief but useful nutritional guide, and advocates regular healthy snacks encompassing all the key food types to sustain energy and repair tissues. Unfortunately, the authors still seem to place a lot of emphasis on reducing calories. Although obesity is a recognized problem in the general population, it is questionable whether it is such a widespread issue for manual therapists. Finally, the authors have also neglected to reference the risks for individuals with hypermobility syndrome, even though some hereditary traits are considered. Nevertheless, Chapter 3 does provide a good insight into the many risk factors and useful comparisons to work-related activities are provided in order to demonstrate the points that are made.

Part Two considers injury prevention, discussing ergonomics, the development of good body mechanics, technique modification, emotional considerations, time management, nutrition, hydration, a healthy sleeping routine, relaxation

and physical conditioning. The authors emphasize the need to address such preventative issues in all aspects of life, not just at work (e.g. at home and while driving). The material should be applicable to all levels of skill and knowledge. Many interesting issues are considered, and useful hints and tips provide suggestions for improvement. There is a commendable emphasis on dynamic 'neutral' postures rather than static 'good' postures. Overall, it is refreshing to read a descriptive but very practical text.

The third and final part of *Save Your Hands!* considers injuries, treatment and recovery. The different aspects of acute and chronic pain are addressed, along with brief descriptions of common injuries and types of treatment. This book is primarily intended for a US audience, and therefore, some of the issues discussed within treatment, such as who to seek help from, reflect this. A skilled manual therapist may find many aspects of this part of the book very basic, so it may be most beneficial to students or newly qualified staff. Nevertheless, it does serve as useful refresher course for all readers.

Overall, it is pleasing to see a text that is purely devoted to the manual therapist rather than the patients they treat. Although not comprehensively referenced, *Save Your Hands!* is a very practical book that is based upon experience and important anecdotal evidence. It would be appropriate for an initial reading list for students or newly qualified manual therapists to ensure that good habits are formed at the beginning of their careers, enabling career longevity, and it would also be useful for manual handling advisors and ergonomic advisors, especially those working in the healthcare professions.

Save Your Hands! can be ordered from Body of Work Books, 4799 Coconut Creek Parkway, #125, Coconut Creek, FL 33063, USA (e-mail: order@saveyourhands.com).

Karen Irons

*Portsmouth City Teaching Primary Care Trust
Portsmouth
and
Western Sussex Hospitals NHS Trust Sussex
UK*

Caring for Women with Circumcision: A Technical Manual for Health Care Providers

By Nahid Toubia
RAINBO, New York, NY, 1999, 94 pages,
paperback, \$17.95
ISBN 1-893136-01-9

Much has been written on the subject of female circumcision/female genital mutilation, but despite its publication date, this book continues to fill a void in the clinical setting.

The author is well qualified to write such a practical manual: she is both an African woman of Sudanese origin and a physician. Nahid Toubia found herself part of the African migratory community as a result of hostilities and famine, and it is for the women of this group who have undergone circumcision/genital mutilation that she writes.

Caring for Women with Circumcision includes chapters on the prevalence and sociocultural characteristics of the procedure, as well as classification, obstetric and gynaecological care, the healthcare needs of children and adolescents, the law, and seven case studies providing insights into the clinical encounter. The point is made that the most common reason for such women to attend a clinic is for prenatal care and delivery. Although the section on the law is written from the US perspective, the position elsewhere is summarized. Illustrations, including colour images and diagrammatic instructions for defibulation, enhance the reader's understanding of the subject.

In the gynaecological care section, pelvic floor exercises are recommended for the management of urinary stress incontinence, and warm salt (sitz) baths for general tenderness and sensitivity in the vulva, perineum or vagina. A case study of a young Somali refugee woman who required defibulation during the second stage of labour cites physical therapy as contributing to a good outcome. At a post-partum follow-up, this young woman, with the aid of an interpreter, expressed concerns that her infibulation had been left unstitched and said that she felt naked. The care plan devised by the hospital team included counselling, and a physical therapy regime of sitz baths and local wheat germ cream to help her accept the new way her genitalia felt.

The most skilfully written section of *Caring for Women with Circumcision* discusses communication and gives well-argued advice on interactions with circumcised women. Toubia states that 'by building a relationship of trust the health care provider can play a crucial role in empowering a circumcised women to understand what happened to her, overcome her own pain and anger, and stand up to protect her daughter against circumcision'. Model questions that healthcare professionals ask, and accompanying

answers, provide sound guidelines for tackling clinical dilemmas. Basics for successful communication are outlined with cultural differences in mind. For example, women in Western cultures are expected to make decisions about their own health, whereas the decision-making process is expected to involve the family in many African cultures, and they may be used to diagnosis and treatment with minimal history-taking.

Circumcision is the author's choice of terminology in the clinical setting because the term 'mutilation' can be offensive. Referring to the procedure in the language of the woman may be more helpful. The appendix lists commonly used terms from different ethnic groups and languages.

In summary, I can recommend *Caring for Women with Circumcision* as an excellent practical manual with cogent advice on interacting with women who have undergone female circumcision/genital mutilation.

Caring for Women with Circumcision is still available from Amazon.com at prices ranging from US\$79.54 (new) or US\$22.50 (used).

Ruth Broom

*National Women's Health
Auckland District Health Board
Auckland
New Zealand*

Interactive Pelvis and Perineum

By Julian Shah, Alan Farthing,
Robert Richardson & Stan Lennard
Primal Pictures, London, 2009, DVD-ROM,
£159.00 (see offer at end of review)
ISBN 978-1-904369-92-9

I reviewed a previous version of this product in the Spring 2004 edition of *JACPWH* (No. 94, p. 78). According to the publicity, *Interactive Pelvis and Perineum* offers a detailed, fully labelled and interactive three-dimensional anatomical model of the pelvic region, including the pelvic floor, the urinary and reproductive systems, the rectum, the sacroiliac joint, and the circulatory and nervous systems. It is PC- and Mac-compatible (including Vista and Mac OSX.5+), and is single-user licensed only.

A 'Help' file offers detailed advice on how to use all the facilities afforded by the DVD-ROM and there is also a short 'Getting Started Movie'. These are both valuable tools if you are new to the product or wish to use a particular function for the first time.

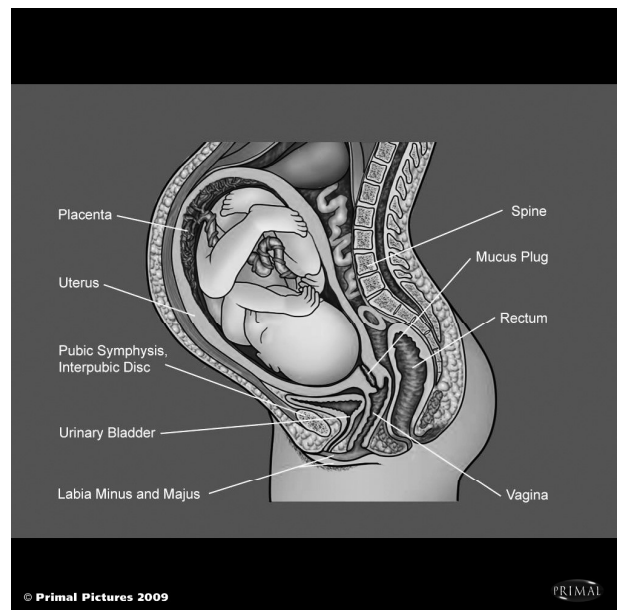


Figure 1. Illustration of the uterus with foetus from *Interactive Pelvis and Perineum*.

The anatomy section offers a choice of either male or female models. Starting with an image of just the bony structures, you can add layers that include the muscular attachments, the ligamentous structures, the muscles themselves, the nerves and blood vessels, and the pelvic organs. If you direct the cursor to a particular structure, it is outlined and identified. Clicking on it highlights the area and a fuller description appears alongside. For example, the text accompanying the external anal sphincter describes its structure and innervation, and the pathology includes obstetric trauma and faecal incontinence. There is also a facility to rotate the image so that it can be viewed not only from the front, but also from the side or back, and above and below. Individual images can be printed or saved for use in a presentation or handout for example (Figs 1 & 2).

The contents section includes other useful tools, such as a search facility. When I entered 'puborectalis', I was directed to an image in which the muscle was highlighted and described, or I could select from a choice of appropriate slides in which it was outlined. There is also a long alphabetical index, so there is really no excuse for failing to find what you want.

The choice of slides includes a range of clinical images covering everything from a speculum to intra-operative images. There are also dissection slides and magnetic resonance images. Again, you can highlight a particular structure and it will be identified. Finally, there is a range of

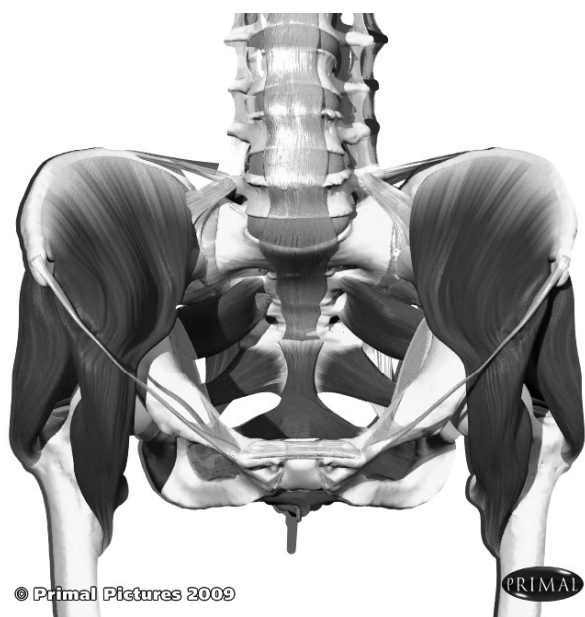


Figure 2. Illustration of the pelvis and perineum from *Interactive Pelvis and Perineum*.

illustrations that are, once again, useful for presentations.

I was very impressed with *Interactive Pelvis and Perineum*, and think it would be a useful resource for everyone from physiotherapy students to clinicians undertaking postgraduate study. It is not difficult to use, and the ability to save and print images for use by the licence holder is a bonus.

Nevertheless, in my review of the 2003 version, I remarked that some of the surface anatomy seemed inaccurate (e.g. the coccyx seemed high) and there was little mention of urinary incontinence in the relevant pathology sections. These minor criticisms have not been addressed in this version.

I believe this product would be an asset to women's health physiotherapists. Although it is single-user license only, the company welcomes enquiries concerning multi-user licensing via e-mail (education@primalpictures.com).

Primal Pictures are offering a 20% discount on this product to ACPWH members via their website (www.primalpictures.com). Add the discount code ACPWH9 at the checkout. Alternatively call (0207) 637 1010 or e-mail <catriona@primalpictures.com>.

Gill Brook
Bradford Teaching Hospitals
NHS Foundation Trust
Bradford
UK

Pump Up Your Penis: Easy Exercises to Strengthen Your Erection

By Grace Dorey

Grace Dorey, Devon, 2009, 64 pages, paperback, £7.00

ISBN 0-954539-35-4

This little blue book is a commendable attempt to make the difficult subject of erectile dysfunction (ED) easy to understand, and it is full of reliable and simple-to-follow advice. Thanks to Professor Dorey, a taboo subject is discussed in an informative way, and with a hint of humour in the pictures accompanying the text.

Pump Up Your Penis is divided into three sections: 'Getting to Know Your Tackle', 'Working Your Sex Muscles' and 'Visiting a Sex Clinic'. The first provides general information about the function of the penis, the risk factors for ED and the important role of the pelvic floor muscles (PFMs) with regard to the condition. Section Two acknowledges research by Dorey *et al.* (2004) on the efficacy of PFM exercises in men with erectile difficulties, and outlines both a basic PFM workout and the role of the specialist physiotherapist. The last section briefly explains the importance of involving a partner and attending specialist clinics, as well as describing other treatments that might work in conjunction with PFM, such as testosterone patches and vacuum therapy.

I wanted to know what men thought about *Pump Up Your Penis*, so I lent it to male colleagues and showed it to patients during consultations. They all found it very useful and easy to read. Some of them commented on the lack of more structured information, such as clear diagrams of anatomy of the penis and more medical references backing the text, but this little book has a different agenda, and if more formal information about the subject is required, patients/colleagues can be directed to the previous work done by Professor Dorey.

A few of my patients did not find the illustrations accompanying the text very tasteful and thought that these did not help them to cope with a very difficult time in their lives. However, it must be remembered that the aim of the pictures is to normalize a complex situation, and if patients are being affected emotionally, then a referral to a health professional should be considered.

The importance of talking to a partner about the condition is mentioned in Section Three, but the author fails to acknowledge that

homosexuals suffer from this condition as well. This might be something to consider in future editions.

Overall, *Pump Up Your Penis* is another useful book to use with this specific group of patients.

Paula Igualada-Martinez

Senior Women's Health Physiotherapist

St Thomas' Hospital

London

UK

Reference

Dorey G., Speakman M., Feneley R., Dunn C., Swinkels A., Dunn C. & Ewings P. (2004) Randomised controlled trial of pelvic floor muscle exercises and manometric biofeedback for erectile dysfunction. *British Journal of General Practice* **54** (508), 819–825.

Obesity and Pregnancy

Edited by Margaret Rees, Mahantesh Karoshi & Louis Keith

The Royal Society of Medicine Press, London, 2008, 286 pages, paperback, £29.95

ISBN 978-185315-761-5

Obesity and Pregnancy is an evidence-based practical guide for healthcare professionals who deal with pregnant women. It is presented in four sections: 'Core Issues'; 'Obesity and Reproduction'; 'Preconceptual, Antenatal and Postnatal Care'; and 'Surgery and Anaesthesia'. Each section is further divided into and comprehensively referenced chapters ranging in length from 11 to 22 pages, all of which are illustrated by tables and diagrams where appropriate.

In the first section, Chapter 1 discusses the epidemiology and health consequences of obesity, and includes prevalence, trends and risk factors. The negative health consequences are listed clearly and succinctly, and would be a useful resource for all physiotherapists. Chapters 2 and 3 discuss the negative impact of obesity on both the mother and foetus, considering not only the physical aspects, but also the psychological issues. In my view, the final chapter in this section is of less interest to physiotherapists because it discusses the molecular biology of obesity. It does this in great depth over 21 pages, but with little apparent relevance to clinical practice.

Section 2 expands on some points raised in the first four chapters, covering obesity and conception, maternal risks, and foetal risks. It achieves this clearly and succinctly, and logically leads on

to the next part, which discusses preconceptual, antenatal and postnatal care.

Section 3 takes up a large part of *Obesity and Pregnancy* (over 100 pages). It begins with chapters on antenatal, intrapartum and postnatal care that offer evidence-based guidance for clinicians. These are followed by a mishmash of chapters dealing with obesity and contraception, diet and anti-obesity drugs, the surgical treatment of chronic overnutrition, and diabetes and obesity.

The final section has chapters on operative delivery and anaesthetic techniques. Both include well-presented information and give a clear overview of these important subjects.

I found this an interesting book because it has a sound evidence base and most of the chapters are easy to read with only a small amount of overlap. Nevertheless, I was disappointed to find no mention of physiotherapy and little reference to exercise in pregnancy, which is surprising since an RCOG Statement has suggested that exercise is helpful in improving glycaemic control in women with gestational diabetes mellitus and may play a role for primary prevention of this condition (RCOG 2006).

I would recommend *Obesity and Pregnancy* to women's health physiotherapists working in obstetrics. It could help to inform developments in your services addressing the implications of the so-called 'obesity epidemic' for women pre-conceptually, during the childbearing year and beyond.

Gill Brook

Bradford Teaching Hospitals

NHS Foundation Trust

Bradford

UK

Reference

Royal College of Obstetricians and Gynaecologists (RCOG) (2006) *Exercise in Pregnancy*. RCOG Statement No. 4. [WWW document] URL <http://www.rcog.org.uk/files/rcog-corp/uploaded-files/RCOGStatement4ExercisePregnancy2006.pdf>

Pelvic Floor Exercises for Women

By Irene Pullar

NHS Tayside, Dundee, 2009, DVD

It is good to see a patient information DVD offering a choice of four languages, and *Pelvic Floor Exercises for Women* has Polish, Chinese, Urdu and English options. The viewer is given

an initial choice of language, but you can view the others easily by skipping on to further chapters.

The disc begins with a brief explanation of the anatomy of the pelvic floor that is accompanied by some basic diagrams that use colour to indicate the different organs as they are covered. These are easy to look at and understand. The rest of the English section consists of a view of the physiotherapist sitting in front of the camera while giving advice on PFM exercises (PFMEs), urgency and frequency, and caffeine reduction. I was a little disappointed by this because it became a little monotonous. I eventually lost concentration and had to rewind to the parts that I had missed.

The information is very comprehensive, and some good hints and tips are given. Nevertheless, the explanation of how to perform PFMEs and the development of the patient's exercise plan is a little confusing, which was another reason for me to rewind the disc.

The Polish, Chinese and Urdu sections are both narrated and subtitled, which I feel may better enable those people able who read the language to follow the information more easily. The English version might also have benefitted from this approach.

Pelvic Floor Exercises for Women is a comprehensive patient information DVD; however, some patients may find it difficult to follow in places and may tend to lose interest as it progresses. This DVD could be just as effective as an audio disc for those who are unable to read information leaflets. Alternatively, the use of more diagrams and pictures would have helped to hold the viewer's attention more successfully.

Gill Hawkins

Heart of England NHS Foundation Trust
Birmingham
UK

I know from correspondence with Irene Pullar, who is the advanced physiotherapy practitioner (continence) at Kings Cross Health and Com-

munity Care Centre, Dundee, UK, that the script for *Pelvic Floor Exercises for Women* is a direct reproduction of three patient information leaflets developed for NHS Tayside by the Tayside Continence Group, and reviewed by staff and patients. The DVD was funded by the Trust and is intended to fill the gap in the market for such a product.

The script is clearly delivered to camera at a nice pace, which should make it easy to follow. The language is generally user-friendly and the instructions are clear. There are obvious continuity breaks in places, which could have been overcome by using different camera angles. Another approach that might have improved the production would have been to have another person ask questions that the physiotherapist could then have answered, making the presentation more conversational. The diagrams shown are useful, but I wonder if more illustrations might have been incorporated or perhaps even shots of someone demonstrating the suppression technique suggested for overcoming urgency. However, I accept that such embellishments might well have increased the production costs considerably.

Pelvic Floor Exercises for Women would be a useful resource for physiotherapists wishing to relay information to English-speaking women with poor literacy, as well as those patients whose first language is Polish, Chinese or Urdu.

Gill Brook

Bradford Teaching Hospitals
NHS Foundation Trust
Bradford
UK

STOP PRESS: NHS Tayside has purchased the entire run of this DVD, which is now sold out. Free copies will be available at forthcoming events organized by NHS Quality Improvement Scotland and at the ACPWH Conference in Bournemouth. If anyone is interested in further details or obtaining a copy, if reprinted, please contact Irene Pullar (e-mail: irene.pullar@nhs.net).