and treatment of related communication deficits, as well as language, voice, and articulation, are discussed. A number of excellent illustrations serves to enhance understanding of complex anatomy and related surgical and dental procedures. The role of the speech/language pathologist (S/LP) as counselor is also emphasized. The data relating to overall patient development and general communicative functioning are also of particular benefit.

Treating the patient with a cleft palate is a service which demands interaction by a variety of medical and educational specialists, including S/LPs, dentists, prosthodontists, psychologists, plastic surgeons, oto-laryngologists, audiologists, and social workers. The authors of Cleft Palate Speech highlight the need for a team approach. Since the S/LP is often the case manager of cleft palate patients and many times must field questions from families about care primarily provided by those in other disciplines, he or she should be informed enough to make referrals as needed. Chapters 4–6 and 10 help the S/LP in this endeavor by giving information dealing with services which can be offered by other professionals, particularly plastic surgeons, otolaryngologists, and prosthodontists.

Working with patients who display disorders related to a cleft lip and palate, however, is an experience that only a limited number of S/LPs encounter. Therefore, Cleft Palate Speech should also be beneficial for S/LPs who do not work with these patients frequently, but are interested in the topic for review, update, and continuing education purposes. In addition, Cleft Palate Speech would be an excellent text for graduate training. This book may be the second-best option to hands-on experience, short of functioning in an area where there is access to extensive cleft palate care.

SUSAN FORSYTHE, M.A., C.C.C.-SP

Department of Otolaryngology and Communicative Disorders The Cleveland Clinic Foundation

Surgical Anatomy of the Heart, by Benson R. Wilcox and Robert H. Anderson, New York, Raven Press, 1985, 141 pp, \$55.00.

This extensively illustrated work is written by a congenital heart surgeon (Dr. Wilcox) and a pathologist (Dr. Anderson). The format is very effective. The photographs are extremely clear and illustrate surgical views as well as postmortem specimens. Along with each photograph is a line drawing in black and white where the salient anatomic features of the photograph are illustrated and carefully identified. This format makes the photographic anatomy extremely clear. The text is supplemental. However, Surgical Anatomy of the Heart would be quite a bit more useful if the clear illustrations of anatomic abnormalities were ac-

companied by similar illustrations detailing techniques of repair.

Although the segment entitled "Normal Anatomy" could be useful for planning some operations for acquired heart disease, the primary subject of the book is congenital heart disease. Even the segment dealing with coronary anatomy focuses on congenital abnormalities. Thus, the book is most useful for cardiac surgeons, practicing or in training, with an interest in congenital disease. Surgical Anatomy of the Heart can serve as a useful occasional reference for cardiologists, but will not be commonly used by non-surgeons.

Bruce W. Lytle, M.D.

Department of Thoracic and Cardiovascular Surgery
The Cleveland Clinic Foundation

Orthopaedic Care of the Geriatric Patient, ed. by Thomas P. Sculco, St. Louis, CV Mosby, 1985, 408 pp, price not given.

The goal of this volume is to demonstrate how the aging process can be accompanied by changes specifically related to the musculoskeletal system and how these changes substantially affect the functional independence of the individual. As is correctly pointed out, this can often lead to great personal and socioeconomic costs. Dr. Sculco wishes to focus the reader's attention on the importance of a comprehensive treatment approach in the maintenance of functional independence and well being for aging patients.

The book is organized into four major sections. The first section deals with the general framework of the aging process into which the care of musculoskeletal maladies is to be placed. Aspects of rheumatologic, neurologic, and anesthetic management, as well as an emphasis on the role of psychological and social environmental effects due to musculoskeletal disease, are ably addressed. The second section of the book describes orthopedic diseases commonly affecting the elderly. The common diagnostic and therapeutic approaches used by the authors to manage musculoskeletal disorders reflect a high level of expertise. The chapters dealing with cervical spine disease, shoulder disease, and hip problems are particularly well done. The third section describes other diseases that have involved work from many disciplines and often are more specifically a problem for the aged. These chapters are clearly written and concise. The fourth section is about the role of support personnel in the successful management of musculoskeletal disorders. As the aged patient population becomes increasingly more functionally limited, the need for appropriate intervention to lessen the impact of such limitations (such as through external supports and orthotic devices) becomes more critical.