

Obviously, a multiauthored book of this nature, while providing very modern and up-to-date information, contains essentially no new information, and for that we would obviously have to depend on the current literature. The book is richly illustrated, and the majority of the chapters are very easy to read. Obviously, the style varies as should be expected of a multiauthored book. It is refreshing to see as authors many talented individuals that could be considered “third generation” neurovascular surgeons. It is particularly pleasing and important for neurosurgery to see that many of these individuals are, in fact, dual trained, both in open microsurgical as well as endovascular techniques. This certainly ensures a bright future for neurovascular surgery within our specialty.

I believe that this is a very useful reference text for all neurosurgical residents and practicing neurosurgeons. Obviously, neurosurgeons specializing in the treatment of neurovascular disease will find the book invaluable and will refer to it often. The book will also be very useful for endovascular practitioners in other specialties (endovascular neuroradiologists and neurologists). I strongly recommend the book.

Disclosure

The authors have no personal, financial, or institutional interest in any of the drugs, materials, or devices described in this article.

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Book Review: *Minimally Invasive Spine Surgery—Techniques, Evidence, and Controversies*

By: Roger Härtl and Andreas Korge

Published by: Thieme Publishers,
Stuttgart, Germany, 2012

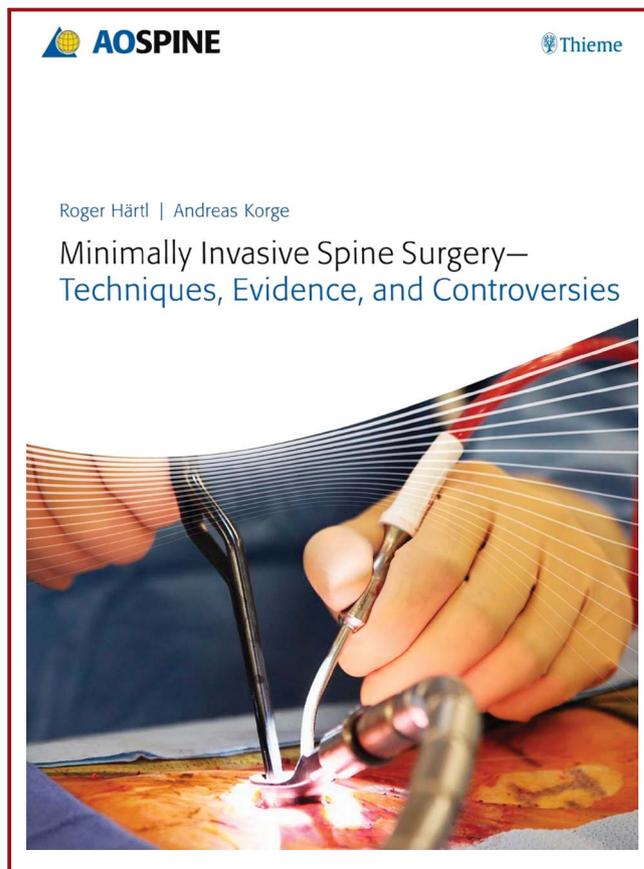
Hardcover: 510 pp.

Price: \$159.99

ISBN: 978-3131723819

Roger Härtl and Andreas Korge brought together leading neurosurgical and orthopedic spine surgeons to compose a collection of well-written summaries for the current status of minimally invasive spine surgery. This book is organized into 5 sections including 8 chapters of “fundamentals” followed by 3 sections divided into different anatomic regions of the spine: cervical, thoracic, and lumbosacral techniques. The final chapter summarizes critical overview and outlook for the future.

The middle 3 sections focus on specific technical aspects of surgical procedures according to anatomic regions. Each chapter is organized into a uniformed format, making it easier for the readers to follow:



historical perspective, terminology, patient selection, pros and cons, preoperative planning and positioning, surgical technique, postoperative care, evidence-based results, complications and avoidance/salvage procedures and learning curve, tips and tricks, and case examples.

There is a wealth of information to introduce practicing non-minimally invasive spine surgeons to the field of minimally invasive spine surgery in terms of instrumentations and technologies involved in performing different approaches and procedures. Each chapter contains “tips and tricks” from the experts on topics of discussion as well as a summary of evidence-based data available in the literature. The diagrams and photographs are very helpful in terms of understanding different minimally invasive procedures. This book also contains enough scientific review for seasoned minimally invasive spine surgeons to learn and improve his or her skills.

Intraoperative monitoring is an essential part of enhanced safety measures for most procedures described in this book; however, the authors omitted any meaningful discussion on this topic. There is a lot of controversy in the retroperitoneal far lateral approach to the lumbar spine, ie, eXtreme Lateral Interbody Fusion/Direct Lateral Interbody Fusion/Minimally Invasive Lateral Fusion, and some dedicated discussion on different modalities of monitoring techniques would have been very informative to the readers.

The authors should be congratulated on putting together a well-organized, comprehensive textbook on minimally invasive spine

surgery. The real strength is with the summary of evidence-based data presented in each chapter for different procedures. This book will be a nice reference material for any spine surgeons interested in minimally invasive spine surgery.

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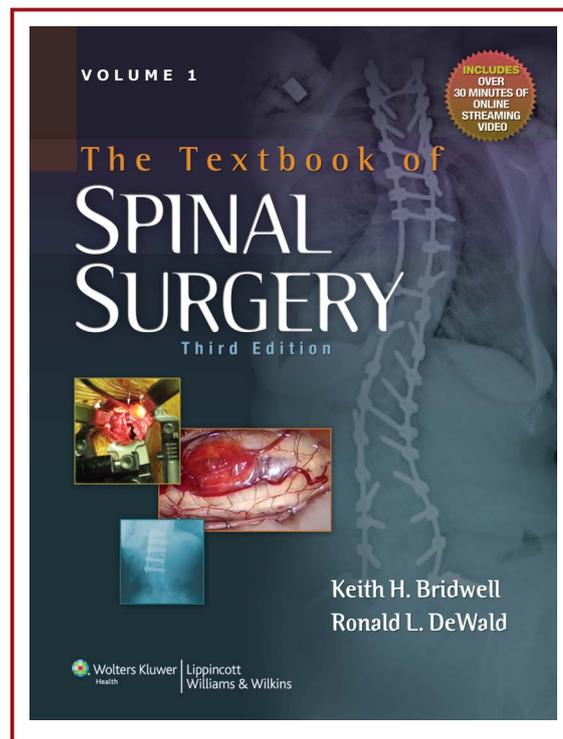
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Book Review: *The Textbook of Spinal Surgery, Third Edition*

By: Keith H. Bridwell and Ronald L. DeWald
 Published by: Lippincott Williams & Wilkins, Philadelphia, PA, 2011
 Hardcover: 2112 pp.
 Price: \$419.99
 ISBN: 978-0-7817-8620-1

The third edition of *The Textbook of Spinal Surgery* with Drs Bridwell and DeWald as Editors is a constellation of reviews of pertinent and important topics in the management of patients with spine diseases. The book is comprehensive, starting with an excellent review of significant advances in spine surgery over the past decade by Dr DeWald. The first 2 chapters of Volume 1 of the textbooks are dedicated to the review of the fundamentals of spine biomechanics and spinal cord anatomy and physiology as they relate to the preoperative, intraoperative, and postoperative management of patients with spine pathologies. The second half of Volume 1 is dedicated to spondylotic diseases of cervical, thoracic, and lumbar spine with emphasis on degenerative spondylolisthesis. Sections I to III of Volume 1 constitute essential knowledge for all neurosurgery and orthopedic residents as well as very good overviews for junior spine surgeons. Every spine surgeon should read the intraoperative monitoring chapter, which is very well written, and the case studies are an added bonus. Although the surgical approaches and biomechanics chapters are well written, they are probably not sufficient for the experienced spine surgeon. The chapters on the management of cervical and thoracolumbar degenerative pathologies are very illustrative and comprehensive. The authors' approach to patient management is often very logical and easy to understand by the reader, albeit without strong scientific evidence (which is a reflection of the paucity of evidence for what we do in spine surgery). The chapters on the surgical



management of cervical spondylotic diseases are very well written with emphasis on biomechanical principles and review of surgical complications. Controversial topics such as surgery for discogenic back pain, use of discography to justify spinal fusion, were very well reviewed based on available evidence. The chapters on new techniques and technology are very well organized with an introductory chapter followed by technical chapters. In light of recent publications, perhaps the authors could have placed more emphasis on the need for both long-term outcomes and a more reliable mechanism for reporting complications of disc arthroplasty surgeries, especially lumbar disc arthroplasty. Section VI of Volume 1 is dedicated to spondylolisthesis, which is quite comprehensive. This is a must-read for all spine surgeons who treat patients with spondylolisthesis. Both adolescent and adult degenerative spondylolisthesis are reviewed and presented in a fashion that makes it easy for the reader to follow. The list of references is also a good resource for the reader for further reading on the topics. Volume 2 of the textbook is dedicated to spine deformity, spinal oncology, spine infection, and spine trauma, but there is a disproportionate emphasis on spinal deformity. The sequencing of the spinal deformity chapters is very good. The initial chapters focus on natural history of adolescent idiopathic scoliosis and functional outcome after deformity surgery with the use of standardized outcome measures. The chapter on natural history is well written and introduces the reader to the rationale for treating patients with scoliosis. Evaluation and reporting of patient-reported outcomes are very essential for all that we do in spine surgery in order to continue to prove our value to society. Chapter