

tion on spinal and peripheral joints. Each chapter reviews anatomy, common pathologies, physical exam (covering range of motion, resting and closed packed positions), and several special tests related to each joint. The author does not comment on the reliability or validity of the tests provided. Section 3 contains 7 chapters. Chapter 14 briefly discusses gait, the muscles involved, and causes of abnormal gait. Chapter 15 reviews the neurological assessment. Muscle, joint, head, and chest pain are covered in chapters 16-19.

This book is well organized. Tables and flow charts are effective and assist well in the presentation of the material. The book includes only basic information and refers the reader to more detailed anatomy, physiology, and medical texts. As intended the book would be suitable as an early reference for those learning the skill of the patient exam.

Krista Carter, BSc PT, BSc HK, RCAMT, CAFCI

Jull G. *Whiplash Injury Recovery: A Self-Management Guide*. Brisbane, Australia: The University of Queensland, 2005. Paperback, 24 pp., ISBN 978-0-9771378-5-5. Available at: <http://optp.com/>.

This booklet has been written as a self-management guide intended for those who have suffered a whiplash injury. The book aims to aid in an individual's recovery from whiplash trauma and is designed to be supplemental to a health professional's care. This self-management guide contains information on whiplash-associated disorders, recovery, and tips to allow the person to participate in their own recovery. Information is provided to assist in neck care during activities of daily living and an exercise program is provided to aid in an individual's recovery. The information and advice in the guide is based on a research project in which the author participated in 2001, titled: *The physiotherapy management of chronic whiplash-associated disorders (WAD II): A randomized clinical trial*.

The book is well organized and easy to follow. It provides practical advice useful for those recovering from whiplash. Clear pictures are provided with step-by-step exercise instruction. It is an excellent research-based reference for individuals to consult to help with their recovery from whiplash injury.

Krista Carter, BSc PT, BSc HK, RCAMT, CAFCI

Leach RE. *The Chiropractic Theories: A Textbook of Scientific Research*. 4th ed. Philadelphia, PA: Lippincott, Williams & Wilkins, 2004.

The stated goals for this book are to provide its readers with a thorough understanding of chiropractic theory, knowledge of research methodology, and the ability to tell good from poor research. The intended audience for this text consists of chiropractic physicians.

This book consists of five sections. Section 1 contains four chapters with information on chiropractic terminology, history, theory, and philosophy. Section 2 consists of three chapters on research and its specific application to chiropractic. Section 3 discusses the vertebral subluxation complex as the central hypothesis in contemporary chiropractic with 11 chapters discussing theory and research related to aspects relevant to this central hypothesis. Section 4 discusses the wellness and social theories as alternative paradigms for chiropractic practice and research. The final section discusses in two chapters the experimental and clinical support for the vertebral subluxation complex hypothesis, disproved and untested chiropractic hypotheses, and avenues for future chiropractic research.

Comparing the first edition I read many years ago with this most current one provides a promising perspective on the development of chiropractic as a profession willing to subject itself to scientific scrutiny in an attempt to optimize patient care. I did note that the information on physical therapy contained in this text is at times inaccurate and limited in perspective to the US but this does not detract from the fact that the author and various qualified contributors provide a comprehensive review of relevant literature and do not shy away from critical review of once firmly held beliefs. This text provides an introduction to research methodology of benefit to any manual medicine clinician. Chiropractic and other manual medicine clinicians will benefit from the clear description of the various theories underlying manipulative interventions that have clearly crossed professional boundaries. Manual medicine clinicians not familiar with chiropractic will find this a valuable text in that it provides such a well-organized review

of chiropractic history, terminology, theories, and research. Researchers will likewise value the operational definitions and the comprehensive review of the literature provided. In summary, this text is a worthwhile addition to the library of chiropractic researchers and clinicians but it will also be of great interest to other clinicians seeking to understand the basic tenets and research status of chiropractic.

Peter A. Huijbregts, PT, DPT, OCS, FAAOMPT, FCAMT

McKenzie R. *Treat Your Own Back*. 8th ed. Raunati Beach, New Zealand: Spinal Publications Ltd., 2006. Paperback, 72 pp., ISBN-10: 0-9582692-3-8. Available at: <http://optp.com/>.

This book is intended as a self-management tool for individuals with mechanical low back pain (LBP). Specifically, it is intended to show individuals how to manage acute episodes and prevent recurrence of mechanical LBP. The book exclusively refers to the McKenzie method of diagnosis and treatment of mechanical LBP.

The book is divided into 9 chapters. Chapter 1 primarily discusses myths about back pain. Chapter 2 explains basic anatomy and function of the spine, normal posture, mechanical back pain, and pain location. A checklist is provided for individuals to determine if their back pain can be successfully self-treated with the McKenzie approach. Chapter 3 discusses common causes of LBP in sitting, standing, lifting, and lying postures and includes information for individuals to self-correct these often-assumed faulty postures. Chapters 4 and 5 outline the McKenzie method and describe the recommended exercise programs for acute episodes, recurrence, and prevention. Chapter 6 details what to do in the event of acute LBP including exercises to perform and activities to avoid. Chapters 7-9 comment on LBP in special situations, medicine, bed rest, and acupuncture and again review exercises to do in the event of acute mechanical LBP.

The book is well organized, has been recently revised, and includes recent references. Many pictures are included within the text to aid in an individual's understanding of the material presented. The book does an excellent job at explaining how common everyday faulty postures may contribute to an individual's symptoms. As intended, the book serves to provide individuals with valuable information to become independent in the management of mechanical LBP using the McKenzie method.

Krista Carter, BSc PT, BSc HK, RCAMT, CAFCI

Pettman E. *Manipulative Thrust Techniques: An Evidence-Based Approach*. Abbotsford, Canada: Aphema Publishing, 2006. Paperback, 230 pp., ISBN 1-59971-873-1, companion DVD. Available at: www.erlpettman.com and erlpettman@shaw.ca

The stated goal of this book is to present a cross-professional view of the history, development, principles, and practice of manipulative therapy and also to encourage an inter-professional dialogue with the aim of providing a more secure environment for both patient and therapist. The stated audience for this book consists of professionals interested in learning physical therapy manipulation techniques.

The book contains 9 chapters. Chapter 1 provides a well-referenced overview of the history of manipulative therapy and an insightful discussion of the principles and practice of manipulative thrust technique with attention to definition, indications, contra-indications, and risks associated with this type of intervention. Chapters 2-9 then discuss thrust techniques specific to the craniovertebral, mid-cervical, uncovertebral, cervicothoracic, thoracic, costovertebral, lumbar, and sacroiliac regions. These chapters all provide succinct descriptions of relevant regional biomechanics, multiple beautiful anatomical line drawings, a great number of clear step-by-step color photographs, and very clear textual descriptions of the steps involved in setting up and performing the various techniques. A companion indexed DVD provides further clearly narrated and visual clarification of the techniques included in this book.

Despite its subtitle, this book does not provide --nor aim to provide-- a comprehensive and systematic review of the relevant literature making it an evidence-informed rather than truly evidence-based book with its emphasis on the author's clinical experience and expertise. However, this in no way devalues this text as it provides the reader with invaluable insights into the clinical reasoning and technical expertise of a clinician that truly epitomizes the