I enjoyed reading this small book of some 160 pages, a publication to reflect the issues emphasized by supporters of ‘The Bone and Joint Decade’ (The BJD) (www.boneandjointdecade.org). Ten authors in seven chapters have responded to the editor’s request to summarize current trends and initiatives and to predict the future direction of health care and research in their own areas of research or clinical interest.

One aim of The BJD is to raise awareness of the growing global burden of musculoskeletal disease and, in the book, a thorough appraisal of burden-of-disease epidemiological data from different global regions is provided by Deborah Symmons who clearly outlines priority areas where health care organizations and planners should focus future efforts. Similarly, in a chapter packed full of statistics that the average rheumatologist is more likely to read about in an article in a broadsheet newspaper or New Scientist, Bruce Browner and Ross Benthien reveal the alarming increase in disease and disability caused by trauma, notably from road traffic accidents, on a global scale. The statistics are staggering. You will stick to the speed limits after reading this or even think of becoming a road safety activist.

Disease-specific therapeutic developments are covered well for rheumatoid arthritis (RA), osteoarthritis (OA) and osteoporosis. Ferdinand Breedveld releases an unbridled dissertation on the future development of a range of cell- and molecule-specific therapeutic strategies for (mainly) the inflammatory arthritides. This contrasts with the ‘near future’ vision of RA management carefully outlined by Piet van Riel. Michael Doherty and Stefan Lohmander summarize why it will be a long and hard task to reduce the burden of OA in societies and Donncha O’Gradaigh with Juliet Compston employ some futuro-surreal thoughts by proposing we might ultimately see a series of age-specific genetic and clinical screening tests and subsequent interventions for fracture risk management of future generations. Finally, Peter Croft gives a thoughtful insight into the difficulties in managing chronic musculoskeletal pain and suggests that in the future there should be a shift in emphasis from the effort in pursuing the precise cause of pain to the practical and pragmatic management of it.

Unfortunately I think the issues in the book and levels on which it is written—hard science to clinical management to biostatistical—are too disparate to allow its publishers and marketers to see where to sell the book most successfully. A postgraduate looking for a research field, a health planner looking for ideas, a clinician looking for a brief review—all may find something in the book, though perhaps not enough for their needs. This is not the seminal publication which everyone who wishes to support The BJD should buy, but if you are offered a copy accept it and dip in . . . Oh and make sure you read the bit about road traffic accident statistics. It’s the least you can do!

G. P. R. Clunie