**Book Reviews**

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A physician confronted with parents who have read the new book ‘Myositis and you’ by Lisa Rider *et al.* will not need long to explain about the many aspects of juvenile dermatomyositis (JDM). JDM, a crippling but rare autoimmune disease, is not well known by the general public and even in a general rheumatology practice the disease is relatively rare. Good educational information about the disease has limited availability, and is not always correct. The book ‘Myositis and you’ more than fills this void. The book is divided into sections dealing with the various aspects of the disease, which makes it easy to use. Next to detailed medical information, the book offers support and advice on how to cope with JDM in daily life, for example, there are sections on ‘hopes of recovery’ and ‘resources and opportunities’. This type of information is directly translatable to other chronic diseases in childhood. The book is therefore of great interest, not only for patients and their families, but also for health care providers and doctors. There is a downside to this, of course. Some of the medical information is very detailed, and although the information is essential for patients and their families, too much detailed information can cause confusion. Treatment of a complex disease such as JDM is not black and white in daily practice. The authors therefore rightly emphasize some caution in how to use this book. Still, at some point it may be difficult for people without medical education to oversee subtleties and minor differences among doctors in handling JDM. Having said this, the authors have to be commended for bringing together in one volume many pieces of the JDM puzzle. ‘Myositis and you’ more than serves its purpose, namely informing and thus empowering children with JDM and their families.

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This timely companion to the heralded *Rheumatology* 3rd edition offers expert insights into the cause, detection and therapy of osteoporosis and the osteoporosis of rheumatic diseases. The book covers most, but not all, areas of osteoporosis and in addition, focuses specifically on bone disorders in rheumatic diseases. It brings together updated reviews by well-known experts in the field addressing innovations in risk assessment, use and interpretation of bone densitometry, biochemical markers, osteoporosis in men and in glucocorticosteroid and transplantation-induced osteoporosis, advances in pharmacotherapy such as bisphosphonates, anabolic agents as PTH analogues and cost-effectiveness of intervention for the prevention and treatment of osteoporosis.

Although this book is launched on the cover as ‘the only state-of-the-art, comprehensive text on osteoporosis’ with special attention for rheumatology and orthopaedics, I am missing a critical note on a few important aspects of interest for rheumatologists and orthopaedic surgeons. OA, the most common rheumatic disorder is not mentioned at all, despite the well-known inverse relationship between OA and osteoporosis. The pathophysiology behind these two common diseases might elucidate new mechanisms of how bone and cartilage react during stress and ageing. A clinical chapter on differential diagnosis is lacking. Osteoporosis can be the first symptom of a serious underlying disease as myeloma, metastasis, rachitisme, osteogenesis imperfecta, Paget’s disease and reflex sympathetic dystrophy.

Some pitfalls in Epidemiological XR studies for osteoporosis using the Vertebral Deformity Index (VDI) are not critically analysed. VDI is not specific for osteoporosis, VDI is also altered in Schuerman’s disease, OA of the thoracic spine and scoliosis; all frequent diseases not associated with osteoporosis. This might explain the high prevalence in European epidemiological studies of VDI (30%) in males before age 50.

I am also missing a critical review of what is known about the socioeconomic effects of massive treatment programmes as disphosphonates in the last 10 yrs on the number of fractures in society. The results of industry-controlled trials do not reflect uncontrolled prescription of a potent drug. Why is compliance so low and the long-term results of fracture prevention so poor?

Also, in this book, there is too much emphasis on bone measurements, *t*-scores—2.5 and biochemical tracers, and too little on what should be treated preventively even when there is no measurement available. The important risk factors as a fragility fracture before age 50, family history of spine–hip fracture, long-term corticosteroid treatment irrespective of any dosage, low body weight (BMI) and early menopause and the cumulation of two or more are mentioned in this volume, but not framed as a must for preventative therapy to the decision maker in clinical practice. A technical ‘tunnel’ view should be replaced by a global ‘clinical landscape’ view with the hope that compliance and fracture prevention will be measurably better. One should not treat a *t*-score, X-ray or laboratory test for 10–20 yrs but prevent a person at high risk for a catastrophic fragility fracture of the spine or hip. The twenty blank pages at the end of the book could have been used to summarize the essential messages and clear clinical guidance for prevention and treatment of fragility fractures.

Despite the above critical remarks, this book can be an important tool for the rheumatologist and orthopedic surgeon to get an up-to-date view of osteoporosis with ample basic science and clinically relevant information.

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