This is an author produced version of a paper published in:

*Microsurgery*

Cronfa URL for this paper:
http://cronfa.swan.ac.uk/Record/cronfa19896

---

**Paper:**


http://dx.doi.org/10.1002/micr.20418

---

This article is brought to you by Swansea University. Any person downloading material is agreeing to abide by the terms of the repository licence. Authors are personally responsible for adhering to publisher restrictions or conditions. When uploading content they are required to comply with their publisher agreement and the SHERPA RoMEO database to judge whether or not it is copyright safe to add this version of the paper to this repository.

http://www.swansea.ac.uk/iss/researchsupport/cronfa-support/
Dear Editor,

We read with interest the book review on “Essentials of Plastic Surgery” by Dr Lineweaver, the editor of this journal.1 First, we firmly believe Dr Jeffrey Janis is to be congratulated on editing this book, which has been welcomed by many of our colleagues in the United Kingdom. The portability and clear, concise language combined with clear illustrations makes it very useful reading when preparing for examinations, operating sessions, and clinics.

The insightful comments of Dr Lineweaver regarding “page allocations” highlight the changing face of plastic surgery in the new millennia. This new “face,” unsurprisingly seems to be particularly apparent in the resource-rich countries of the Western World, perpetrated by the media and financial renumeration. The page allocations are probably due in part to the perceived relative thirst for knowledge that plastic surgery residents in the USA have, and the extent of enthusiasm that contributing authors had to write such chapters. It always seems to be easier to get authors to write chapters on breast augmentation rather than pressure sore management. It should be noted that many of the best chapters are written by Dr Janis himself, and the amount of time and effort imparted is to be lauded.

Plastic surgery has certainly advanced immeasurably since the early descriptions of soft tissue surgery in the Edwin Smith Papyrus and Sushruta’s famed efforts in the reconstruction of amputated noses circa 600 BC.2 It is interesting to note that concerns about the increasing interest in cosmetic surgery are not new: both Gilles and Blair were perturbed by the actions of contemporary plastic surgery colleagues.3 Blair personally insisted on being called a general surgeon.4 As a group we should be proud of the work of Alexis Carrel who laid the framework for vascular anastomosis,5 allowing us to enter the era of complex autologous microsurgical reconstruction, and more recently the era of composite tissue allotransplantation. Because of the specialty of plastic surgery having such a unique diversity, transcending the anatomic boundaries and techniques that limit other specialties, no general plastic surgery handbook is going to please everybody all of the time. I can reassure Dr Lineweaver that in the UK, at least for the time being, the Trainees Microsurgery, Upper Limb Trauma, and General Reconstructive Surgery chapters are much more battered and highlighted. All 31 pages of our Nonoperative Facial Rejuvenation chapters are pristine.

REFERENCES

SCOTT A. CAIRNS, B.M., M.R.C.S.
IAN S. WHITAKER, B.A. (Hons), M.A. Cantab, M.R.C.S.*
Welsh Centre for Burns and Plastic Surgery
Morriston Hospital, Swansea, UK

*Correspondence to: Iain S. Whitaker, B.A. (Hons), M.A. Cantab, M.R.C.S., Welsh Centre for Burns and Plastic Surgery, Morriston Hospital, Swansea, UK. E-mail: iainwhitaker@fastmail.fm
Received 27 August 2007; Accepted 27 August 2007
Published online 11 September 2007 in Wiley InterScience (www.interscience.wiley.com). DOI 10.1002/micr.20418

© 2007 Wiley-Liss, Inc.