BOOK REVIEWS


It is a truism of evidence based medicine that large textbooks are out of date even before they are published. This thought was foremost in my mind when I reviewed this large volume, particularly when I noted that there was a six and seven year gap between the first, second, and third editions. I am glad to relate that this book proves that the day of the large medical tome is not yet past.

The editors intended this book to provide in depth knowledge of the many diagnostic and therapeutic procedures undertaken in the emergency department. They have endeavoured to avoid the cookbook presentation of procedures by protocol as seen in the Advanced Trauma Life Support and other acute life support manuals. Instead each procedure is discussed in detail with regard to indications, contraindications, complications, and technique. They apologise that they have not covered every conceivable procedure, personally I could not think of anything they have left out.

This volume is large and well presented. The numerous line illustrations are of a very high standard. The black and white photographs vary in quality from very good to fair, the occasional photograph being spoilt by being slightly out of focus. The order of the chapters, appropriately enough for a book dealing with emergency medicine, roughly follows “ABC” principles, the first three of the book’s 13 sections dealing with respiratory, cardiac, and vascular techniques respectively. Just over a third of the book is taken up by these three sections. The chapters have a common structure of background, indications, contraindications, description of the procedure, complications, and conclusion. The text in general is well written, clear and profoundly practical, written as it is by seasoned veterans of American emergency departments.

The procedures covered in this book range from the commonly performed such as intubation and rapid sequence induction to procedures which some of us will probably never see, such as reduction of globe luxation and the sedative hypnotic interview. This text allows the physician to look more in depth at procedures he sees regularly in the emergency department and serves as a reference for the rarities that occur from time to time. No diagnostic or therapeutic manoeuvre is considered too mundane or too rare for inclusion. The authors have by and large avoided recommending or condemning each technique, instead they allow the reader to make up their own minds by stating well referenced complication rates and contraindications where relevant. This approach is refreshing for those of us who would like to know more than just whether a procedure is “good” or “bad”.

Given the fact that there are 97 contributors it is not surprising that there is some variation in quality between different chapters. However, in general the standard is very good. Prospective readers of this text should be warned that descriptions of certain procedures follow American practice and use American nomenclature. This emphasis, however, does not detract too much from its potential usefulness as a reference for UK emergency departments.

In summary—this is a high quality, well written, and exhaustively researched textbook which would make a worthwhile addition to any emergency department’s library. The task of editing such a text must have been monumental and this may explain the long gaps between successive editions; I hope that we do not have to wait so long for the next version.

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This little book is relevant to a much broader readership than the title implies. It consists of 262 problem based questions with explanatory answers overhead. The questions are a random selection of essay-type, multiple choice, and “slides” covering diverse emergency medicine, trauma, and critical care problems not confined to surgical cardiology. The authors are physicians and surgeons from Canada and the USA but I did not find much that was not applicable to UK practice.

The book is primarily aimed at those involved in the intensive care of cardiothoracic patients, especially trainees preparing for postgraduate qualifications. There are therefore some questions relating to cardiac physiology and pharmacology as well as catheter data and clinical problems concerning congenital and acquired heart disease and the practicalities of cardiopulmonary bypass. The majority of questions are less esoteric, however, and include material of interest to the general intensivist such as pulmonary mechanics, the physiology of ventilation, and the interpretation of monitored data. Some of the contents will also interest practitioners in emergency medicine. There are numerous questions on blunt and penetrating trauma, burns cases and toxicology scenarios.

I found the book very accessible and highly educational. I liked the rather haphazard style of the questions, text based mixed with illustration based and not compartmentalised by subject matter. While this does not lend itself to comprehensive coverage of a particular syllabus it does make the book very easy to pick up during the occasional quiet moment for a bit of ad hoc CME. It is also an excellent teaching aid on the intensive care unit, the answers are clear and concise without being too superficial.

The illustrations, an essential component of a book like this one, are generally well reproduced. The clinical photographs are quite good and the computed tomograms and digital subtraction angiography scans are excellent. By contrast the plain radiographs are universally poor, this is of course the rule rather than the exception in most publications containing x rays. This was the only real criticism I had after reading this small volume. I think that the authors have achieved their aim in producing an accessible collection of problem orientated self assessment questions covering the broad spectrum of critical care medicine. The book will definitely appeal to trainees in critical care medicine and will be a useful study aid for the new diploma in intensive care medicine. There are probably just about enough immediate care questions to interest the accident and emergency practitioner also.

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