

BOOK REVIEWS

Thoracoscopy for Physicians: A Practical Guide

Edited by D.R. Buchanan, E. Neville

Published by Arnold, London

Pages: 166. Price: £24.99, €37.56. ISBN 0-340-74211-9

This is the first book published in the UK on the topic of what is otherwise known as “medical thoracoscopy” or “pleuroscopy”. A. Matthews from Portsmouth is given the credit for advocating this technique in the UK, and the authors of this contribution have been trained by him.

The book concentrates on the currently leading indications for “thoracoscopy for physicians”, and on its diagnostic and therapeutic use in pleural effusions, including early empyema.

More than one-third of the book is devoted to the evaluation of the undiagnosed pleural effusion, to the differential diagnosis of pleural effusions, and to the different possibilities of investigating the pleural fluid. Furthermore, it describes the value of different imaging techniques and of closed pleural biopsy with or without image-guidance.

One chapter deals with the technique of medical thoracoscopy, which is performed in local anaesthesia, favouring the single-puncture technique. The authors apparently prefer the supine position with the patient on their back, as well as the midaxillary line at the fourth or fifth interspace. However, they admit that the lateral decubitus position (which is preferred by most pleuroscopists) often allows improved visualisation of the whole pleural cavity.

Further chapters describe different pleurodesis methods, including thoracoscopic talc poudrage, possible complications and their management, as well as a clinical risk assessment which intends to reduce the risk of medical thoracoscopy. Each chapter is followed by a list of the latest references and recommendations for further reading.

In addition, chapters on “Current practice in video-assisted thoracic surgery” and on “Pathological findings” are included, although one would like more and technically better endoscopic photos of different typical entities.

This book describes the safety and ease of medical thoracoscopy, it is indeed a practical guide, and will certainly contribute to the more widespread application of the technique in the UK and some other parts of the world, where it is under-used at the moment. The book can be highly recommended to pulmonary physicians in training and clinical practice.

R. Loddenkemper

Berlin, Germany

Pulmonary Rehabilitation: An Interdisciplinary Approach

Edited by R. Garrod

Published by WHURR Pub, London

Pages: 206. Price: £20.25 (special price for ERS members), €29.13. ISBN 1-86-156-421-X

Up until the 1980s, pulmonary rehabilitation was considered to be, at best, slightly more than psychotherapy or, at worst, alternative or complementary medicine. At that time, it was almost a punishment to be chosen to deal with this area by the head of your department. Nevertheless, a few years later, as in all good novels, the ugly duck became a beautiful swan and the frog became a prince. A prince with his fairy. One such “pulmonary rehabilitation fairy” is Rachel Garrod, who works with one of the most prestigious teams in pulmonology. Rachel is a rare example of the concept that, whatever your role, medical doctor or physiotherapist, if you are passionate about a topic (as she confesses in the preface of the book), no goal will be precluded.

When I was asked by the *European Respiratory Journal* to review this book, my first feeling was “Oh my God, not another book on pulmonary rehabilitation” (especially as I had just finished another one). However, I tried to fulfil my commitment and found that I actually enjoyed it.

This small comprehensive book covers the advancement of pulmonary rehabilitation and lets us look to the future in a light of modernity; it is nothing to do with alternative medicine. Every statement in the book is supported, or tries to be, by evidence-based medicine. In actual fact, there is a range of material to work with. If you search for “pulmonary rehabilitation” in titles using Medline,

you will find 108 references in the period 1966–1981 (4.4·yr⁻¹) and 413 in 1982–2004 (18.7·yr⁻¹). This shows that there is a growing interest in the field of pulmonary rehabilitation and this book helps to satisfy it.

A series of well-known and esteemed international authors contributed to this book and approached the tasks an operator in the field usually faces: the selection of patients, exercise prescription and training, physiological evaluation, single components of pulmonary rehabilitation programmes, cost-effectiveness, and future perspectives. Each issue is dealt with by authors who have actually worked in that specific field and not by those who have only read the papers.

If I could find one topic that was lacking, I would say it was the physiotherapeutic approach in the intensive care unit, a boundary that is crossed more and more often in the practical management of patients with respiratory failure.

In conclusion, there is something to learn from reading this book. I would recommend it to those who want to be introduced to pulmonary rehabilitation.

N. Ambrosino

Pisa, Italy