
What condition was barely acknowledged when most senior registrars – let alone consultants – were at medical school, yet affects up to 4% of the male and 2% of the female population?

The recognition of the significance of obstructive sleep apnoea (OSA) and the increased availability of sleep monitoring equipment has produced an explosion of new information on sleep disordered breathing. When Saunders and Sullivan edited the first edition of this book in 1984, continuous positive airway pressure treatment (CPAP) for OSA had been used for just three years. The current edition has ballooned from 15 to 29 chapters with the number of contributors (a balanced Australasian/European/Transatlantic mix) increasing from 29 to 57. The new areas covered include good reviews of the epidemiology of sleep disordered breathing, sleep and breathing in the elderly, and endocrine and metabolic disturbances in OSA. The editors have encouraged speculative contributions on current hot topics such as apnoea and sudden death syndrome, familial influences in sleep apnoea, and the interaction between vascular disease and OSA – which are genuinely provocative and exciting. As before, the first part of the book is devoted to the neurobiology of sleep, the wakefulness stimulus, and the influence of sleep on upper airway function and the thoracic pump. All these sections are expanded since the first edition, although the Boolean perspective applied to the neurobiology of REM sleep left this reviewer puzzled.

Undoubtedly, a sizeable portion of the book is devoted to the pathophysiology of OSA and its treatment. It is interesting that basic ideas on the pathogenesis of OSA have not changed over the last decade, but they have been fleshed out. Controversially, there is little mention of the role of surgery for snoring, and the absence of an ENT surgeon as a contributor is surely an omission. Guilleminault and colleagues provide a useful overview of the mortality and morbidity of OSA, and Dinges’ group have added a thoughtful chapter on daytime somnolence and compliance with CPAP. Perhaps the next edition will be able to disentangle the effects of limited CPAP compliance on mortality, and also examine the massive socioeconomic impact of sleep disordered breathing. In the meantime, at about a quarter of the cost of a CPAP machine, this book is an invaluable resource for any sleep laboratory. – AKS


This book is intended for the use of clinicians who treat those with asthma. It covers the condition as it affects both children and adults. In the main the format is traditional with well referenced comprehensive chapters on pathogenesis, morphology, and physiology, but a rather short section on epidemiology and limited discussion on the possible reasons for the increasing prevalence. All but a handful of the chapters are written by North Americans but an attempt is made to “internationalise” the content. A comprehensive section on pharmacological treatment broadly follows the International Consensus Report and there are additional chapters on treatment in Japan and Europe. The section on immunotherapy gives a balanced view of the current situation with regard to that treatment. There is a comprehensive review of the subject of infections and asthma, and a good chapter on aspirin and food additives.

The book differs from some of its competitors in the breadth of its chapter headings. Some are peculiarly repetitive – for example, those on air pollution and asthma and pregnancy – and others rather oddly titled – for example, Use of prospective disease management and Unconventional therapy – but the range of ground covered in chapters on anaesthetic considerations, sport, asthma in schools, and legal issues is excellent if sometimes rather country-specific.

Readers wishing to purchase a multi author text book covering all aspects of asthma are currently spoilt for choice, but this book certainly merits consideration. – MRP


This book is written for asthma sufferers and their carers. It was first published in Canada in 1991 and has been revised and updated for UK publication this year. Despite this, a number of elements specific to Canada remain such as the advocacy of the open mouth method for use of a metered dose inhaler (not the usual method recommended in the UK), and the photographs of the large volume spacer and nebuliser, neither of which are seen in the UK. These are minor points, but this book is aimed at the UK public and one would expect them to be shown what they are likely to receive!

However, the book is of a sensible length and is attractive to the eye with good quality figures and photographs, many taken from the Allen & Hanburys set of teaching slides. The overall tenor of the text is good, the information is sensible, and the authors address the questions that patients ask us in clinical. I have a number of minor carps (such as skin tests causing a “blister,” exercise induced symptoms always being present in asthma, and the statement that no convincing evidence exists that individual air pollutants are associated with worsening asthma), but these do not detract from the overall impression that this is a useful book which has the benefit of being written by authors who are experts in the field but who have written with the common touch. So many other lay books on asthma are written by individuals with a particular slant (particularly the economics minded) and this book is well balanced. This should not really be regarded as an alternative to chest clinic education and, as such, I hope I do not need to recommend it to my patients unless they ask for a larger text. This is, however, an excellent text (very good value at £9.95) which we as chest physicians should be happy to see available in libraries and bookshops for those who need to read and inform themselves before tackling their own doctor! – JGA


This is the ultimate way of making it easy for distracted clinicians to keep up with the literature, though ignorance of basic science will not be helped. A comprehensive range of 18 topics is covered. Each includes a sensibly restrained “recent advances” review and a series of abstracted papers with expert commentaries.

The North American influence is not a problem. Non-American work is recognised fairly – for example, a Southampton author is one of very few to have three papers abstracted. The reviews are all worth reading. When the authors struggle to find much in the way of real advance they compensate with enthusing but rather beautiful writing (assessment of respiratory function). The editors have not quite maintained the discipline of being up to the minute in that none of the abstracted papers were published after 1992, and only a handful of 1993 references are cited in the reviews. The balance is generally good – the longest chapters being those on asthma and chronic obstructive pulmonary disease – yet somehow the chapter on sleep apnoea manages only to abstract one paper, and that on pleural diseases only three. The cogent commentaries on the abstracts include some gems, particularly those written by the senior editor.

Regular work in the library must be the ideal, but those who fall short of that will find this book useful. It would be an excellent starting point for a new registrar, and might well get thumbed better than many other volumes in the departmental library. It may not be cheap for a book which will not be topical for long, but it is of high quality. – CT