BOOK NOTICES


This is a practical guide to the use of assisted ventilation at home. After reviewing the indications for ventilation and the patient groups likely to benefit from it, the different techniques available and the advantages and disadvantages of each are comprehensively discussed. Blow by blow accounts of how to set up a patient on commonly used ventilators available should enable even complete novices to set the ventilator controls appropriately. A trouble-shooting section would have been helpful – in particular, what to check when the ventilator alarms sound, the most likely sources of leaks when the obvious ones have been excluded, etc. Although there are comprehensive descriptions of each ventilator there is little to help the person trying to choose which one to buy. There is a section on troubleshooting and critical comparison between machines in terms of maximum pressure and volume outputs, particular advantages and disadvantages, and of relative cost would have been useful. The distinction between positive pressure ventilators suitable for nasal and tracheotomy ventilation is a little arbitrary and may have been best dealt with in a single chapter. The chapter on the transition from hospital to home highlights the complexities and challenges of sending patients home with high technology equipment and is a useful reminder of a number of important practical considerations. There is a short chapter on assisted ventilation in children and one on less commonly used techniques such as diaphragm pacing and rocking beds.

This is a useful practical guide, particularly for those likely to have "hands-on" responsibility for patients with chronic respiratory failure. Succinct resumes in table form are a particular feature of the book and are helpful aide-memoires. Those who want to know more about the theoretical and scientific basis for non-invasive ventilation during sleep and the likely mechanisms for improvement seen would have to look elsewhere. – ME

A standardised system of abbreviations and diagrams has been adopted. Referencing is good and indexing adequate.

Chapters are included on mast cell development, heterogeneity, signal transmission pathways, the ultrastructure of degranulation, the high affinity IgE receptor, non-immunological triggers of secretion, mediators, the pharmacology of cell responses, and cutaneous basophil hyper-sensitivity. There are eight pages on mast cells and the lung (seven pages of reference) and 14 on the gastrointestinal tract (with five pages of references), but nothing on the skin, nose, or central nervous system. This may reflect the state of the development of the series to date. The chapter on the lung deals only with asthma and does not mention interstitial lung disease or lung cancer at all. I found no reference to apoposis.

Each chapter is written by a scientist working in the field and the standard of writing is good, though a little variable. Some chapters could have had more diagrams or tables. Editing has been through with remarkably little overlap. It is a useful monograph which should find a place on the shelves of anyone teaching or researching in the field as a valuable source. – FWI


This is the transcript of an update meeting held in the Netherlands in June 1993. Despite its title the book addresses current thinking across the whole spectrum of asthma and COPD. Although there is a Dutch bias there are useful international contributions. The book is divided into five sections covering pathology, cell biology, natural history/epidemiology, treatment, and future possibilities in both asthma and COPD. Most of the chapters are clearly written and well referenced. I found the section on pathology contained much of interest for the clinician both in terms of new information and in ideas to stimulate further thought. Other chapters such as the one on signal transduction left me floundering. The section on the natural history and epidemiology of asthma and COPD is perhaps the best section of the book. Dr Britton’s account of the 1866 and 1970 UK birth studies cohort at age 16 will interest anyone concerned at the increased prevalence of asthma. The treatment section was a little disappointing, perhaps because there are still so few answers to the questions posed. Readers will be disappointed that the chapter on the National Institute of Health smoking intervention study which appears in the contents has been omitted (presumably so as not to prejudice its prior publication in the USA).

Many researchers, expert in one area only, will find the book an excellent update to the other areas and will appreciate the referencing. Clinicians wanting to understand what is happening in asthma and COPD research will find this a useful book to dip into. However, the small dense type and lack of figures makes it difficult to read more than one chapter at a time without falling asleep. It is therefore a useful book for the hospital library rather than for the average clinician’s book shelf. – MGP


This book describes the patient’s response to infection (17 chapters), individual or related respiratory pathogens (17 chapters), and antibiotic therapy (3 chapters). The best clinical chapters deal with pneumonia in the elderly, a commonsense approach to the diagnosis of respiratory infections in the immunocompromised patient with HIV-related infections, and a good discussion of cystic fibrosis. The lack of distinction between bronchiectasis and chronic bronchitis was curious. In the section dealing with individual pathogens the chapter on Legionella spp is noticeable for its informed discussion, while the radiographs of pneumonia due to Gram positive cocci were excellent. The chapter on non-tuberculous mycobacteria deserves mention for its clarity and perceptive overview. However, specific advice – for example, empirical treatment of pneumonia in the community and the hospital – is diffusely given. The preface clearly states the editor’s prejudice regarding the value of the new “biotechnology and molecular genetic research”. In consequence, basic mechanisms of host defence, new diagnostic approaches, and a clearer understanding of the pathogenesis of respiratory infections at the molecular level do not receive the attention they deserve. Many of the chapters are peculiarly didactic rather than critical in their evaluation of the literature and have a strong North American bias – for example, the diagnosis of tuberculosis. While some of the writing strives to match the quality of Osler’s clinical observations, the ability to convey new science with the flair and urgency of Sir Peter Medawar or the Huxleys is sorely lacking. – GB


This book aims to provide an up to date account of mast cell and basophil biology which is certainly overdue. It succeeds with a few minor omissions. It is one of a series of comprehensive authoritative pharmacological reviews concerning the inflammatory response and the immune system with a distinguished international list of contributors.