

Head and Neck Cancer: Management and Reconstruction, 2nd edn

E M Genden
Thieme, 2019
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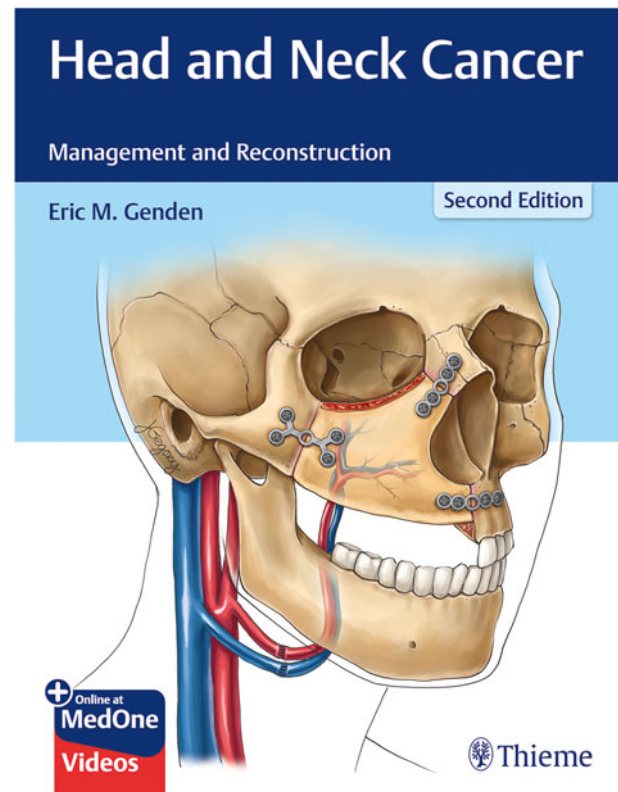
This is the second edition of Genden's *Head and Neck Cancer* textbook, newly published by Thieme in 2019. It is a revised and updated version, amalgamating two previous publications, both co-edited by Professor Genden; namely, *Head and Neck Cancer: An Evidence-Based Team Approach*, published in 2008, and *Reconstruction of the Head and Neck: A Defect-Orientated Approach*, published in 2012. This book, as described in the preface, is 'designed as a thorough clinical review for the practicing surgeon, surgeon in training, and physician extenders who desire a single comprehensive resource, but one that is focused on the management and reconstruction of patients with head and neck disease'.

In a total of 30 chapters, over 441 pages are presented covering the head and neck. Chapters 1–13 are site-specific to the oral/oropharyngeal subsite (40 per cent of the book), chapters 14–16 to the laryngopharynx, chapter 17 to the thyroid, chapters 18–19 to the salivary glands (mainly parotid gland), chapters 20–21 to the nasal cavity and anterior skull base, chapter 22 to the nasopharynx, and chapters 23–25 to skin of the face, neck and scalp. Chapter 28 is a review of drug developments in the twenty-first century (e.g. monoclonal antibodies and immunotherapy). The remaining four chapters are best described as a 'potpourri' of topics, with chapters on the patient with the unknown primary, patient surveillance, the patient with a vessel-depleted neck, and how to minimise wound complications following salvage surgery. Access to MedOne (Thieme's online platform) is also included, which allows viewing of the e-book text, and of nine video clips on topics such as neck dissection, robotic surgery of the oropharynx, endonasal endoscopy, surgery and reconstruction, and salvage surgery.

Seventy-six contributing authors are listed. The majority of these (67 out of 76; 88 per cent) are from the USA, with two chapters contributed from Toronto, Canada, and one chapter from Hong Kong, China. Sadly, one listed contributor has not been cited in any chapter! Several of the listed authors contributed more than once (10 authors) and one chapter lists six authors. Eight of the topics previously published have been updated by the same authors. It is heartening to see that the spelling of a hypopharyngeal subsite escaped editorial medical convention, allowing the inclusion of both the US and European spelling of pyriform and piriform sinus in the same chapter!

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The chapters have been broadly structured, using many figures (anatomy, line drawings, radiology, surgical specimens and histopathology) and tables (disease staging, outcome data on survival). The addition of 'editor's notes' throughout each chapter is innovative; these highlight important points and considerations. Figure 2.1 seems to have lost its appropriate illustration, which has been duplicated in Figure 3.1 or else the legend is incorrect. The addition of clinical cases could have improved the educational component for the novice reader, if such had been mandated in all of the chapters. Clinical cases, when they were presented, varied from a single case to four cases in several chapters, but they only appeared in less than half (14 out of 30). There is no chapter on the ear and lateral skull – possibly considered to be a neuro-otological surgical disease?

All chapters are extensively referenced; 4 chapters – on the lateral pharynx and soft palate (chapter 7), hypopharynx (chapter 14), nasal cavity and anterior skull base (chapter 20), nasopharynx (chapter 22), and skin of the head, face and neck (chapter 23) – each exceed 100 citations. The number of references in the other chapters ranged between 12 and 95, with a median of 42 references, with almost all relying heavily on 'historical material'. The most up-to-date references cited were from the 2015/2016 era, which is disappointing, and may reflect a delay between contributors' late delivery and the processing by the publisher. It was notable that chapter 1 included the eighth edition (2017) of the American Joint Committee on Cancer staging of oral cancer, and the salivary gland chapter cited the 2005 World Health Organization

histological classification of salivary gland tumours, rather than the more recent version of 2017. Several of the chapters that used tables on malignant tumour staging did not specify to which edition of the tumour–node–metastasis staging system they referred. There was duplication of text and references between chapters on specific subsite ‘general management’ and surgical and reconstructive management. This may have arisen because of chapter amalgamation from the previous publications, which employed ‘old’ and ‘new’ contributors, and perhaps some lack of more definitive instructions given to all authors.

The reconstruction chapters in general were disappointing, in that the options described more a ‘shopping list’, rather than discussing the advantages and disadvantages of each technique, and advocating that reconstructive surgeons should choose the most appropriate method of repair to optimise functional outcome. Some of the chapters seemed ‘old’, and should either be deleted or updated if a third edition is contemplated.

This book’s market is mainly in North America, reflecting the philosophy and practice of the majority of contributors. There has been duplication of information across several chapters. Almost all the chapters have been written as ‘stand-alone’ texts, rather than developing a theme for surgical trainees. This theme should be patients who present with head and neck cancer; while the intent of treatment is cure, most if not all patients, following treatment, will require short- and long-term rehabilitation of their daily functions, breathing, swallowing and voice, as well as cosmesis. Head and neck reconstructive surgery, when undertaken, should be tailored to preserving and/or restoring head and neck functions and cosmesis.

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