

## Comprehensive Management of Vestibular Schwannoma

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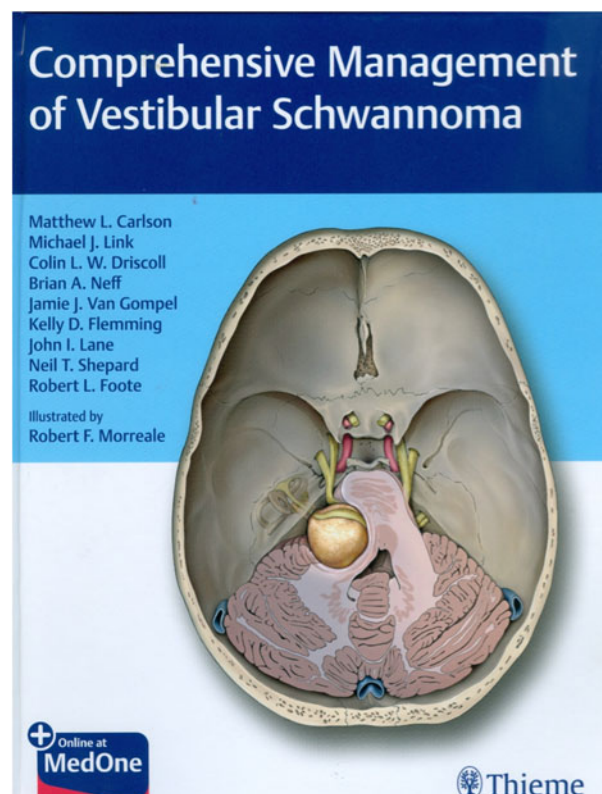
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Book publishers are professionals who know what will appeal and prove a commercial success. As a result, I rarely fail to find something good to say in a review, even when occasionally a book might only be of interest to a small minority of our readers. But, when I do then see what must be a strong contender for 'the book of the year', I must equally avoid too many superlatives. This new publication is superb.

I did honestly struggle to imagine that there was enough on this topic to fill a book of this size. As a trainee of the 1970s and 1980s, I simply 'knew' that what we then called acoustic neuromas invariably grew, required early surgery and were unresponsive to radiotherapy, which merely turned the brainstem to mush and made salvage surgery a nightmare. Diagnosis was based on obsolete audiometry, seeking tone decay and lack of recruitment, and on very blurred tomograms of dyes or even gas in the cerebellopontine angle. Richard Ramsden's opening chapter on the history is so evocative of that era. This book does show just how far we have come since pioneering otologists first introduced microsurgery into management.

This is a Thieme publication, so we know the style and quality of presentation, of print, of illustration (colour operative views, diagrams and monochrome imaging, printed to a high definition and on every page) and online content. The book is entitled 'Comprehensive' and we do get 84 chapter headings to support that claim. For further example, there are no fewer than 11 chapters on radiation therapy and 7 on neurofibromatosis type II. Comprehensive also means sections devoted to diagnosis (with a whole chapter on emerging imaging techniques), therapy, complications, rehabilitation and so on. The therapy section includes 24 chapters on microsurgery, even including an endoscopic approach down the external canal and through the promontory, which was new to me!

A very thought-provoking section is entitled 'Controversial or Challenging Aspects of Care'. This is clever in its choice of chapter topics, such as the small asymptomatic tumour or that arising in the only hearing ear. My review should be more than



just a simple list of chapter titles, but I cannot resist highlighting 'Patient Counselling Following Diagnosis of...' or 'Training in...' or 'Quality of Life Outcomes in...'. Seven chapters on facial nerve rehabilitation one might expect, but this book adds on auditory and vestibular rehabilitation, post-treatment trigeminal neuralgia, and headache, each meriting a full chapter.

This is a book with obvious appeal to neurosurgeons at any level of experience, and to those either training or long-established in neurotology. It is a 'must' though for any post-graduate library serving trainees in our field, as the onus is on all of us to recognise the lesion at presentation and it remains a very 'hot' examination topic. This is the best book, even by the standards of this publisher, in a very long time. That is one superlative I will allow myself.

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