## LARYNGEAL PHYSIOLOGY FOR THE SURGEON AND CLINICIAN, 2nd edn

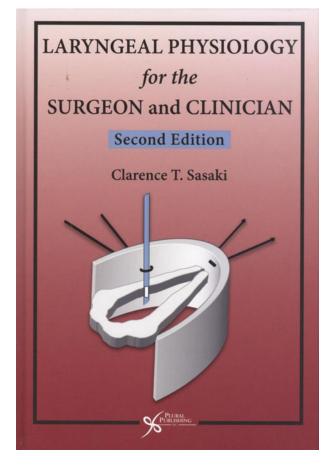
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I gather the first edition appeared in 2007, but it is remarkable to see this, the second, anticipating our year's end by at least six months. The years go by too rapidly as it is. The Introduction and Forewords do not specify what is new, so I resorted to seeing where I might find references post 2007. We do find some, in such chapters as 'Innervation of the Larynx', 'The Motor Plexus' and 'Influence of Core Body Temperature'.

It was unfortunate that the very first page I opened showed a hazy chest X-ray which 'reveals a right lower lobe infiltrate'. In practice, Figure 7–5 shows a left pleural effusion. Mind you, the same picture then appears as Figure 6–5 with a different label. That curious device on the cover illustration is a pressure transducer in the larynx. It also appears as Figure 4–4 and yet again as Figure 13–1.

We must forgive the occasional error and concentrate on content. The opening chapter on phylogeny and function presented a promising first page. Disappointment then followed, as this interesting topic merited little more attention. The whole chapter comprises one and a half pages of text. 'Structure and Function' proved better, but again was superficial and brief. By the end of the third chapter, I could not help but notice the illustrations' and references' reliance on the textbook *Otolaryngology* by G English. I was beginning to doubt by now.

Finally, however, we do get to see original basic science research from this author, in chapters based on published research, going back to the late 1970s. The impression browsing through the book is of many a nerve action potential, tables, graphs and innervations diagrams, mostly reproduced from *The Annals* 



of Otology, Rhinology, and Laryngology. Most chapters carry a relatively simple clinical vignette in a text box, but the emphasis is on the basic sciences, inevitably.

This is a small and slim book (106 pages of text), drawing together the author's already published work into a single volume. It could appeal to its target audience, subspecialist laryngologists and anaesthetists, as the title suggests.

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