OTOLARYNGOLOGY FOR THE PEDIATRICIAN

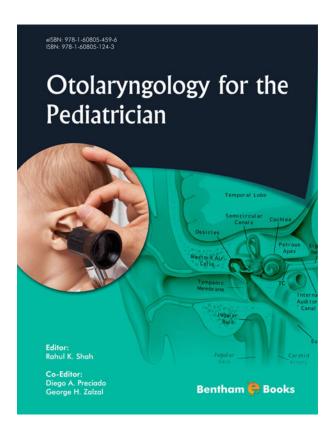
R K Shah, ed Bentham Books, 2013 ISBN 978-1-60805-124-3 eISBN 978-1-60805-459-6 pp 203 Price \$US 49.00 (PDF download) \$US 85.00 (print on demand) \$US 109.00 (print on demand and PDF)

We have all seen it. Driving through town, how often does one encounter the teenager, with a body mass index twice her age, pushing her baby buggy out into the traffic, whilst concentrating on texting on something that Captain Kirk might have used? In this age of information technology, I am a dinosaur, from the Triassic, not even the Cretaceous, period. I will take my Kindle on holiday, but, if a book is good enough, I will give up and buy the hardback. Max Hasting's Catastrophe and Mercer's account of the 1815 Waterloo Campaign are two examples, for this week alone. This book proves to be very good value indeed, even if you do chose the 'print on demand' option (see above).

Electronic publication certainly has its advantages, if only for preservation of the forests. Thanks to the generous publishers, I have 6 Mb of text instantly to hand, with some excellent content. However, a few hours later, staring at this computer monitor, I am developing vertical nystagmus, as I track backwards and forwards, and would love to have this as a hardback to flick through.

Read the title carefully. This is a textbook aimed at our colleagues in Pediatrics (I'll change the spelling from now on), but, as you might imagine, it could work at several different levels. It is a multi-author work, with some chapters that would appeal to primary care and others of a complexity suited to ENT trainees approaching their exit exam.

The content is all you would expect, ranging from basic sciences, to neck masses, neck space infections, emergencies, otitis media and hearing loss, stridor, sleep-related airway problems, and sinus disease. I found the three closing chapters particularly good and imaginatively chosen, although probably less relevant to a general paediatric physician's practice. Management of velopharyngeal insufficiency is highly specialised, a topic little addressed, but very well covered here. Chapters on recurrent respiratory



papillomatosis and congenital vascular anomalies are very topical and would grace any surgical trainee's bookshelf

My only criticism is the relative lack of high-quality pictures to illustrate the text, somehow even more important when staring at a monitor. The 'Basic Sciences' chapter particularly suffers in having no photographs or line diagrams whatsoever. Elsewhere, computed tomography scans are nicely 'printed', if small, but do need labelling. I can spot the large vestibular aqueduct or the cochlear implant cable, but I wonder if our paediatric colleagues would, without help. The value of some of the sparse illustrations must be questioned; for example, a behind-the-ear hearing aid, or a picture of a mother and daughter, labelled as bilateral cochlear implant, but spoiled by the unavoidable blanking out of their eyes. 'PC' does not solely apply to that noisy machine beneath my desk, I do know. Vascular lesions and neck space infections are far better illustrated. I did laugh at a picture described as an otolaryngologist performing adenoidectomy, where the abiding memory is instead of the

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somnolent anaesthetist gazing on with disinterest. How familiar is that to us all?

If e-reading works for you (I am a print on demand type, as you may have gathered), then the text content of this is of a high standard and achieves well beyond the stated intent of teaching our colleagues in Paediatrics some of our professional secrets. It has some chapters more suited to higher surgical trainees and most of it would be of value to primary care physicians. I was encouraged to read that otitis media is well within the scope of management by the primary care provider. I was impressed to read of congenital piriform aperture stenosis and wish I had done so last

year, when I first heard of it. There lay the newborn struggling to breathe; none of us, as otologists or head and neck surgeons, could work out what was wrong, so we called the expert. Derek Bosman, bless him, confidently assured us this child had a central incisor and computed tomography would prove it, and then walked off. You can guess the rest.

I have learnt much from this and would love it as a paper copy. I do wonder if there is a market for similar texts aimed at other allied medical specialties, or is that giving away too much of our art?

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