

MANAGEMENT OF ADULT NEUROGENIC DYSPHAGIA

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Singular Publishing Group Inc. 1998
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Amongst all the patients gastroenterologists see with dysphagia, some of them do not have an oesophageal cause, and in those it is usually of neurogenic origin. Gastroenterology training is often quite sketchy when it comes to neurogenic dysphagia and therefore I found this book somewhat of a revelation. It is part of a series looking at aspects of dysphagia in a lot of detail. It is certainly written by American practitioners for an American Readership but nevertheless there is a great deal of interest and importance to those practising in the UK. On the one hand it looks at neurogenic dysphagia from many different viewpoints, with some of them quite unusual and innovative. On the other hand it could be regarded as a practitioners' manual and goes into a great deal of detail as to how to practice a whole range of interventions.

It starts off by going into a detailed analysis of issues in dysphagia management and frameworks for intervention in dysphagia. Educational definitions as to what it is to be a 'Dysphagia Coach' are discussed. There follows a chapter describing the overall goals and methods of rehabilitation in dysphagia and then biofeedback modalities are discussed in a lot of detail. Case histories are used as illustration. There then follows what I would regard as a standard text for speech/language therapists intervening in dysphagia and this is a chapter of over fifty pages.

The next three chapters deal with malnutrition and artificial nutrition related to dysphagia patients, special issues and complications of feeding dependency, and some surgical techniques in the management of neurogenic dysphagia. Finally there is a chapter on the legal, ethical, reimbursement and documentation issues relating to speech/language therapy practised in the United States.

I suspect this book will be essential reading for speech/language therapy trainees. The issues that it covers will need to be addressed by trainees in neurology, gastroenterology and ENT. There will also be a great deal of interest to trainees in dietetics. It is more of a practical instruction manual than a reference work, but from a doctors point of view will be invaluable as a reference source as to what can be achieved by speech/language therapists and other practitioners in the field. In this regard I was a little surprised at the relatively small use of diagrams and illustrations, even in the very practical parts of the text. Overall it is a good example of how books written by clinicians who are not doctors can be very educational to those who are.

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CLINICAL MANUAL FOR LARYNGECTOMY AND HEAD AND NECK CANCER REHABILITATION 2ND EDITION

Janina K. Casper, Raymond H. Colton
Singular Publishing Group Inc. 1998
ISBN 1 56593 959 X. Price: £30.00.

This book, *Clinical Manual for Laryngectomy and Head/Neck Cancer Rehabilitation*, by Drs Janina K. Casper, Ph.D. and Raymond H. Colton, Ph.D. with contributions by Dr Carla DeLassus Gress, Sc.D. is a second edition.

The main authors are respectively the Associated Professor and Professor of the Department of Otolaryngology and Communication Sciences, SUNY Health Science Centre, Syracuse, New York.

The Authors have grouped their experience into eight chapters amounting to 236 pages in a book that is carefully designed, compact and well illustrated. It makes the wealth of information in the first edition current and succeeds in its aim as a comprehensive clinically orientated manual on the rehabilitation of patients with head/neck cancer.

Chapter 1 presents a general introduction and overview of the diagnosis and treatment of head and neck cancer, its impact on the individual and the family, and demographic data. Chapter 2 reviews some of the procedures used in the examination of the larynx and the basic acoustic and physiologic characteristics of the voice and their measurement. Differential diagnosis and surgical and non surgical treatment of carcinoma are presented which naturally is only a reflection of the current practice in the USA. Concepts involved in the total rehabilitation of the laryngectomee are explored in Chapter 3. A team approach is stressed, and the roles of the various team members are presented. Consideration is given to the need of the patient and the family, a valuable insight often excluded in other reviews. Chapter 4 discusses the various speech modes in some detail, providing descriptions, advantages, disadvantages, and indications for their choice. Some of the electronic devices described however are hardly ever used in the UK. Chapter 5 presents the basic concepts for the rehabilitation of alaryngeal speech including specific and detailed instructions for teaching mechanical and oesophageal speech. Chapter 6 is devoted entirely to the TEP and includes sections on patient selection criteria, insufflation testing, fitting the prosthesis, instruction in voice production, use and care of the prosthesis, the tracheostoma valve, and a very valuable section on problems which may be encountered and their solutions. The acoustic, physiological, and perceptual characteristics of alaryngeal speech as well as characteristics of the speech of patients who have had a partial glossectomy are described in Chapter 7.

Chapter 8 discusses the rehabilitation needs of patients whose head/neck cancer resulted in a loss of parts of the oral or pharyngeal cavities, especially the tongue.

The appendices in this new edition are particularly well thought out and useful. They include valuable