Stroboscopy and High-Speed Imaging of the Vocal Function, 2nd edn
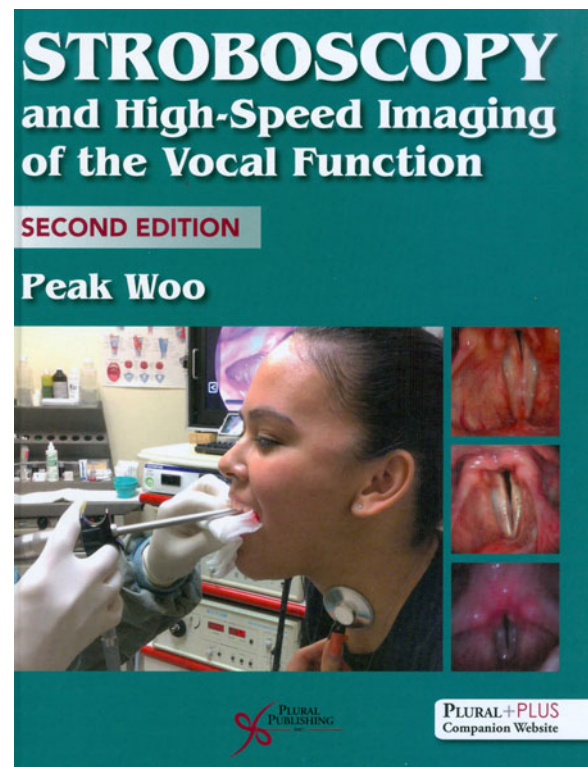
This is an update of the first edition that appeared in 2010 and was reviewed for this journal by Declan Costello.[1] That original version lacked the subtitle we now see, which tells us much about the updated content. Helpfully, the back cover also lists the new features and its claim to 'cover the entire range of laryngeal imaging' is well justified. This proves to be as valuable an atlas of laryngology as it is an authoritative guide to the role of videostroboscopy.

It is notably still a single author text and I have no doubt that the Foreword is correct in telling us that there are no fewer than 450 citations in the text, many less than 1 year old. The number and quality of the endoscopic images is quite remarkable and do reflect the size of practice of the author. There are none of the all too common 'reproduced courtesy of etc' labels here.

As before, the second edition is divided into Basic Science (the anatomy, physiology and the physics of stroboscopic imaging) and then Laryngeal Disorders. In the former there is now extensive coverage of digital high speed video endoscopy, or videokymography. Although this seems to have been around for nearly 30 years, its clinical use is still in the developmental stage. The point of course is that conventional stroboscopy needs a constant fundamental frequency. Repeated changes, such as in vocal tremor, put the flashing illumination out of synch with cord vibration. Rapid capture of images catches that brief moment of cord movement instead.

Throughout the book the illustrations of videostroboscopy are really well reproduced, but, even better, they are accompanied by a series of on-line examples. By definition, this is an exercise in dynamic movement and the videos are invaluable. Advances in chip-tip video (avoiding the need for fibres) and contact endoscopy and narrow band imaging also reflect recent advances.

In coverage of laryngeal pathology there are at least as many still endoscopic images as those of stroboscopy, making this a great atlas of disease and, so, of relevance to those with a general otolaryngology interest. Chapters cover such topics as inflammatory, autoimmune, granulomatous, neoplastic, traumatic and neurologic abnormalities.

I particularly appreciated a section entitled 'Who Is Doing the Examination and What Is the Stroboscopy Data Being Used For?' (page 137). This explains the different approaches to voice problems for the otolaryngologist and the speech/language pathologist and the differing value of Stroboscopy for each of them. If any book can convince that there really is little place for the generalist in evaluation and management of voice disorders, this fits that bill. We can all spot the lumps and bumps, but for the dysphonias, the aging vocal cords, the professional voice user, the smallest cysts and nodules on the cord edge, this is a manual for the expert subspecialists.

Its greatest appeal will be to the laryngologist and any colleagues involved in voice work, but it carries a valuable message for all of us and especially our trainees.

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Reference

1 Costello D. 2010 Book Review. *Journal of Laryngology and Otology* **124**;702–3