

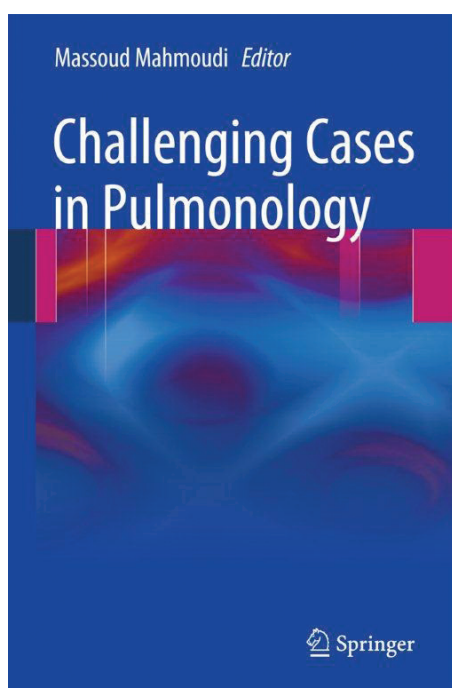
BOOK REVIEW

Challenging cases in pulmonology

Edited by M. Mahmoudi

Published by Springer

Pages: 296. Price: £117.00. ISBN: 978-1-4419-7097-8



In *Challenging cases in pulmonology*, M. Mahmoudi and colleagues have elegantly written an overview of the main fields of respiratory medicine including allergic-immunologic, occupational, infectious, obstructive and diffuse parenchymal lung diseases. Based on a unique approach comprising short abstracts followed by case presentations, working diagnosis and discussion sections, the authors give a clear, well written and short but complete summary of each component of the topic. In addition, each chapter ends with five to 10 multiple choice questions and answers, which stimulate the reader and improve the delivery of useful information. The book provides a pragmatic approach for the diagnosis and management of the multiple pulmonary diseases, which often overlap with other specialties, and summarises the literature in a current and concrete

context. The strength of this book relies on its concise format, which highlights the clinical approach to a patient in a pragmatic way. In addition, the style is appealing and helps educate the reader.

However, several minor comments need to be mentioned. In the allergic asthma chapter, it could have been underlined that the diagnostic approach for asthma is usually based on two additional key elements: 1) the demonstration of variable expiratory airflow limitation, preferably by spirometry, and 2) the exclusion of alternative diagnoses. The authors may also have added that patients with asthma often have normal lung function at the time of evaluation and that several strategies may be used to confirm the clinical diagnosis, such as repeat spirometry at subsequent visits when the patient is symptomatic, patient-recorded serial measurements of peak expiratory flow over time, and bronchoprovocation testing. In the allergic bronchopulmonary aspergillosis chapter, a comment could have been added on differential diagnoses of transitory lung infiltrates associated with peripheral blood eosinophilia. Regarding malignant pleural mesothelioma, poor prognostic factors, which usually include cytopenia, fever, sarcomatous or mixed histology, age >65 yrs, poor performance status and male sex, could have been detailed in the chapter. In addition, it could have been mentioned that radical extra-pleural pneumonectomy is the only intervention that has been demonstrated to result in long-term, disease-free survival in highly selected patients with favourable prognostic indices. Although controversial, a comment on screening approach for inherited/congenital thrombophilia could have completed the pulmonary embolism chapter. Finally, many different acronyms are used throughout the book and may be different from chapter to chapter. Clarity could have been improved either by standardising all abbreviations or by attaching a one-page summary of acronyms used in the text to each chapter.

Having discussed the strong and weak points of the book, I enjoyed reading it and believe that the colour review will appeal to a wide readership, ranging from senior medical students, to trainees in internal medicine, and to pulmonologists in training and practice.

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