

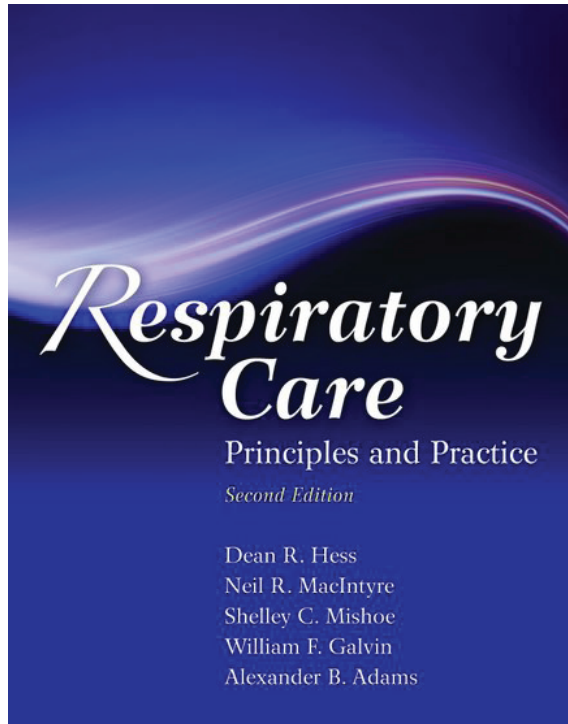
BOOK REVIEW

Respiratory Care: Principles and Practice, Second Edition

Edited by Dean R. Hess, Neil R. MacIntyre, Shelley C. Mishoe, William F. Galvin and Alexander B. Adams

Published by Jones & Bartlett Learning

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In *Respiratory Care: Principles and Practice*, Dean R. Hess and colleagues have elegantly designed and written an excellent overview of respiratory medicine. The book is organised into five sections and 62 chapters. The chapters are divided into short sections, each of which has an associated “Respiratory Recap” section highlighting the most important aspects of the text. The authors lead the reader, by using simple but effective language, from the first section on respiratory assessment to the last focused on the respiratory care profession. The book has a streamlined structure so it can be read all in one go or used for reference.

The prologue treating the importance of building an empathetic relationship between doctor and patient, often neglected by other similar books, is thrilling. Phrases like “A clinician can communicate caring through a gentle demeanor and an unhurried, unabr

upt manner. Maintaining eye contact is essential. Also appropriate is the judicious use of touch...” may at first sight seem redundant but are of paramount importance for a young physician. Particularly interesting and well-constructed are the chapters dedicated to pulmonary physiopathology (chapters 1–5), and those dedicated to imaging of the thorax, pulmonary function tests, polysomnography and cardiopulmonary exercise assessment. The authors give a lot of space to the management of critical patients using a holistic approach: the chapters dedicated to haemodynamic monitoring, cardiac assessment, cardiac failure, nutritional support, trauma, neuromuscular dysfunction, postoperative respiratory care, and invasive and noninvasive mechanical ventilation are clear and pragmatic.

Jeffrey J. Ward gives us a small gem of historical literature in the chapter entitled “History of the respiratory care profession”. He leads us by the hand on a journey through the millennial history of respiratory medicine. In section V the authors tackle very important, but sometimes neglected, aspects of the respiratory care profession such as the ethics of healthcare delivery and communication skills. The last chapter, “Evidence-based respiratory care”, gives the reader valuable information on how to evaluate a scientific paper and demonstrates the importance of considering the hierarchy of evidence. Unfortunately, the chapters on healthcare reimbursement and on professional organisation are designed for the US healthcare system and are not usable for European physicians.

Several minor comments remain unsaid. For instance, in the respiratory disease chapter, interstitial lung diseases are dismissed in a few pages: only a page for sarcoidosis, a small paragraph for collagen vascular diseases and a couple of lines for hypersensitivity pneumonitis, with no mention of pulmonary vasculitides or systemic diseases with pulmonary involvement. Very useful from a pedagogical point of view is the Navigate e-Folio, an easy to use online program designed to evaluate the knowledge of the reader.

In conclusion, this an important book not only for medical students but for every physician interested in respiratory medicine, for trainees in internal medicine, and for pulmonologists in training and practice. I enjoyed reading it and I think it is very useful tool for a teaching physician, to design and build lessons for students and healthcare providers.

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