



HERBERT P. WIEDEMANN, MD, EDITOR

NONINVASIVE DIAGNOSIS OF PERIPHERAL VASCULAR DISEASE

Edited by W. Robert Felix, Jr.
Raven Press

An excellently detailed, well-illustrated review of the principles of duplex ultrasound begins this five-section, 11-chapter book. All the fundamentals of duplex scanning diagnosis are included in this first chapter.

Outstanding evaluations of carotid anatomy and flow hemodynamics—with heavy emphasis on duplex techniques and cursory review of other noninvasive studies—are provided. This approach is acceptable and reasonable in view of the rapidly changing technology.

Among the chapters on peripheral arterial and venous evaluation, Dr. Yao provides a clear and concise discussion of Doppler flow detection techniques, flow velocity waveforms, and segmental systolic pressure measurements in the patient with arterial disease. Absent is discussion of the use of duplex scanning to augment segmental pressure and waveform analysis by providing anatomical and further hemodynamic information. Likewise, the material on venous diagnosis is severely hampered by the lack of information on the use of duplex scanning for diagnosis of acute deep vein thrombosis and evaluation of venous insufficiency and valvular function.

Drs. Wheeler and Anderson, however, provide all the information necessary to produce excellent studies in impedance plethysmography. This discussion is augmented by Dr. Felix's chapter on evaluation of the venous system with Doppler ultrasound.

A chapter on the development and management of a noninvasive laboratory is of limited utility, although it may be appropriate for those without expertise in the establishment of a vascular laboratory.

In general, *Noninvasive Diagnosis of Peripheral Vascular Disease* is valuable for fundamental understanding of duplex ultrasound evaluation of extracranial cerebrovascular disease and contains excellent information on standard peripheral arterial and venous evaluations.

It lacks discussion of modern-day technology for peripheral arterial and venous evaluation. Yet perhaps the only real weakness is its depth of discussion of the rapidly changing technique of duplex scanning in eval-

uation of lower-extremity peripheral arterial and venous disease. However, as a concise review of carotid duplex scanning, the text is outstanding. It is an excellent resource for those involved in clinical and basic research on vascular disease.

ROBERT A. GRAOR, MD
Department of Peripheral Vascular Disease

ESSENTIALS OF OTOLARYNGOLOGY

by Frank E. Lucente and Steven M. Sobol
Raven Press

This symptom- and complaint-oriented text is an excellent reference for medical students rotating through departments of otolaryngology and head and neck surgery, primary-care residents rotating through ENT departments, and first-year residents in otolaryngology. Many chapters constitute an excellent framework for presentations, lectures, and discussions dealing with otolaryngologic symptoms and case management.

The chapters on anatomy and physiology are brief, yet compendious. The chapter on physical examination is clear and well illustrated, guiding the reader through the various stages and discussing specific pediatric problems. Particularly appreciated are the chapters about commonly encountered vague and nonspecific symptoms (such as throat pain, bad breath, cough, burning mouth, ear itching, tinnitus, and dizziness) that often confound students and veterans alike. Emergency medicine is nicely handled, along with geriatric and psychological aspects of otolaryngologic disorders.

The appendixes, suggested references, and multiple-choice questions are useful. A finger-indexing system would have made this book still more user-friendly.

Essentials of Otolaryngology may be readily put to use in the emergency room, outpatient clinic, operating theater, and on the hospital floor by students and physicians throughout their initiation into the specialty. The book is easy to read and the print is clear. Its size is ideal; it fits in the side pocket of a physician's white coat, where it belongs.

ISAAC ELIACHAR, MD
Department of Otolaryngology and Communicative Disorders