This third edition of Endovascular Surgery by Moore and Ahn has been published at an appropriate time. As stated by the editors in the preface, the vascular surgical community in North America is now becoming fully involved in the development, evaluation and teaching of endovascular therapy. This may explain why surgeons rather than interventional radiologists have written most chapters. The indications for endovascular techniques are currently based on consensus views rather than large randomised trials. In this rapidly evolving field it remains a challenge to write chapters about material or techniques without knowing which of those will disappear in a few months and which will be widely accepted and become common practice.

The book encompasses all current aspects of endovascular surgery. It is divided into 13 chapters describing the general principles of endovascular techniques, imaging, thrombolysis, occlusive disease of the aortoiliac segment, occlusive disease of the infrainguinal segment, visceral arteries and supra-aortic diseases, treatment of vascular graft thrombosis, aneurysmal diseases, traumatic injuries, dialysis access salvage, venous diseases, endoscopic surgery, and pharmacologic agents. In each chapter there is a presentation of the material, current techniques with advantages and disadvantages of each technique, their indications, a literature review with immediate and long term results and when appropriate, the author’s own experience. Illustrations (mostly black and white) are numerous and useful for full understanding of the text. Most chapters have tables in which literature reviews, authors experience, characterisation of devices, drugs or indications are summarized. References are adequate, but do not include the most recent ones from the year 2000 onwards.

Given the amount of information provided in the book it is not possible to discuss all chapters in detail. In the chapter devoted to general principles, the general organisation of the endovascular room, the question of training and credentials, radiation safety issues, arterial access, guidewires, catheters, balloons and stents are interesting even for well trained professionals. The chapter on imaging and thrombolytic therapy review the different techniques with case illustrations. All issues dealing with occlusive diseases are very well detailed with description of the techniques and long term results. New options such as remote endarterectomy and endobypass are also reported. The chapters devoted to thoracic aneurysm and dissection and abdominal aortic aneurysm reviewed all the grafts which were available at the time the chapters were written but do omit some recent developments. Some grafts have since been removed from the market, and others introduced. This should have been addressed as an update or addendum before the book was published. There is no mention of the European data that has been accumulating in the last two years concerning clinical long-term results and the limits of endovascular grafting. New endovascular options such as ruptured aneurysms are not mentioned at all. Finally few indications are given about who should be treated and who should not (e.g. high risk versus low risk patients). The biggest omission is a chapter devoted to complications and treatment of endovascular grafts such as rupture, occlusion, kinking, endoleak, and/or endotension. Given the number of patients with AAA treated by endovascular grafts nowadays it seems certain that all vascular surgeons will have to deal with these complications. In the venous section, endovascular treatment of chronic deep vein insufficiency by stents is not mentioned. The chapter on pharmacologic agents chapters is mainly devoted to the prevention of myointimal hyperplasia but does not mention brachytherapy and stents coated with antimytotic agents.

With such a multi-author book, repetitions and redundancies are inevitable without strict editing. For example, percutaneous thrombolysis is presented in eleven different chapters and results of aorto-iliac angioplasty stenting at least in two chapters. On the
other hand, some chapters deal with techniques which are not really endovascular i.e. thrombectomy in aorto-iliac and infra-inguinal segment and also open aorto-iliac endarterectomy. Also endoscopic vascular surgery including thoracic sympathectomy, vein harvesting and aorto-iliac laparoscopic repair are described in specific chapters. Understandably these techniques have been included due to the same trend toward less invasive surgical procedures. In conclusion despite the omission of some recent developments and a degree of repetition due to inadequate editing, this book provides a useful compilation of endovascular techniques. However it is expensive and has a strong North American bias. The Textbook of Endovascular Procedures (Churchill Livingstone) was published two years earlier but is almost as up-to-date and considerably less expensive. The 4th edition of Vascular and Endovascular Surgical Techniques (W. B. Saunders, 2001) is a better atlas and The Evidence for Vascular and Endovascular reconstruction (W. B. Saunders, 2002) gives a better review of the literature, again at a lower price.

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