Concise Vascular Surgery
Crawford W. Jamieson and James S. T. Yao, Eds.
339 pages, price £60.

Concise vascular surgery is a multi-author book, designed to describe in detail and step by step the broad scope of vascular surgeon’s art. It is aimed at vascular surgeons in training, and at a great variety of specialists, such as general, trauma, orthopaedic, gastroenterological surgeons who occasionally encounter vascular problems in emergent or in elective surgery.

The book covers almost all classical vascular techniques, except the endovascular ones. Each chapter contains many self-explanatory black and white drawings, and an accompanying intentionally short text. On the whole, the book is clear, agreeable to read, and informative. The book is divided in three parts which include general techniques, management of arterial disease and management of venous disorders. In the general techniques section I found that the chapters devoted to angiography provided a lot of details concerning catheters, dose and rate of contrast medium according to site of exploration. Also, the chapter on major blood vessels exposures is, at the same time, comprehensive, concise and not too schematic. General principles of arterial sutures and endarterectomy are also well described. The second part presents all major operations on arteries including carotid endarterectomy, aorto-iliac repair for occlusive disease and aneurysms, mesenteric and coeliac arterial occlusion, infra-inguinal revascularisation, trauma, amputation, fasciotomy and sympathectomy. Management of venous disorders describes surgery of superficial vein for varicose veins and for venous ulcers. All steps of major operations are presented in detail, and although some variation in operative techniques may occasionally be missing, the reader is generally provided with the information needed in specific situations.

Some chapters are not covered, such as carotid or great vessel bypasses, vertebral surgery, femoro-pedal bypasses, renal reconstructions, first rib resection, or redo surgery for occluded grafts or infection, reconstruction of the deep veins. Probably the authors have rightly thought that these latter operations are rather a task for vascular specialists than for trainees or general surgeons. Indexing is pertinent and clear but references are scarce, the general aim of the book being techniques and not results of series.

This book is worth purchasing by the readers aimed at by the authors, and also for academic vascular and general surgeons who have responsibility for trainees.

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Stent Grafts, Current Clinical Practice
B. L. Dolmatch and U. Blum, Eds.
182 pages, price DM248.

Endoluminal technologies are rapidly evolving, but few books are devoted to the description of the various materials and their clinical applications. The gap is filled with “Stent-Grafts: Current clinical practice”. Edited by interventional radiologists, both radiologists and vascular surgeons will enjoy reading it. The originality and quality of the content, the presentation, the large amount of information displayed in the different chapters, make the book a useful and unique tool for all interventionalists.

The book is divided into six chapters, including a description of non-covered peripheral stents and their healing responses, stent grafts for abdominal, thoracic and peripheral aneurysms, stent grafts for occlusive diseases of peripheral, renal, carotid and coronary arteries, stent grafts for haemodialysis and transjugular intra-hepatic porto-systemic shunt, stent grafts for trauma and for non-vascular applications such as gastrointestinal and tracheo-bronchial diseases. Of course, vascular surgeons will be more interested in

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the chapters devoted to vascular applications, but the non-vascular chapters are still worth reading.

Two chapters are not directly devoted to stents. One of these describes the natural history and surgical treatment of AAA, and the second anaesthesia for endovascular aortic aneurysm stent-graft repairs. Amazingly, technical notes are found only in these two chapters.

Along with detailed presentations of stent characteristics, results of the most significant clinical series are summarised, generally in tables, and discussed within the text. Excellent black and white pictures of stents and stent grafts, of X-ray films, and of histological specimens are scattered all through the book. References are comprehensive and few are missing. The indexing is excellent and information easy to find.

Obviously with the rapid evolution of technology, the most recent information and developments are not included. However, there is no way of avoiding this problem which is common to all books of this nature, particularly with regard to the chapter devoted to stent grafts for aneurysms. Endoleaks are fully discussed but there is no mention of fatigue material problems, graft ruptures, graft compressions and distortions, which are matters of growing concern. Also devices such as the Chuter device, the White-Yu and the Vanguard are well described, but they are no longer available in their original design. The same is true with bare stents for occlusive diseases where the newest stents are not mentioned.

In summary: well-presented, agreeable to read and informative, the book provides the readers with an excellent overview of the technology and clinical results of stents and stent grafts up to 1998. It deserves a place in the library of all physicians involved in the endovascular therapy.

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Carotid Artery Surgery: A Problem Based Approach
A. Ross Naylor and William C. Mackey
408 pages, price £60.

This new book provides a problem-based approach to carotid surgery. Multiple authors have been tasked to provide up-to-date evidence-based data to support advocacy of their positions on 30 topical issues in carotid surgery. The format of the book presumes differing geographical stances and each clinical “problem” is dealt with in two chapters, one by European authors and the second by experts offering a trans-Atlantic perspective from the U.S. A short editorial summary follows each couplet of contributions highlighting accord or discrepancy and providing a useful summary of key points for quick reference. References are numbered consecutively for each pair of chapters, although this is occasionally confusing if the same references (with different numbers) are duplicated by both sets of authors.

The book is conveniently split into four sections which mirror clinical progress through patient selection, pre-operative evaluation, operative care and postoperative management. “Patient selection” sets the scene by reviewing established data from the symptomatic and asymptomatic carotid surgery trials. The roles of emergency and urgent carotid surgery, when to operate after a completed stroke, staged versus synchronous endarterectomy with CABG in patients with concomitant carotid and coronary disease, and indications for intervention for non-hemispheric or vertebrobasilar symptoms are covered in Part 1. Chapters on the topical role of cost-effectiveness in selection for surgery provide comprehensive data useful to those dealing with HMOs or hospital management, but the authors highlight the flaws and variability inherent in costing models and come away posing as many questions as they have answered.

In Part 2, “Evaluation and Pre-Operative Management”, the pros and cons of duplex, MRA, contrast angiography and pre-operative CT scanning are debated. Other topics are also addressed: When is neurological assessment required? Which medical conditions alter the risk of surgery? When should the patient undergo formal coronary evaluation and what do we really mean by optimal medical management?

Part 3, “Operative Care”, deals with the practical aspects of surgical intervention. I particularly enjoyed the chapters on the use of local versus general anaesthesia (16.1 and 2), how to deal with high lesions (18.1 and 2), and on achieving optimal flow surfaces and end-points (21.1 and 2). It is interesting that neither of the authors of the latter chapters are advocates of eversion endarterectomy because of the potential for intimal steps. Other useful topics covered in this section include when to shunt and patch, use of anti-thrombotic adjunctive treatments and how to reduce the risk of cranial nerve injury. However, the provision of three similar diagrams of the anatomy of the cranial...