

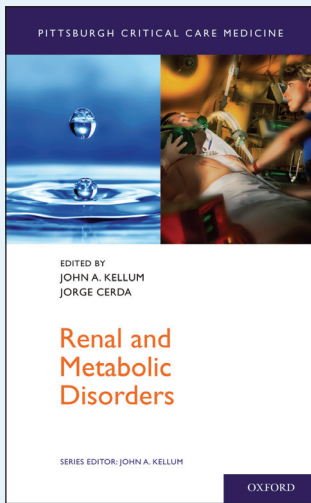
Renal and Metabolic Disorders

Edited by John A Kellum, Jorge Cerda
Oxford University Press 2013

Price £40.00. Pages 222
ISBN 978 0 19 975160 0

This publication sits comfortably in the gap between standard full-length text books and list-based telegraphic-style pocket handbooks. The text is well written and the layout of the chapters is sensible. Topics have been appropriately divided into accessible chapters that can easily be read at a single sitting.

The choice of subject material included in the



book is good and fits well with challenging areas of clinical practice. The content is a mixture of descriptions of aetiology and pathogenesis, clinical presentations and guidance on investigation and management decisions.

Tables and figures are very well used in almost all of the chapters. The visual aids to the description of different modes of continuous renal replacement therapy in chapter 10 are an extremely good example of figures supplementing text.

Perhaps the only frustration for a European audi-

ence when reading the text, is the use, in some chapters, of non-SI units without SI units alongside.

The content is directed at 'budding experts and seasoned practitioners' looking after critically ill patients both in and outside critical care. The book is a good introduction to any of the areas covered although it is probably more suitable for higher professional trainees than core or foundation level doctors in the UK. The areas covered would be of interest to trainees in many of the medical specialities and acute physicians, but would probably be of greatest interest to trainee nephrologists and intensivists.

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150 ECG Problems (4th edn)

John Hampton
Churchill Livingstone Elsevier 2013

Price £27.99. Pp 328
ISBN 978 0 7020 4645 2

150 ECG Problems by John Hampton is an extensive collection of clinical cases and abnormal 'real world' electrocardiograms (ECGs). The author's introduction reminds the reader of the importance of using the ECG as a tool to guide diagnosis and management in the context of the clinical case and this is encouraged throughout the book.

Each case is kept brief, with only the 'relevant' clinical details and the 12-lead ECG to guide the reader on his/her interpretation, which is then summarized on the following page. The book contains links to the other two works in Hampton's ECG series for further explanation or learning if needed.

While all of these features would suggest a well-designed and easy-to-use tool for interpreting ECGs, unfortunately I did not find this to be the case. The clinical cases given with the ECG trace contain minimal information and omit some important clinical details until the page is turned to reveal the full clinical interpretation. I also found the clinical interpretations vague and often with little explanation as to why the ECG had been interpreted in such a way. The intention is that this problem should be solved by turning to the relevant page in the corre-

sponding book (*The ECG Made Easy* or *The ECG in Practice*), but for more complex cases I found there was still insufficient information to fully understand the interpretation.

Overall *150 ECG Problems* is a comprehensive collection of ECG traces and cases, but unfortunately it is not as comprehensive in its explanations or especially easy to use. I'm sorry to say that I felt this book did not live up to its full potential.
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Transcutaneous Electrical Nerve Stimulation: research to support clinical practice

Mark I Johnson
Oxford University Press 2014

Price £34.99. Pp 272
ISBN 978 0 19 967327 8

The use of electricity as a means of treating pain has been around for a while. The Egyptians may have got there first with electric fish (so this text says) but it has around in one form or another since. Melzack and Wall unravelled the complexities of pain pathways in 1965, doing away with dualism and (quite literally) opening the 'gate control' theory of pain. We are given a brief description of the modulation of pain transmission by 'opening' other nociceptive pathways, i.e. skin stimulus. From here the world of transcutaneous electrical nerve stimulation (TENS) opens before you and over two

hundred pages are devoted to this most humble of medical devices.

The prose is good, the edit consistent, the diagrams clear and the references thorough (very). The topic matter strays away from the original brief into neurophysiology, into medical physics and dwells in areas that should be quickly passed – within chapter 5 a paragraph on why TENS should not be applied on an area of active bleeding is described. This should not really need explaining.

The most interest focused on the issue of evidence. Indeed its critique of evidence-based medicine, the use (correct or otherwise) of randomized trials and systematic reviews makes the reader pay attention. Much of the evidence out there is of poor quality, and with that poor quality judgments about whether TENS is clinically effective are drawn. The message is contradictory – TENS is not recommended by the National Institute for Health and Care Excellence guidance on low back pain but is recommended by the British Pain Society (as an adjunct).

One could reply – 'if it hasn't proved itself after 4000 years how can it be useful?'. My clinical experience with TENS mimics the evidence; its response is unpredictable. But TENS is safe, inexpensive and can be self-administered. So, as I sometimes say in clinic, 'apart from twenty five quid, what have you got to lose?'

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