

Diagnosis and Treatment in Internal Medicine

Edited by Patrick Davey, David Sprigings
Oxford University Press 2018
Price £44.99. Pp 1238
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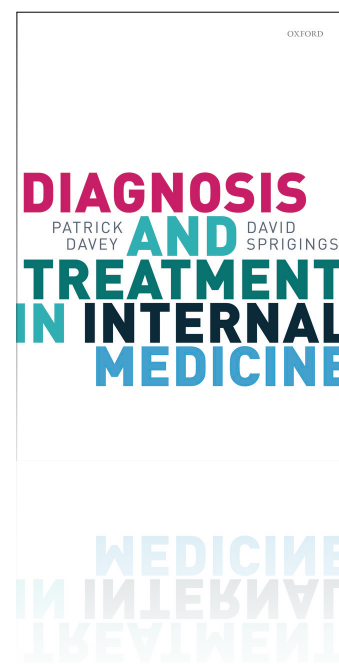
The role of medical textbooks has changed since the widespread availability of online resources, paid for or otherwise. What, then, is the role of a book such as *Diagnosis and Treatment in Internal Medicine* – under what circumstances would one consult it?

The work opens with seven chapters on the general approach to diagnosis, including diagnostic reasoning and sources of error, consent and confidentiality. The next section (77 chapters) addresses common and less common presenting complaints. Whereas the opening chapters should probably be read in one go, these chapters would be much more helpful as quick reference in clinical practice, e.g. on the acute medical unit, ambulatory care or even on the ward or in clinic.

The remaining chapters (better described as monographs) cover disease entities and follow a hierarchical, very systematic approach to clinical assessment, diagnostics and treatments. These generally refer either to recent guidelines or broad reviews. They are particularly useful for slightly unfamiliar conditions but, as they mention differential diagnosis, can assist in the management of complex cases.

The most refreshing aspect of this book is its attempt, largely achieved, of being systematic and presenting information in a contextualised way. It has many contributors but the style is consistent. The main drawbacks are that the book does not have a dedicated section on geriatrics, and cannot possibly cover all aspects of every condition, even very common ones. In that sense it remains a reference work.

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Core Concepts in Acute Kidney Injury

Edited by Sushrut S Waikar, Patrick Murray, Ajay K Singh
Springer 2018
Price £109.99. Pp 373
ISBN 978 1 4939 8626 2

In gathering together contributions from an array of experts, *Core Concepts in Acute Kidney Injury* aims to be – and mostly succeeds – a state of the art exposition on the current knowledge base. Sections on epidemiology and pathophysiology are followed by detailed chapters on different clinical syndromes that sit within the gamut of acute kidney injury presentations, e.g. liver disease, sepsis and radio-contrast. The section on management also includes a chapter on emerging therapies. Evolving concepts are introduced such as the shifting paradigm from the traditional ‘pre-renal–acute tubular necrosis’ continuum to a more nuanced categorisation using functional and damage-related biomarkers.

By and large this is a good read, although a scattering of proof-reading errors does frustrate. The other downside is the book’s interface with the messy, clinical reality that most practice involves ‘multi-

factorial’, ‘ischaemic’ acute kidney injury. The excellent chapter on ‘Non-dialytic management of acute kidney injury’ provides some clarity but is constrained by the limited evidence base. While the human and organizational factors that hamper best practice are still being elucidated, one is forced to temper some of the optimism expressed in the preface that prevention and treatment of acute kidney injury ‘will be yet another example of modern medicine’s success stories’.

For immediate practical guidance, this book is well placed for those who want a one-stop shop for the detail and depth of contemporary knowledge.
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Adult Critical Care Medicine: A Clinical Casebook

Edited by Jennifer A LaRosa
Springer 2018
Price £89.99. Pp 400
ISBN 978 3 319 94423 4

While one’s first impression of *Adult Critical Care Medicine: A Clinical Casebook* may be one of dismay given that it contains 400 pages of predominantly small

sized font, it is certainly worth a read. It is split into 19 clearly signposted chapters, meaning one can pick a topic of interest and read it independent of the others. The chapters are written by clinicians eminent in their field in the USA, and provide an update on some of the major clinical scenarios encountered by those practicing critical care medicine, including an excellent, noteworthy one on ‘Shock and vasopressors: state-of-the-art update’.

Other far less run-of-the-mill topics include ‘Overcoming conflicts in the ICU care of surgical patients’, and ‘Critical care billing, coding, and documentation’ – which is less relevant to those working in the UK, but provides a fascinating (and perplexing) insight into the American system.

The text is interspersed with clearly written tables, pictures and algorithms, and some chapters (not all) include ‘key points’ and ‘future aims’. Each chapter ends with suggested references.

The book certainly does not replace traditional textbooks, but nor does it try to. Instead it provides an easily accessible resource that will be of interest to all working in intensive care medicine.
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