Venous disease Simplified

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EXTENT P/H	248 pages, Paperback
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PUBLISHER	tfm (Shrewsbury), 2006
REVIEWER	Simon Hardy
STAR RATING	***

This concise book features contributions from an impressive array of experts nearly all working in the UK who each review some aspect of venous disease. Most of the important topics are discussed and the salient facts presented. Some of the contributions presuppose a degree of familiarity with the subject but this varies from article to article.

The initial chapter by Lane summarises developments in the study of venous disease from 1552 BC to the present day. The next chapter discusses the classification of venous disease and the various factors thought to play a role in the aetiology of varicose veins and leg ulcers. Many patients are convinced that genetics play an important role in the development of varicose veins. Although this is open to debate, Fowkes disappointingly simply suggests more research.

Contributions from Bradbury *et al.* and Lees take us swiftly through the clinical diagnostics of venous problems. Then Davies with his co-workers shows in two chapters how we can improve quality of life with treatment but questions who should pay. The results of the recent randomised and economic assessment of conservative and therapeutic interventions for varicose veins (REACTIV) trial on the economic benefit of treatment of varicose veins are, unfortunately, not discussed though the inclusion of the internet address of the NHS Health Technology Assessment website does allow the results to be tracked down by a determined reader.

The short chapter by de Cossart on 'minimising complications, complaint and litigation' could be usefully read by every doctor, not just junior surgeons. The tabular format is very clear and it sets out to 'offer ideas on what should be in the mind of the practitioner at each step of the patient's journey'. It also reminds us of the myriad of questions we should be asking ourselves all the time as we see and treat each individual patient.

Earnshaw then discusses recurrent varicose veins and introduces the modern minimally invasive methods of treatment before substantive chapters on these new techniques. The later thoughtful contributions from Whitely and Coleridge Smith on newer methods of venous obliteration will benefit anyone contemplating introducing these techniques into their own surgical armamentarium.

Chapters from Stansby on subfascial endoscopic perforator surgery, Vandendreissche on sclerotherapy and Caprini on venous thrombo-embolism reflect their respective

authors' interests while Tan and Burnand tell us about deep venous surgery. Two useful chapters from Cheltenham General Hospital's leg ulcer unit on nurse-led clinics by Taylor and Sim, and venous leg ulcer services by Whyman *et al.* are followed by advice from Scurr on deep venous thrombosis and travel.

Inevitably in a compact collection of individual reviews, there will be some subjects that have been omitted and so there are some suggestions for improvement for a subsequent edition. It is a pity that developments in dressings and hosiery for venous ulcers are not covered particularly well, while the new technique for venous valve reconstruction developed by Maleti and Lugli is not even mentioned. The monograph would also surely have benefited from colour illustration. The only serious criticism I have is the lack of any index to guide the reader to a key fact or find a new technique (nor any CD to search). Despite this drawback, the book is a simple, concise and useful summary of current approaches to venous disease.

Cut to the Chase: 100 Matrix Pearls for Doctors

LEO A GORDON

EXTENT P/H	296 pages, Paperback
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REVIEWER	Andrew Raftery
STAR RATING	*****

This is a fascinating book. Unfortunately, for the UK reader the title is misleading and does not clearly reflect the content of the book. 'Matrix Pearls for Doctors' would better be described as 'pearls of wisdom'. The author is a general surgeon from Los Angeles who is one of America's leading medical educators. He is the originator of the M+M Matrix, which is an error and complication-reducing curriculum generated from the morbidity and mortality conference, which become lessons in patient safety.

The book describes 100 lessons to be learnt from these conferences. They are not listed in any particular order but each of them defines a 'matrix pearl'. The author himself states that 'true to surgical form they are personal and opinionated'. Matrix lesson 1 opens with an appropriate quote from Cicero – '*Nihil est tam insigne, nec tam ad diurnitatem memoriae stabile, quam id, in quo aliquid offenderis*' [Nothing stands out so conspicuously, or remains so firmly fixed in the memory, as something in which you have blundered], and never has there been a truer aphorism!

There are some wonderful learning opportunities in this book and to whet the potential readers' appetite, I will quote a few. Lesson 5: 'A patient cannot sleep through peritonitis';