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Chronic Obstructive Lung Diseases. Norbert F Voelkel MD and William MacNee MBChB MD, editors. Hamilton, Ontario, Canada: BC Decker. 2002. Hard cover, illustrated, 428 pages, includes CD-ROM, US $99.95.

This book was co-edited by Norbert Voelkel, a professor of emphysema research at the University of Colorado, and William MacNee, a professor of respiratory medicine at the University of Edinburgh. The text reflects an impressive list of contributors, many of whom are well recognized in the field of chronic obstructive lung disease. Many of the chapters are written by multiple authors, reflecting the combined thoughts of up to 5 individuals. A trivial but irritating point in the author index is the attribution of qualifications, which should be standardized.

The text contains several interesting and innovative chapter headings. Although it is somewhat unclear whether the book is designed for an audience beyond the respiratory specialist, many of the chapters would be of value to general internists and family physicians with a special interest in chronic obstructive pulmonary disease (COPD). Nonphysician health professionals such as respiratory therapists, nurses, and physical therapists would also find educational value in several parts of this text, although this is clearly a reference work rather than a text to study in sequence.

The material is selected and organized broadly into 2 parts. The first 13 chapters address the pathobiology of COPD, ranging from prenatal lung development through genetic risk factors and perinatal stress to the inflammatory pathogenesis of COPD, mucus-secreting cells, and the role of surfactant in small airway diseases. These chapters combine detail with readable text in an effective, engaging way.

Chapters 13 and 14 discuss other causes of airflow limitation, including other large airway diseases that limit airflow and the influence of interstitial diseases when their pathology also affects the airway wall. These 2 chapters lend color to the text by reminding us just how interesting and varied clinical presentations can be.

The remaining chapters (16–29) tackle various clinical aspects of COPD, with excellent contributions from several of the recognized experts in the field. This section is of greater interest to clinicians, as it addresses infections, imaging, pulmonary function, and ventilation-perfusion mismatching. The statements appear to be accurate and concise. The chapters progress logically and are easy to return to for a second look.

Unfortunately, the book becomes somewhat unbalanced by a research summary on animal models of emphysema (15 pages of text and 119 references); though that summary is excellent, the extent of its detail is unnecessary in this book; an abbreviated format would offer more appealing reading to active clinicians. Many readers will find the chapter interesting but will tire in the sections on genetic models of emphysema and gene-targeted mice, which is a pity, as these subjects are on the cutting edge of COPD research.

I was disappointed that the book's superb overview of clinical management (10 pages of text and 97 references) was not developed in a more expanded form, especially as it was written by a recognized authority on that subject. Other chapters on smoking cessation, COPD exacerbations, and respiratory muscle function complement the discussions of clinical management but are lacking in clinical case examples that might enliven their clinical messages. They also lack variables that might predict morbidity and mortality among COPD patients and outcome measures that highlight the growing importance of health-related quality of life. An excellent chapter on COPD as a wasting disease highlights recent studies on the role of wasting in morbidity and impaired health status, emphasizing that reversal of wasting is a prerequisite for improved health status among some COPD patients.

Throughout the book the font, figures, tables, and illustrations are of high quality, making it a pleasure to read. Mercifully, the paper doesn't glare. The figures and illustrations are up to date for the most part. Where old friends surface again, it is because there has been little new work on the subject. The accompanying CD-ROM is also useful.

The authors have worked hard to create a thoughtful reference text on COPD. I look forward to further editions to include the newer pharmacologic and nonpharmacologic approaches to COPD that are currently the subjects of clinical trials, as well as to the shift in emphasis to outcome measures that include health-related quality of life.

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Pulmonary Rehabilitation Video Series. American Association of Cardiovascular and Pulmonary Rehabilitation. Timonium, Maryland: Milner-Fenwick. 2002. Set of 5 videos for in-facility use: $445. Home video guide for pulmonary patients: $19.95.

The American Association of Cardiovascular and Pulmonary Rehabilitation and Milner-Fenwick Incorporated have produced an excellent series of videos for pulmonary rehabilitation patients. The many different facets of pulmonary disease are often overwhelming to the patient, and these short, well-done videos present many aspects of pulmonary illness and techniques of coping. The series has 2 parts: a 5-video series created for in-facility use, and 1 home-use video tape that is a compilation of the other 5 tapes. The 5-video series tapes are titled "Breathing Training and Pulmonary Illness," "Pulmonary Medications and Hygiene," "Stress and Relaxation Techniques for Pulmonary Patients," "Exercise for Pulmonary Patients," and "Healthy Choices for Managing Your Pulmonary Illness." The compilation home video is titled "Living with Your Pulmonary Illness," and it comes with a printed list of the chapters, for easy reference.

"Breathing Training and Pulmonary Illness" (11 min). This video shows the importance of using breathing techniques to gain more control of everyday tasks. A simple explanation of the anatomy and physiology of the breathing cycle is presented. The demonstration of diaphragmatic and pursed-lip breathing is well done. A simple explanation is given of the difference between restrictive and obstructive respiratory diseases, and the best techniques are described and demonstrated for each class of