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Clinical Atlas of Interstitial Lung Disease. Tatjana Peroš-Golubčić MD PhD and Om P Sharma MD. Foreword by Talmadge E King Jr MD. London: Springer-Verlag. 2006. Hard cover, illustrated, 207 pages, $299.

In the preface of this book the authors focus on the word "atlas" and provide the *Oxford English Dictionary*'s definition of "atlas": "a similar volume containing illustrative plates, large engravings, etcetera, or the conspectus of any subject arranged in tabular forms." In this sense, the authors state, the **Clinical Atlas of Interstitial Lung Disease** is "a visual representation of common and uncommon interstitial lung diseases." The aim of this atlas is to provide an easy-to-read yet comprehensive manual or handbook for the intended audience of medical students, post-graduate trainees, and practitioners of all disciplines who deal with interstitial lung disease (ILD). The authors conclude their preface by claiming that this atlas is the first such book in this format on this topic. Though there may be other books about ILD that incorporate aspects of an atlas, the authors have succeeded in sticking to the atlas approach throughout this book.

Is there a need now for an atlas about ILD? The answer is yes. For many years now and ongoing, basic scientific and clinical information about ILD is increasingly expanding. Many different disorders and diseases can be included as part of ILD. Bronchoalveolar lavage, high-resolution computed tomography (CT), and video-assisted thoracoscopic surgery have provided substantial data about and fascinating accompanying images of various ILDs. Having a pictorial supplement in one book about a wide variety of ILDs is a worthy goal indeed.

This atlas is organized loosely into 6 sections and 37 short, concise chapters. The first section provides a brief historical background and an overview of the clinical symptoms and classification of, and the radiologic techniques involved in dealing with ILD. The second section deals with ILDs of unknown etiology, including sarcoidosis, idiopathic pulmonary fibrosis, and other interstitial pneumonias, and eosinophilic pneumonias. The third section focuses on ILDs of known etiology, including pneumoconiosis, hypersensitivity pneumonitis, and those drug-induced or radiation-related. The fourth section describes ILDs associated with connective tissue diseases and vasculitidies, including rheumatoid arthritis, lupus, Wegener's granulomatosis, and Goodpasture disease. The fifth section addresses specific clinical entities, such as pulmonary alveolar proteinosis, lymphangioleiomyomatosis, and pulmonary Langerhans cell histiocytosis. The final section is dedicated to pulmonary manifestations of systemic diseases, specifically paraproteinemias, liver diseases, gastrointestinal disorders, and cancer.

Each chapter provides a brief summary of clinical features, including typical symptoms, pulmonary function test results, radiographic findings, bronchoalveolar lavage characteristics, and usual therapeutic approaches. Each chapter is 4–8 pages long, with typically only 1–2 pages of text. Most chapters have a helpful table for quick reference. The writing is succinct, accurate, and up to date, with appropriate references as recent as 2005. The reader of this atlas will not find a comprehensive discussion of all the nuances of the specific clinical entities discussed, but that is not the point of this atlas. Appropriately, the text is kept to a minimum.

As would be expected in an atlas, the majority of each chapter is composed of pictures, mainly chest radiographs and chest CT images, but also pertinent color images from physical examinations, bronchoscopies, and pathology slides. Overall, the quality of the images is excellent, with clear reproductions of well-selected material. The images, particularly with the rich color of actual individual patient physical examination findings and differently stained pathology slides, bring each clinical entity to life. One criticism deals with the legends of the pictures and images: the text explaining the specific image comes first, followed by the corresponding letter (a, b, c, etc); this ordering makes it difficult to look at the picture first and then go back and read the legend text about that specific picture. Given that one is often drawn to look at the picture first and then read the legend, it would have been better to have the corresponding letter in the legend come first, followed by the explanatory text.

One strength of this atlas is its breadth; it presents at least some information on essentially all of the common and uncommon ILDs. Some subjects, however, are treated in a bit too truncated manner. For instance, the chapter on eosinophilic ILD does not present material to help the reader distinguish between these various eosinophilic conditions. It would have been helpful to include a table of the typical amounts of eosinophils in peripheral blood, bronchoalveolar lavage fluid, and pathology specimens in the eosinophilic lung diseases. Another example of a missed opportunity for more detail is the choice of pictures for amiodarone lung toxicity in the chapter on drug-induced lung diseases; no chest CT image is shown. A chest CT of abnormal iodine build-up due to amiodarone toxicity would have been a nice addition.

At 207 pages, this atlas is thin. The authors in their preface stated that they wanted to produce a compendium that is "light enough to be carried in a briefcase or to be enjoyed as a bedside reading." Though they appropriately kept the text to a minimum in general, it would have worthwhile to have more pictures and images. For some of the more common ILDs (such as sarcoidosis, Wegener's granulomatosis, and idiopathic pulmonary fibrosis), additional chest CTs to show more of the range of possible radiographic appearances of these entities would have been useful.

In conclusion, the **Clinical Atlas of Interstitial Lung Disease** does meet the authors' aim of providing an easy-to-read handbook with excellent pictures and images that can enhance the understanding of ILD. In particular, this fine atlas would be worth the purchase price for medical students, pulmonary fellows, and practicing pulmonologists. Other practitioners, such as respiratory therapists and nurses, might benefit as well from reading specific chapters that pertain to specific patients with specific conditions. Future editions of this clinical atlas with updates and expansions as suggested previously will be welcome.

Bennet M Wang MD MPH
Pulmonary and Critical Care Medicine
Group Health Cooperative
Eastside Hospital
Redmond, Washington

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