

**Interventional Pulmonary Medicine**, 2nd edition. John F Beamis Jr, Praveen Mathur, Atul C Mehta, editors. *Lung Biology in Health and Disease* series, volume 230, Claude Lenfant, executive editor. New York: Informa. 2010. Hard cover, 250 pages, \$229.95.

The editors dedicated this book to “interventional pulmonologists throughout the world—past, present and future.” According to the European Respiratory Society and American Thoracic Society, the interventional pulmonology subspecialty encompasses “the art and science of medicine as related to the performance of diagnostic and invasive therapeutic procedures that require additional training and expertise beyond that required in a standard pulmonary medicine training program.” These procedures include bronchoscopic and pleuroscopic techniques used to diagnose and treat a spectrum of thoracic disorders. Interventional pulmonologists might encounter patients with a variety of clinical disorders causing dyspnea, cough, hemoptysis, wheezing, stridor, or respiratory insufficiency. Patients may have manifestations of connective-tissue disease, primary lung cancer, or symptoms related to other neoplastic disorders, trauma and burn injury, foreign-body inhalation, iatrogenic disease, and perioperative complications.

From this perspective, the authors of **Interventional Pulmonary Medicine** accomplished their goal of thoroughly covering the topic. They do that from a procedure-centric rather than a patient-centric point of view. While the intended readership is composed of physicians specializing in airway or pleural procedures, in this field, like in sports or business, one is only as good as one’s team. For that reason, certain aspects of the book (eg, the chapter on sedation, analgesia, and anesthesia for airway procedures) will be particularly useful to therapists and nurses.

Most comprehensive textbooks on interventional pulmonology are more than 3 to 10 years old. In a field where technology and understanding of disease processes has advanced substantially within the last 5 years, there is a need for an updated text-

book and thus the publication of this book is timely.

This multi-author text is volume 230 of the *Lung Biology in Health and Disease* series, with Lenfant as executive editor. Divided into 16 chapters, this hard-cover book is written by 27 different experts. The lack of cohesion among chapters is noticeable despite the editors’ effort to implement a rigid structure. The book uses a procedure-based rather than disease-specific table of contents and is not presented in a case-based format.

The opening chapter provides a review and an update on rigid bronchoscopy instruments and has a different structure from the subsequent chapters. Some chapters address only one intervention (eg, airway stents), while others include 3 or 4 procedures more or less related to each other (eg, laser bronchoscopy, electrosurgery, argon plasma coagulation, and micro-debrider). Certain procedure-related sections include the following headings: history, scientific basis, technical aspects, indications and complications, while others include a different format: introduction, background, literature, limitations, and conclusions.

The book does examine the full spectrum of the available interventional pulmonology procedures, including therapeutic bronchoscopy, advanced diagnostic bronchoscopy, and medical thoracoscopy, and several related procedures. The book is slim, compared with the previous edition from 2004 (257 versus 689 pages). While many chapters from the previous edition have been removed, in its current format this book is more readable and its size may allow one to fit it in a large pocket of a medical coat. The most original contributions to this volume are the chapters on bronchoscopic treatment of asthma and COPD. These are new and important additions, given the prevalence and the global burden of these disorders. In a more concise manner, compared with the previous edition, the book addresses novel optical and acoustic technologies for early diagnosis and staging of lung cancer. Guidelines for training in interventional pulmonology are addressed in a chapter on education. The “Advanced Bronchoscopic Techniques for Diagnosis

of Peripheral Pulmonary Lesions” and “Bronchoscopic Treatment of Peripheral Pulmonary Nodules” chapters are also new additions and presented in an original format. They address recent advances and novel concepts in minimally invasive bronchoscopic interventions such as ultrathin bronchoscopy, electromagnetic navigation, endobronchial ultrasound as well as the bronchoscopic placement of markers to assist surgical resection or radiation therapy for pulmonary nodules, intra-tumoral injection of chemotherapeutic agents, and bronchoscopic-guided radio-frequency ablation.

Throughout the chapters, there are useful tables summarizing biological effects of laser applications, differential diagnosis of central airway obstruction, indications and complications of various endobronchial therapies, and diagnostic yields of medical thoracoscopy for pleural effusions, to mention just a few. At the conclusion of each chapter there is an up-to-date list of references. In fact, virtually all chapters are well referenced and function as evidence-based reviews.

The pictures differ in quality and they are all in black-and-white. While this format may be adequate when the authors illustrate various instruments used in interventional pulmonology, it is not useful for understanding many bronchoscopic and thoracoscopic images presented. Given the relatively small size of the book, many bronchoscopic pictures are very small, which further limits interpretation. For those wishing to quickly review a particular procedure or technology, a comprehensive index is included. For those interested in a particular disease entity it would have been beneficial to incorporate more disease-specific terms in the index.

This is a great book for the busy healthcare providers who desire a concise answer to an interventional pulmonary procedure-related question. On a personal note, I will continue to use electronic databases and reference materials as the main resource for my clinical and research activities. I have already used this book, however, and I will continue to use it as a resource of well ref-

erenced reviews of interventional pulmonary procedures.

**Septimiu Dan Murgu MD**

Division of Pulmonary and  
Critical Care Medicine  
Department of Medicine  
University of California  
School of Medicine  
Irvine, California

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**How to Write, Publish, and Present in the Health Sciences: A Guide for Clinicians and Laboratory Researchers.**

Thomas A Lang MA. Philadelphia: ACP [American College of Physicians] Press. 2010. Soft cover, 389 pages, \$59.95.

When I received the invitation to review this book, I noticed that it was written by Thomas Lang. He coauthored, with Michelle Secic, an earlier book that I admire, "How to Report Statistics in Medicine" (first edition 1997, second edition 2006), which was also published by the ACP [American College of Physicians] Press. I use that book as a reference myself and cite it as a resource for others. So I jumped at the chance to read another book by him, and this new book exceeded my expectations.

Given the new book's title, it is not surprising that most chapter headings start with "How to" (eg, how to write effectively; how to write efficiently; how to display data in tables and graphs; how to write an abstract; how to write a grant proposal; how to write a journal article reporting original research; how to prepare drawings and photographs for publication; how to document biomedical images for publication; how to publish in a scientific journal; how to prepare and present a scientific poster; and how to prepare and present slides). The book also includes an overview of writing and publishing in the health sciences and a chapter on ethics in research and publishing.

Only one chapter overlaps between the old and new books. In this more recent book Lang gives a paragraph-by-paragraph description of how to write a report of original research, but refers to his earlier book for similar descriptions of "randomized controlled trials, cohort and longitudinal studies, case-control studies, surveys and cross-sectional studies, systematic reviews and meta-analyses, diagnostic test characteris-

tics, time-to-event (survival) analyses, economic evaluations (eg, cost-effectiveness analyses), decision analyses, and clinical practice guidelines" (page 158).

Lang addresses both clinicians and laboratory researchers who need to write, publish, or present to advance their careers. He uses examples and cites journals from both fields. His chapter on documenting biomedical images for publication has separate sections for clinical images and laboratory images. He also contrasts the conventions between the fields. He explains that most checklists for abstracts apply to clinical research, but not laboratory research; basic science journals are more likely than clinical journals to allow titles with declarative sentences giving results; and life science journals use different citation formats than social science, nursing, or basic science journals.

Lang's diverse experience shows in his sound advice, practical tips, and range of knowledge. He has edited and written about medicine and science and also taught scientific editing and writing. He advises young academics that books or book chapters rarely count as scholarly activity, and advises author groups to appoint a writing coordinator. He warns that journals may require authors to convert software field codes; posters made up of panels are easier to handle on a plane than posters in a mailing tube; and slides in portrait format may run off the screen when projected. Lang helped develop standards for reporting medical research, and so knows the consensus guidelines. He has taught medical writing internationally, so is familiar with United States, European, and Japanese policies on submitting nucleotide or amino acid sequence data, and with the Chinese Editology Society of Science Periodicals.

Lang disagrees with the medical writing establishment very gently. Checklists of requirements for reporting abstracts try to assess "the quality or validity of the research, rather than the adequacy of the abstract in communicating the relevance of the research to the intended readers" (page 102). "Journals using the AMA [American Medical Association] Manual of Style usually specify that conclusions not be indicated in the introduction, but a case can be made that they should be ..." (page 149).

Lang gives his opinions subtly. "[Investigators] found that trials with structured abstracts were no more completely reported

than were trials with unstructured abstracts. Oh well..." (page 107). "Some journals require industry-conducted statistical analysis to be verified by an independent statistician as a condition of publication. Curiously, no such condition is made for analyses by university-based statisticians" (page 155). After describing criticisms of medical communication companies, he merely says, "These practices are unethical, of course, but still common enough to be of concern" (page 200).

I wish Lang expressed his views more strongly and editorialized more. For instance, he could give strong warnings to authors about journals with publication charges and pay-for-publication journals. Since case reports are the fall-back for trainees fulfilling a requirement to publish, Lang's list of 4 journals that publish only case reports would seem to be very helpful. However, he does not mention that one of those journals requires an annual fellowship fee of \$185 for submitting a report, or that another has an article processing charge of \$790 for articles accepted for publication.

Lang illustrates concepts with examples, but he could have given more. He describes cases of suppressed research findings and early release of information critical to public health. However, he also could have described cases of publishing manipulated images and of failure to disclose conflicts of interest.

Lang describes some background research, but he could have told more. He cites investigations on how the Health Insurance Portability and Accountability Act affects research, how trial registries affect publication, and the prevalence of guest authors. However, he also could have cited investigations on the role of the last author in different specialties, how redundant publication affects meta-analyses, and the prevalence of ghost authorship. He applies "lessons from ... evidence-based writing and editing" (page 29), but does not tell us how that evidence was obtained or what it showed.

Since the book was written almost entirely by a single author, there is little overlap between chapters, and that overlap is cross-referenced. (Kevin DaSilva provided information and images for the section on documenting laboratory images.) Lang refers the reader to <http://www.PhDposters.com> for illustrations of posters. In fact, 5 of the 9 poster examples in this book also appear on that web site. While Lang cites each