

## Book report

# Handbook of Critical Care, Revised Edition

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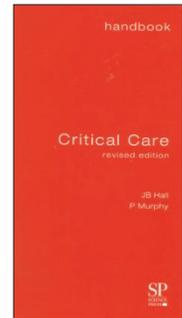
Published online: 26 October 2005

*Critical Care* 2005, **9**:E27 (DOI 10.1186/cc3889)

This article is online at <http://ccforum.com/content/9/6/E27>

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Hall JB, Murphy P: *Handbook of Critical Care*, revised edition. London, UK: Science Press; 2003. 278 pp. Paperback. ISBN 1858739861



Written primarily for medical trainees or nurses to use during their first exposure to critical care medicine, this 278-page spiral bound book is a pocket-sized basic intensive care manual. The handbook is divided into 15 chapters, eight substantial ones covering the major organ systems, as well as infection, nutrition, physical injury and toxicology, and brief chapters on scoring systems and obstetrics. Many of the sections are loaded with very clear pictures, comparative tables, diagrams and lists, and provide more than adequate information for juniors training in intensive care medicine. The definitions, aetiology, clinical features and differential diagnoses are well covered. Excellent use is made of bullet points and numbering, which vastly increases the clarity of presentation compared with many other books that are pitched at a similar audience.

The chapters are written in a didactic fashion, and there is very little discussion as to why a particular therapy or course of treatment is recommended. Consequently, it is no surprise that there are no references in the book to any of the major papers that form the critical care evidence base. No reference is made to the various national society guidelines on, for example, the management of trauma, head injury, or nosocomial infection. There is one reference to the Advanced Cardiac Life Support guidelines from the American Heart Association.

The handbook clearly has a very North American predisposition, and given its instructive nature this could prove confusing for trainees from Europe. Examples of the potential conflicts include the recommendation for the management of oliguria to 'insert a pulmonary artery flotation catheter, and then confirm filling with a transthoracic echo'. In the section on asthma, the two first-line recommended drugs are albuterol and methylprednisolone – drugs that are rarely used for asthma in Europe. In the section on measuring cardiac output, neither the PiCCO (Pulsion Medical Systems,

Munich, Germany) or LiDCO (LiDCO Ltd., Cambridge, UK) device is mentioned, both of which are frequently used in Europe. The section on infection and inflammation is weak, which is surprising given the focus on this topic in the critical care literature over the past 5 years.

This book has many positives, including the general clarity, layout and the good overviews of most of the subjects covered. However, I suspect that for some European trainees the advantages would be outweighed by the frustrations that may result from the differences in specific treatment protocols used between North America and Europe.

### Competing interests

The author(s) declare that they have no competing interests.