

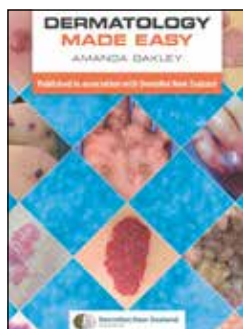
Book Reviews

DERMATOLOGY MADE EASY.

Amanda Oakley. Scion Publishing Ltd, 2017. Pp420, £29.99

ISBN 978 1 907904 82 0.

This textbook has been written by the well known Professor Amanda Oakley, who has become immortalised not only in her role as a leading dermatologist but more particularly as the person who established the world famous comprehensive website for the New Zealand Dermatological Society (DermNet NZ) which serves dermatologists and their patients on a global basis. Not a day goes by that I do not direct patients to this website for comprehensive and accurate information on their skin disorders. Armed with the 15,000 images from this website, Amanda Oakley is uniquely able to provide images on virtually any skin condition - undoubtedly this has helped her to produce a very impressive and comprehensive textbook of dermatology which includes more than 700 clinical images. The book format is a high quality paperback and an electronic version is also available.



This is a beautifully produced and illustrated textbook, which would give any medical student or general practitioner the information, knowledge and ability to treat a wide range of medical dermatology. It would also appeal to the increasing numbers of dermatology nurse practitioners. As an “essential fact” book it would not have sufficient detail for trainees in dermatology.

The book begins, as is often the case in introductory textbooks, by going through the terminology used in dermatology (such as papule, pustule or scale) before progressing to chapters based on differential diagnosis by symptoms (for example rash with fever or itch), by morphology (such as rashes with papules and plaques or skinny rashes) or rashes categorized by body sites. These chapters would certainly help guide someone with more limited dermatological knowledge according to the patient’s symptoms, signs and rash according to body location.

The chapters on individual categories of dermatological conditions are well organised and deal with all the usual dermatoses including infections, drug eruptions, eczema, hair problems infections drug eruptions eczema hair problems and pigmentary lesions. The text is written in a bullet point format making for easy reading and this, taken in combination with an extensive collection of high quality photographs makes the book easy to read and informative. One cannot emphasise enough the quality and comprehensive nature of the photographic content.

In an era where surgical dermatology is now at least 50%

of the work in any dermatology department, a criticism of this book is the lack of any section dealing with the surgical components of the specialty with this topic being compressed to 2 pages in a book of 420 pages. This book makes no attempt to deal in any serious way with the growing subspecialty of surgical dermatology. A chapter on skin surgery would inform those practitioners not wishing to do skin surgery themselves while helping those wishing to embark on the most basic skin surgery. Another deficiency was the lack of a specific section on dermoscopy, which is considered by many to be the “stethoscope” of current dermatology, and which has become routine with many general practitioners. While there is selected dermoscopy in some chapters this is not as extensive as one would expect given the popularity of dermoscopy in dermatology. A second edition of this book would benefit from a chapter dealing specifically with the elements of and common use of dermoscopy.

The last sections of the textbook deal with drugs used in dermatology and include sections on drugs such as hydroxychloroquine, acetrein, isotretinoin and immunosuppressants such as azathioprine and ciclosporin. By necessity, the information on many of these drugs is basic and suited more to medical students, general practitioners or the increasing band of general practitioners with a specialised interest. This section would not provide sufficient knowledge for practitioners wishing to prescribe these drugs but serve to give a source of information in monitoring such patients and watching for side effects.

My overall impression of this textbook is one of excellence in dealing with all aspects of medical dermatology. The book is impressive and the photographic illustration second to none for any book dealing with solely medical dermatology. It certainly exceeds in quality and information the contents of similar books written for medical students and general practitioners.

As someone who was interested in dermatology even as a medical student my only regret is that this book was not around when I was a student as it would have very adequately guided me into my beloved subspecialty. At a price of £29.99 it is remarkably good value. The book more than exceeds the requirements of any medical student but I suspect will be mainly useful for general practitioners and nurse practitioners with an interest in medical dermatology. I have little doubt that this will be a highly successful textbook given the popularity of the New Zealand dermatology website and the excellence of the clinical photography.

David Eedy

A HISTORY OF CAESAREAN BIRTH FROM MATERNAL DEATH TO MATERNAL CHOICE

Thomas F Baskett. Clinical Press Ltd, 2017. Pp 196, £19.00

ISBN 978-1-85457-065-9



What a great title for a book that looks historically, medically, economically and socially at the most common operation carried out on women in the world.

Right at the start, I fully recommend this book to everyone, and not just Obstetricians. Birth fascinates, intrigues, and challenges us all. I have yet to attend a dinner party and meet a woman who had a fully normal delivery, at least of their first baby!

Everyone seems to have had their own very personal experience, is keen to share same, and the stories they relate invariably stimulate participation by everyone at the table, male and female, informed or uninformed, teetotaler or lover of the grape.

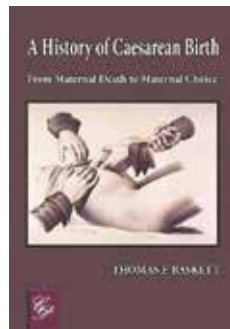
Knowledge of the birthing process and the intricacies of same are no bar to having a view on how birth should be performed. Where one should give birth? What analgesia, or none, should be accessed? Who should have a caesarean? Who should make that decision? Who should pay for the operation? The questions are endless.

There is no doubt though that the decision to have or not to have a caesarean is one of the most likely to arouse controversy.

What started as a cultural post mortem procedure and is now considered in many societies to be a matter of choice is expertly and uniquely described in this beautifully researched and written book by Tom Baskett. A world-famous Obstetrician who hales from these shores, and who in the latest of his prolific tomes has produced a book that is entirely readable, non-confrontational and leaves no questions unanswered in a rich series of chapters.

Caesarean sections were performed by doctors on live patients initially to save the mother's life alone. Indeed, the very operation, sadly in the early days, also sometimes hastened the mother's end. Anaesthetics were poor, infection could often not be controlled, haemorrhage could be noted and arrested, but blood could not be replaced.

Nature is a tough Obstetrician who appears to believe in survival of the fittest, whereas the very essence of medicine is to aim for survival of the weakest. Medics always want to work with nature when she's at her best, but there are times when she must be confronted. There is nothing as normal



as normal midwifery, and nothing as abnormal as abnormal midwifery, and nothing can go from one to the other so quickly, and often so devastatingly.

Left to nature alone, in the under resourced world up to 1 in 10 babies and 1 in 100 mothers will die. In these countries, there need to be far more caesareans performed, while some will say that in developed countries there should be far fewer.

The World Health Organisation (WHO), represented by a round table meeting of a few big names in the Reproductive world, tried in the 80s to determine once and for all the perfect Caesarean Section rate.

They came down on 15%.

A rate that for decades provided a big stick in many countries for non-obstetricians such as managers, politicians and various members of the caring professions to beat us Obstetricians with.

Unfortunately, that figure didn't take into account the huge number of variables, economic, cultural, medical support and facility access to name but four. There just can't be one rate that covers all.

The WHO recommended rate has now, at last, been withdrawn.

Caesarean section is now one of the safest surgical interventions in the world today. The decision to deliver a baby by this method saves countless lives. In the past decades with an improved clinical environment, increasingly the operation has been used to save the life of the fetus, and not just the mother.

Tom Baskett has left nothing out in his book. He addresses every aspect in a non-confrontational, fair, unbiased, logical and transparent manner. Did I say he came from Ulster? Ah! He left these shores long ago after his medical student and early training days, to take a Chair in Canada. That explains a great deal.

Before reading this book, I may have been aware of about 10-15% of the content, gathered by osmosis over the decades, but the other 85% was news to me and, I'd suggest, to any medic.

If you've gone to the trouble of reading this review, please go the extra metre and buy it for yourself, your partner, or your children you're trying to encourage into medicine. If nothing else, you'll be the star expert witness at the next dinner party!

Prof Jim Dornan

