

BOOK REVIEWS

A surgeon's guide to writing and publishing

M. Schein, J. R. Fardon, and A. Fingerhut; Shropshire, UK; 2001; TFM Publishing Ltd; 288 pages; \$30.00.

This book is written in conjunction with the *British Journal of Surgery*. The 20 chapters and 4 appendixes are written by a distinguished list of British and American authors. The book is intended for use by junior surgeons or surgeons who have little experience in writing for publication. As stated in Chapter 1, a quote from Francis Bacon may be helpful in answering the question, Why should a surgeon publish? "Reading maketh a full man, conference a ready man and writing an exact man." This chapter further defines two motives to publish, ie, egoistic motives, including academic and professional promotion, celebrity, development of professional contacts, and financial gain, and altruistic motives, including dissemination of knowledge and research.

In Chapter 3 there is a good explanation of "impact factor," which is a way to grade the quality of a journal. Impact factor has become a significant consideration in trying to decide where you would like your manuscript published. The higher the impact factor, the more prestigious the journal. Impact factor is calculated as the ratio of the number of citations or articles published by a journal over 2 years (in the entire literature) to the number of articles published over 2 years by a particular journal. The more cited a journal in other publications, the higher its impact factor.

Chapter 4 discusses available formats for publication, including case report, technique paper, cohort study, and case-controlled study, among others. There are helpful hints to guide the potential author through some of the pitfalls of each type of format.

Chapter 9 gives a good overview of statistics, and some resources to further your knowledge of statistics.

Other chapters include "Writing about a Surgical Technique," "How to Write a Chapter," "How to Edit or Write a Book," "Dealing With the Rejected Article," and "Internet Communication and e-Publishing," to list a few. The four appendixes provide helpful information on "Guidelines on Good Publication Practice," "Improving the Quality of Reports of Meta-Analyses of Randomized Controlled Trials," "The COSORT Statement: Revised Recommendations for Improving the Quality of Reports of Parallel-Group Randomized Trials," and a "Consensus Statement of Submission and Publication of Manuscripts."

I believe this book fulfills its objective of providing a useful tool to new authors who wish to start writing for publication.

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Laparoscopic surgery

Jorge Cueto-Garcia, Moises Jacobs, Michel Gagner, editors; New York; 2003; McGraw-Hill; 772 pages; \$195.00.

Modern laparoscopic surgery has entered its second decade. Its use is now commonplace in nearly every operating room worldwide and has revolutionized many aspects of general surgery. As such, a comprehensive reference covering this ever-expanding field has been missing. This first edition textbook has been assembled by leading pioneers in the discipline. At more than 700 pages, the text is lengthy and provides readers with both a multifaceted overview of the history, technology, and unique problems encountered during laparoscopic surgery, and in-depth detail of laparoscopic and endoscopic procedures being performed today. The

book is well organized in a familiar format used by traditional surgical reference texts.

This textbook is an excellent general reference on laparoscopic surgery for general surgeons, laparoscopic specialists, and trainees. The first section contains chapters that contribute substantial background knowledge necessary to anyone with an interest in operative laparoscopy, including history, technology, anesthetic, and general technical issues. The middle of the text contains sections devoted to laparoscopic and endoscopic therapies, organized by various organ systems. There are numerous detailed descriptions of advanced laparoscopic surgical techniques. The final section covers complications specific to laparoscopic surgery. The chapters provide a wealth of data, with the text referencing nearly all of the available class I and II studies available in the literature. The photographs and illustrations are a bit disappointing, however. The text is printed in black and white, with 16 pages of color plates in the center of the book, a format that is somewhat antiquated and quite inconvenient to the reader. Many of the photographs and imaging studies were reproduced at lower quality than one would expect. Some chapters, such as the one on cholecystectomy, lacked any illustrations at all. This publication is clearly designed as a reference text, not to replace a surgical atlas.

The section on vascular surgery was one of the smaller sections of the text. The chapter on laparoscopic aortic surgery is interesting; however, the techniques described have gained minimal acceptance. More commonly practiced techniques of endoscopic saphenous vein harvest and perforator vessel ligation are covered with a clear, concise overview of each topic. Notably absent from the text is coverage of endovascular or angioscopic techniques.

This textbook is an excellent reference for laparoscopic surgery. Its scope is fairly broad, yet not totally comprehensive. Its main strengths are the chapters on advanced laparoscopic abdominal surgery, such as gastroesophageal and biliary surgery. The book's chapters on laparoscopic complications are a must-read for any surgeon performing laparoscopy. There is a wealth of data in the chapters, and the tables provide a quick reference for the reader. The sections on vascular surgery are limited. In summary, this textbook would make a valuable addition to the reference library of any general surgeon practicing minimally invasive surgery.

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Vascular access simplified

Alun H. Davies, Christopher P. Gibbons, editors; Shrewbury, England; 2003; TFM Publishing, Ltd; 196 pages; \$39.95.

Vascular access simplified is a clearly written, straightforward discussion of all of the elements involved in creation and maintenance of dialysis access. The strength of the book lies in its clarity, brevity, and simplicity. The organization and presentation of the book permit rapid reading. Yet all major topics and critical issues are covered; thus the reader will be reasonably well informed regarding the basic data pertaining to dialysis access. A major strength of this format is that the Dialysis Outcome and Quality Initiative (DOQI) guidelines are clearly explained and succinctly presented in summary form. Because the authors practice in the United Kingdom, they typically see patients much earlier in the development of renal failure. They see, and write about, far fewer patients who need urgent access compared with their American counterparts. The single biggest problem with the book is deci-

phering its target audience. In the preface the editors state their belief that the book “may be particularly useful for the increasing numbers of vascular and other surgeons who are taking on dialysis. . . .” If so, this book will be too simple for most. Most trained vascular surgeons would look on this book as a primer, suitable for junior residents who need access to basic data and have little time for detailed or sophisticated discussion. Even with that as the goal, this book is not as efficient as the pertinent chapter in “Decision making in vascular surgery.” Also, the editors made little room in this “simplified” version to enlighten the reader concerning unanswered questions related to dialysis access. For example, one author sees little need for preoperative evaluation if physical examination demonstrates adequate arteries and veins, while another believes every patient should undergo a detailed venous examination in the noninvasive vascular laboratory. This problem extends to how these patients should be followed up and when interventions should be attempted to prevent access failure. In summary, this book belongs in the lending library of surgical services where residents are beginning their experience with patients who require dialysis access. In that setting the book is a valuable introductory resource.

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Contemporary cardiology: Platelet glycoprotein IIb/IIIa inhibitors in cardiovascular disease; 2nd edition

A. Michael Lincoff, MD, Editor; Totowa, NJ; 2003; Humana Press; 476 pages; \$149.50.

The importance of platelet function is increasingly clear in the practice of vascular surgery. Moreover, with increasing volumes of endovascular experience by practicing vascular surgeons, the need for safe, reliable, and rapid inhibition of platelet function becomes

imperative. This is a timely release of the 2nd edition of *Platelet glycoprotein IIb/IIIa inhibitors in cardiovascular disease*, by the investigators who characterized the utility of these drugs in trials. Although this text is largely aimed at interventional cardiologists, most vascular surgeons involved in peripheral intervention will be an equally good audience.

The book is divided into four sections, each of which stands easily on its own. The first section is a solid, up-to-date review of atherosclerosis and platelet physiology. Included also in this section is an interesting historic perspective on the development of the IIb/IIIa inhibitor family of drugs. The second and third sections are exclusively dedicated to coronary intervention and ischemic syndromes. The important trials of IIb/IIIa inhibitors in percutaneous coronary intervention are outlined here, including diagrams of treatment strategy used in each trial. Each of the currently available drugs is reviewed individually, and the final chapter of this section provides a practical rationale regarding drug and dosing choices. Although the discussion of coronary intervention may seem of little interest to vascular surgeons, the section translates easily to peripheral small vessel intervention.

The final section, “Practical issues and future applications,” is relevant to any clinician involved in the care of patients who have been exposed to IIb/IIIa inhibitors. Most useful are the individual chapters on monitoring of these drugs and their interactions with thrombin inhibitors such as low molecular weight heparin and direct thrombin inhibitors.

Overall, the book is well-organized and well-written. It is easy to read, and the first and final sections are relevant to all vascular specialists. The section dealing with percutaneous coronary intervention is best reserved for clinicians actively participating in peripheral intervention.

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In this regard, *A Surgeon's Guide to Writing and Publishing* is unique. Containing 20 chapters that address the spectrum of the writing process, this guide discusses such things as generating publishable ideas, writing the manuscript, writing style, where to publish, and advice to the author for whom English is a second language. Furthermore, it offers **CONTINUE READING**. *Academic Writing and Publishing* guides the reader through the process of writing and publishing. Packed with examples and evaluations of recent work, the book is presented in short chapters to reflect the writing and publishing process. Written in a lively and personal style, the advice is direct and practical. Divided into four parts, this accessible text **dissects the journal article and outlines research findings on how to write its constituent parts; examines other types of academic writing: books, theses, conference papers, letters to the editor etc.; describes other aspects of academic writing dealing with publishing delays, procrastination and collaborating with others.** James Hartley is Research Professor at the School of Psychology, The University of Keele, UK. 0111. This book is aimed specifically at surgeons who wish to have their work, observations, novel ideas to be published, but do not know the route leading to successful publication in the various leading and reputable journals. Each chapter (21 in total) will attempt to guide the budding writer, using simple and brief language and taking examples from daily life. Editors: M. Schein (Professor of Surgery, Cornell University Medical College & Bronx Lebanon Hospital, New York, U.S.A.) J. R. Farndon (Professor and Head of Division, University of Bristol and Consultant Surgeon, Bristol Royal Infirmary)