The ICU book, second edition

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This soft-cover book consists of 928 pages of text that are divided into 14 sections, 54 chapters, and four useful appendices. The preface states that it is the intention of the author to provide a generic book for intensive care units (ICUs), with an emphasis on fundamental principles. The book achieves its objectives admirably. The author is clearly a hands-on practitioner as well as a teacher, and this is reflected in the style and problem-oriented manner in which most of the important topics are approached. The strength of the book is in the author’s excellent explanations of fundamental physiology and pathophysiology, as they relate to intensive care problems and decision making. As an introduction to fundamental intensive care principles for ‘first timers’ in the ICU such as critical care nurses, rotating specialists in training, and new intensive care specialist trainees, this book is ideal.

Key principles of management are addressed. Chapter 1, ‘Early management of acute myocardial
infarction’ is an example of how an often complex and confusing subject can be reduced to a clear and simple synopsis of current evidence and practice. The chapter concentrates on the aspects of therapy that involve general intensive care and only briefly mentions therapeutic options when doctors of other specialties would take over primary patient care (eg cardiologists performing angioplasty). By only highlighting the role of general intensive care, the book is kept to a reasonable length. It also provides numerous easy-to-follow rules and algorithms for the newcomer to intensive care, which allow seemingly complex problems to be more easily resolved—the section on acid-based disorders is a good example.

The advantage of this being a single-author book is that the style is consistently good and explanations are clear and concise. The tables are informative and concise, and diagrams are attractive and useful. The book reads easily and desired information, if covered, is quick to find. An example of the author’s obvious teaching talent is the excellent chest radiograph reproduction of a feeding tube in the right main bronchus, which dramatically illustrates a teaching point that should never be forgotten once this radiograph has been seen. The absence of a chapter number at the top of each page is a little irritating, as most cross-referencing in the text is done by chapter. The book is far from comprehensive—chapters on trauma, burns, obstetrics, poisoning (other than selected pharmacological poisonings), and airway obstruction/management are missing. This book will always, therefore, need to be supplemented by other, more comprehensive texts. There is some disparity with respect to detail and content in certain chapters and this would also have to be overcome with supplemental reading.

Intensive care is rapidly changing, particularly with regard to evidence-based practice, and it is becoming impossible for any individual to be fully up to date in every field. It is not surprising therefore that there are some shortcomings in the discussion and suggested implementation of certain evidence-based practices. I do not, however, see the shortcomings as a major drawback, as discussing evidence-based medicine is not the primary objective of this book.

The ICU Book achieves what it sets out to do—encouraging the understanding of the fundamental pathophysiology of critical illness and the key principles of management of common intensive care problems. It is a valuable introductory text to intensive care and deserves a place in any departmental library. I will certainly refer to it for tips when asked to explain difficult concepts to both junior and senior resident staff in our ICU.

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