

A few words at the outset about the family of books written by the same group of authors will be helpful as a “road map” for potential readers. As the authors point out in the preface, this book grew out of a larger one (Fraser and Pare’s Diagnosis of Diseases of the Chest), and is different from the other text in the same family (Radiologic Diagnosis of Diseases of the Chest), which is aimed at radiology residents. The aim of Synopsis of Diseases of the Chest is to provide a more approachable text by distilling the information in the larger text, which, at approximately 3,000 pages, is more likely to be used as a reference text. At a little over 900 pages, Synopsis of Diseases of the Chest certainly fulfills its intent of being a text that can be read by a trainee without being overwhelmed by minutiae. Of note, the text does not include therapeutics. The authors have targeted this text at residents and clinicians interested in respiratory medicine. Respiratory therapists will find it useful as a concise summary of pulmonary medicine, although the lack of information on pharmacology and therapeutics does detract from its overall value.

There are 23 chapters in the book. The first 4 chapters discuss the basic underpinnings of pulmonary medicine. The next 18 chapters are organized by disease groups. The last chapter discusses a specific radiographic differential diagnosis problem—respiratory diseases associated with a normal chest radiograph. A comprehensive index is included. I will review a few chapters that exemplify the strengths and weaknesses of this text or address frequently read topics.

The first chapter, “The Normal Chest,” is a concise summary of the anatomy, physiology, and radiographic anatomy of the chest. This is an outstanding chapter and is an excellent introduction to the quality of information seen throughout the textbook. The chapter starts by discussing the geometry and dimensions of the airways. A brief overview of the cells of the respiratory system comes next. These discussions are concise and informative. The concept of the secondary lobule is discussed with a series of figures that illustrate the gross appearance and the histologic features of normal septae and the radiologic appearance of the septae in disease. The figures are excellent; they are well-selected for the detail they intend to show, and the reproduction is clear. The profusion of images necessitates flipping back and forth between the figures and their related text, but this is an unavoidable consequence of an otherwise excellent feature of the text.

The discussion on radiographic anatomy is an excellent synopsis of the subject. The anatomy on plain radiographs is discussed briefly, but includes all clinically relevant information. The radiologic anatomy of the hilum is well described, and there is a brief but useful discussion of the lateral radiograph. Pulmonary physiology is not as extensively dealt with as the other elements in this chapter. There are a few minor typographical errors in the chapter and an unfortunate convention of using “PCO2” to represent the pulmonary capillary oxygen tension. A more serious departure from convention is in the section on pleural fluid dynamics. The visceral pleural capillaries are identified as the main route for egress of pleural fluid, which conflicts with the current consensus that emphasizes the dominant role of the parietal pleural lymphatics.

Chapter 2 deals with methods of radiologic investigation. The chapter offers a brief recap of technical aspects of computed tomography, magnetic resonance imaging, and plain-film radiography. Although useful as an introduction, the chapter introduces many concepts without an adequate explanation for nonradiologists (eg, exposure latitude and exposures are discussed without an explanation of the relevance to image interpretation).

Chapter 3, “Radiologic Signs of Chest Diseases,” is another excellent chapter that is required reading for trainees, even if they are not contemplating finishing the rest of the book. The radiologic signs are arranged in a pattern approach. The differentials for each pattern discuss the most common causes. The figures are excellent, except for a few chest radiographs in which the intended details are not clear. The differences between the various conditions mentioned in the differential are explicitly discussed.

Chapter 4 covers all nonradiologic methods of diagnosing chest diseases, including a section on physical examination, which covers all the essentials but is not as extensively referenced as the rest of the chapter. The section on bronchoscopy has a few statements that are not completely accurate. For example, the need for antibiotic prophylaxis is mentioned in passing, but the statement does not accurately reflect the current consensus. Current guidelines state that routine prophylaxis is not warranted for bronchoscopy, but prophylaxis may be indicated in high-risk situations. The authors advocate measurement of coagulation variables, especially in patients who are to undergo transbronchial biopsy, but such testing has not been found helpful in identifying patients who bleed after transbronchial biopsies. The authors proscribe bronchoscopy in the 6 weeks following an acute myocardial infarction. The data supporting such caution are scant, and the few data that exist suggest that it is safe except in active ischemia. Pulmonary function tests are discussed, although not in as much detail as one would expect in a specialty textbook.

Chapter 7 deals with neoplastic diseases of the lung. There is a wealth of information in this chapter. The risk factors and pathogenesis of lung cancer are discussed in great detail. The pathologic characteristics of lung cancer are discussed very well, and the discussion is aided by excellent figures and color plates. The authors used both an imaging-based and a symptom-based approach to the diagnosis of lung cancers. The imaging-based discussion includes headings such as “solitary pulmonary nodule” and “soli- tary mass,” and the symptoms-based approach includes headings such as “bronchopulmonary manifestations” and “extrathoracic manifestations.” Almost all clinically relevant information has been included. Staging is discussed well.

Chapter 9 deals with chronic interstitial lung diseases. In general, this chapter is excellent, with detailed discussion of the clinical and radiologic features. The section on sarcoidosis is rather brief on the epidemiol-
ogy of sarcoidosis. Current theories on the pathogenesis of sarcoidosis are summarized well, although an explicit discussion of the CD4/CD8 ratio and T-helper subsets would have made this more complete. The clinical presentation of sarcoidosis is comprehensively discussed. The radiographic manifestations are discussed in considerable detail, with most of the text hewing to a pattern-based approach. The section on interstitial pulmonary fibrosis has a comprehensive, current discussion on the various theories of its pathogenesis. The subsection on prognosis and natural history is nearly complete, save for information on the more recent developments, such as the CRP score.

The pathological appearance of interstitial pulmonary fibrosis is very well discussed and illustrated; the only addition that might improve this section would be explicit discussion of the pathology features that differentiate usual interstitial pneumonia from the other patterns seen in interstitial pulmonary fibrosis. Nonspecific interstitial pneumonitis, acute interstitial pneumonia, and desquamative interstitial pneumonitis/respiratory-bronchiolitis-associated interstitial lung disease are very well discussed and illustrated.

Overall, this is an excellent text. The chapters provide concise, comprehensive coverage of each topic. There is more detail than in many other pulmonary textbooks of similar size. However, therapies are not discussed, which makes this book difficult to characterize; it is both comprehensive and deficient. It is nearly complete in the areas the authors chose to address. The absence of information on treatment, however, means that an additional resource must be used by clinicians who manage pulmonary disease. From a clinician’s perspective, this would mean the expense of an additional book and a less integrated discussion on each topic. This textbook would probably be of the greatest value to the physician-in-training or respiratory therapist who is looking for a second book to expand his or her knowledge of the radiology and pathology of the diseases they encounter in daily practice.

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The 6th edition of Manual of Clinical Problems in Pulmonary Medicine is a thorough overview of pulmonary disease. It is comprehensive in scope and includes common as well as rare conditions. Its best use is as a quick, easy-to-read reference guide. It is not as dense or detailed as a textbook, so it would be a useful pocket manual and should appeal to a broad readership. General practitioners, medical students, nurses, and respiratory therapists would find this a useful reference.

This spiral-bound book is well organized and packed with information. It is divided into 11 sections and 108 chapters on specific pulmonary ailments. Most chapters are 3–7 pages. The book is densely written, conveying a large amount of information in a small space. Commonly encountered problems duly receive greater attention than rare phenomenon. The book is almost entirely devoted to adult disease. The editors divided a broad specialty into easily understandable subsets. The subject index makes referencing a specific entity easy and convenient.

The pulmonary specialist may find this book lacking in detail but should get good use from the extensive references provided, and most of the references are accompanied by useful one-sentence descriptions. The book is compact in size, with a small font. One limitation is the lack of illustrations and the limited use of tables. Some of the information, such as the criteria for a positive purified-protein-derivative tuberculosis test, could be more readily accessed in tabular format.

The subjects the editors selected are a logical division of a broad specialty. They include pulmonary and diagnostic techniques, special problems, pulmonary infection, airways disease, acute respiratory failure, cardiovascular and thromboembolic disease, congenital and pediatric disease, chest wall and neuromuscular disorders, environmental and occupational diseases, idiopathic/immunologic/granulomatous diseases, and neoplastic diseases. The book would be strengthened by some reorganization. For example, the first 2 sections cover peripheral aspects of pulmonary disease, whereas lung cancer is left to the very end. However, since the text is a pocket reference, this is a small limitation. Although 57 different authors contributed, the text is concise, clear, and reads coherently.

Section I, on pulmonary diagnostic techniques, includes chapters on radiographic testing and procedures such as bronchoscopy, surgical lung biopsy, and mediastinoscopy. The useful chapter on preoperative pulmonary evaluation covers the importance of smoking-cessation prior to major surgery. Section II discusses special problems, and is the “miscellaneous” portion of the book. Here the reader will find chapters on pleural disease, aspiration pneumonia, pregnancy, hyperbaric oxygen, tobacco-control, and bioterrorism, among others.

Each section provides an initial general overview and important detail on various conditions. Section III illustrates this, and I will review it in detail. It covers pulmonary infection and is the longest section in the book, with 24 different chapters. The first chapter is an overview of pneumonia; it explains mechanisms by which organisms enter the lung, and the organisms for which different patients are at risk. The distinction between community-acquired and hospital-acquired pneumonia is explained, and general guidelines to antibiotic selection are provided. The microbiologic and radiographic aspects of diagnosis are detailed. Finally, the importance of host immune status is discussed.

Section III then moves into individual chapters devoted to specific infections. The topics include bacterial, mycobacterial, viral, fungal, and parasitic causes of lung infection. Useful chapters on hospital-acquired pneumonia and human-immunodeficiency-virus-associated pulmonary infections are included. The chapter on hospital-acquired pneumonia provides a balanced discussion of this complicated issue, including the challenge of diagnosing ventilator-associated pneumonia. The coverage of tuberculosis is extensive, with chapters on latent disease, active disease, and treatment, all by the same author, so there is very little repetition among them. There is occasional redundancy elsewhere in this section; several authors devoted substantial space to pneumococcal pneumonia.

By the conclusion of Section III the reader has a thorough grasp of the spectrum of pulmonary infection. Treatment is generally covered in less detail than other aspects of specific disease entities. Epidemiology, clin-
Those four volumes represent a milestone in chest disease and are a major reference source. Synopsis of Diseases of the Chest is a superbly edited, soft-cover version that emphasizes the major points in each section of the original work. Furthermore, it is shorter and much less expensive than the original four-volume set. The reproductions of chest roentgenograms are excellent although not quite so clear as the glossy reproductions in the four-volume set. Nevertheless, because the format and subdivisions of the synopsis are identical to those of the original four volumes, cross-reference is easy.

"... They were suffering "with inflammatory diseases of the chest, throat, and eyes." Cited from American Indian as Participant in the Civil War, by Annie Heloise Abel. After it is removed rub the body thoroughly, put on at once dry, warm clothing, and then exercise vigorously for a few minutes, until a genial glow is felt. Neglect of these precautions often results in rheumatism, neuralgia, and diseases of the chest, especially among delicate people and young women. Pupils should not be allowed to sit in the schoolroom with any outer garments on."

After a postgraduate course at Heidelberg he established himself in Berlin as a specialist in diseases of the chest and throat. He received his medical training at St Bartholomew's Hospital, where he qualified in 1863. Embed the video. Synopsis of Diseases of the Chest Download. Autoplay. OnOff.