



## Book Reviews

**Clinical Gastroenterology: A Practical Problem-Based Approach**, N.J. Talley, C.J. Martin. Churchill Livingstone, Sydney (2006). ISBN-10: 0729537749, ISBN-13: 978-0729537742

*Format:* Paperback book

*Purpose:* To provide an effective and rational guide to different problems through the clinical presentation, diagnostic work-up and treatment of various categories of symptoms.

*Content:* With the help of 12 Australian colleagues, the author examines 23 different gastrointestinal symptoms starting from the most commonly encountered (heartburn, hiccups, wind and gas, nausea and vomiting, loss of appetite and jaundice) to the less frequent ones (incidentaloma). After a short, clear history and description of the symptom, in each chapter can be found investigation and treatment of the problem and a short, well selected bibliography.

*Comment:* The authors are to be complimented on their ability to explain all concepts in a very clear, didactic and convincing way. We have not found any repetitions and in general an explanation can easily be discovered for each gastrointestinal problem a patient raises with his doctor.

*Final note:* An intelligent contribution, different from many other clinical gastroenterology books, which will largely keep both young and expert practitioners busy.

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**The Inflammatory Bowel Disease Yearbook. Volume 3**, C.N. Bernstein. Remedica, London (2006). 202 pp., Price: GBP 25. ISBN10: 1901346889; ISBN13: 9781901346886

*Format:* Hardcover book.

*Purpose:* To compile, in a small, easily readable book, the latest contributions in a continually evolving field like that of inflammatory bowel disease (IBD).

*Content:* The volume (the third in this series) contains six chapters prepared by world-renowned experts from the USA, Germany and Belgium, dealing with important and yet to be defined topics: the role and value of blood tests, the serious problem of paediatric IBD, the rapidly progressing

research into IBD genetics, the role of purine analogs and biological therapies and the intriguing problem of Crohn's perianal fistulas.

*Comment:* This book certainly contains a pleasant review of important and still controversial problems faced daily in the management of IBD. Although the individual contributions are well documented and properly illustrated, all the material included is very well known and debated by experts in the field, so the book risks becoming dated in a very short time.

*Final note:* A good, short book for the young physician making his first approach to IBD. Older (or more expert) gastroenterologists will very probably be less interested, having already read and studied all these problems in specialised journals.

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**The functional gastrointestinal disorders**, D.A. Drossman. Degnon Associates, McLean, Virginia, USA (2006). 1048 pp., Price: Not stated, ISBN: 0-9656837-6-1, ISBN-10: 0965683729, ISBN-13: 978-0965683722

*Format:* Hardcover Book

*Purpose:* The book is an update of the work done by the Rome teams of international investigators and clinicians in the field of evaluation and care of patients with functional digestive disorders (FGID). The book provides information on the epidemiology, pathophysiology, diagnosis and treatment of dyspepsia, irritable bowel disorders (IBS) and over 20 more FGIDs commonly seen in clinical practice.

*Content:* Seventeen chapters which update the previous sections on the oesophageal, gastroduodenal, bowel, biliary and anorectal disorders. Interestingly, some previous criteria have been changed, whereas others have been retained; for example, the time frame for FGID has changed, and it is now suggested that symptoms should originate 6 months prior to diagnosis and be currently active for 3 months. Functional dyspepsia has been divided into two conditions, postprandial distress syndrome and epigastric pain syndrome (similar to the previously defined "motility-like"

and "ulcer-like" dyspepsia of decades ago). IBS is now classified as diarrhoea-predominant, constipation-predominant and mixed-type, according to stool consistency, et cetera.

*Comment:* The previous Rome 2 book was published 6 years ago, and had roughly 300 fewer pages. My main concern is whether the time that has elapsed and the amount of published work is sufficient to justify this new effort. The answer is probably yes, although it is difficult within such a short period to fully appreciate the shortcomings of the previous criteria and the need for the subsequent changes. The increased bulk of the book does not seem to parallel the increase in interest, research and drugs that we have in the field of FGID. On the other hand, this is really a comprehensive book, a true *Bible* of FGID, and is absolutely mandatory for every researcher involved in planning or per-

forming a clinical study on FGID. I wonder, however, whether the simultaneous availability in the literature of three different definitions for, let us say, IBS (e.g. Rome I, II and III) will not create some extra confusion on this topic.

*Final note:* Amongst the 17 chapters I did not find a chapter devoted to the current status of FGID in gastroenterology; it might be interesting, in the next version, to examine at least in some developed world areas, the political and economic impact of FGID and its perceived nosological "legitimacy".

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