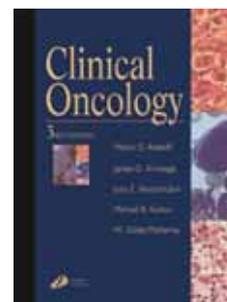


Science or humanism?

→ Raphaël Brenner



Two new oncological publications offer equal value in terms of their scientific and medical content. Where they differ is in their approach to patients and in their human vision.

Two clinical oncology books have recently hit the market: *Clinical oncology*, a blockbuster textbook of more than 3000 pages, and the more modestly sized *Manual of clinical oncology*. The first of these, edited by Abeloff et al, is a heavyweight work very similar in form to its main rival *Cancer: Principles and practice of oncology* (De Vita et al., reviewed in the last issue of *Cancer World*). *Clinical oncology* is divided into three main parts. Part one presents the basic science of oncology, part two addresses problems relating to cancer and cancer therapy, and part three is devoted to each specific malignancy, including childhood cancers.

The book offers an impressive array of information on science and clinical medicine, including an in-depth chapter on alternative medicine, and readers will find it a mine of information on almost every issue pertaining to the biological and somatic aspects of cancer. But, while the authors stress the importance of a multimodal approach to cancer therapy, they almost completely ignore the psychological aspects and their book suffers from the same misconception as DeVita's – namely that the disease, rather than

the patient, is the heart of the matter. There is barely a trace of the 'humanism' of which the editors boast in their preface. The strong point of the Abeloff textbook, compared to DeVita, is its generous four-colour design and user-friendly layout. Its weak point is the lack of detail in the table of contents and the limitations of the accompanying CD-ROM, which only contains illustrations featured in the book.

The second of the two books, the

Clinical oncology: 3rd edition

Edited by Martin D. Abeloff, James O. Armitage, John E. Niederhuber, Michael B. Kastan and W. Gillies McKenna
Churchill Livingstone/Elsevier, 3232 pp,
£195.00

Manual of clinical oncology: 5th edition

Edited by Dennis A. Casciato
Lippincott Williams & Wilkins, 778 pp, \$44.95

Manual of clinical oncology, is edited by Casciato et al. Oncology fellows, residents and general physicians searching for a handy, concise, up-to-date, comprehensive textbook on oncology will greatly appreciate this work. Although similar in structure to

Abeloff, here, specific malignancies are advantageously addressed in a uniform format, and attention is given to providing information useful for making diagnostic and therapeutic decisions at the bedside of cancer patients. What makes this thoroughly updated 5th edition really different from other oncology manuals is the human vision it conveys and the central role it affords to patients. The aim of the *Manual*, writes Casciato, is to “provide the caregiver with the ability

to temper today's popular interventions with good judgment and cautious open-mindedness to the promise of tomorrow.” In contrast to the more heavyweight oncology textbooks, Casciato succeeds in fusing together the technical, clinical and human approaches in oncology. The book has a soul, and it owes much to Barry B. Lowitz, co-editor of the first four editions, whose humanism is felt throughout the book, as in the wonderful chapter “Talking with Cancer Patients and their Families.” His witty remarks are also a plus. Here is a typical gem: “Avoid the cutting edge of oncology because it slices up too many people.”

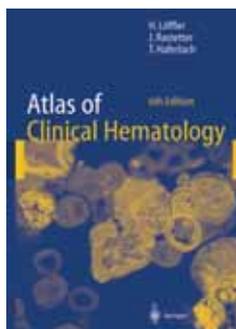
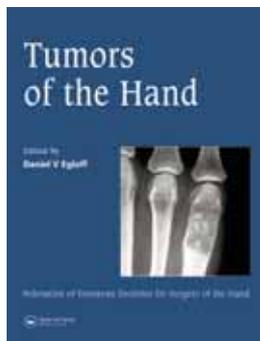
Tumors of the hand

Edited by Daniel V. Egloff
Taylor & Francis, published in
association with the European
Societies for Surgery of the Hand
224 pp, £75.00

Management of tumours of the hand, wrist and peripheral nerves requires a multidisciplinary team of pathologists, oncologists, radiotherapists and hand surgeons. This detailed and richly illustrated book is aimed at orthopaedic surgeons and oncologists versed in this field. It provides coverage of all the main issues of concern, from the anatomical to the oncological and surgical – both ablative and reconstructive.

The book also presents data of statistical value amassed by some of the leading researchers and institutions in the field. Written by European specialists, it covers almost the entire domain of hand tumours, benign and malignant. The latter include not only squamous cell tumours, but also less common tumours including basal cell tumours, rare melanomas, chondrosarcomas and osteosarcomas. An entire chapter is also devoted to metastatic tumours of the hand and wrist.

Fortunately, tumours of the hand tend to be identified relatively early, since they are more noticeable than other tumours, and the prognosis is therefore generally more positive.



Atlas of clinical hematology

3rd edition
H. Löffler, J. Rastetter
and T. Haferlach
Springer, 444 pp,
euro 199.95

With over 1000 illustrations, mostly in colour, the 6th revised edition of the *Atlas of clinical hematology*, which was first published fifty years ago, covers the whole spectrum of haematology. This includes all the microscopic methods in haematology which form the basis of diagnosis, as well as the modern immunologic, cytogenetic and molecular-genetic characterisation of the various haematologic diseases. Two thirds of the book is devoted to haematopoietic malignancies. The 2001 WHO classification of pathology and genetics of the haematopoietic and lymphatic tissues has been integrated in the *Atlas*, which also covers new types of leukaemia and lymphoma-type leukaemias of dendritic cells, intravascular large B-cell lymphoma and liver-spleen T-cell lymphoma. Normal results and pathological findings are compared, and the various findings made during therapy are depicted.

The quality of the illustrations and the clarity of the accompanying texts make the *Atlas* a valuable companion to the haematology and oncology professions.

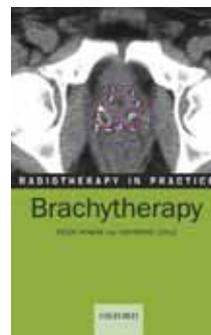
Radiotherapy in practice: Brachytherapy

Edited by Peter Hoskin and Catherine Coyle, Oxford University Press,
213 pp, £29.95

For non-specialists, and even more for patients, brachytherapy – derived from the Greek root brachus (short) – sounds barbaric and threatening. It consists in the delivery of radiation therapy at short range, using capsules or other sealed sources that are placed as close as possible to the site being treated.

Written by leading British experts in this field, this small book manages to make brachytherapy understandable to physicians and other professionals. The short, clear chapters, full of helpful illustrations, provide readers with the scientific fundamentals in the physics and dosimetry of the technique, and with practical guidelines on its use in common disease sites.

The book covers low-, medium- and high-dose-rate techniques, but the main emphasis is on high-dose-rate afterloading techniques, which allow the radioactive material to be inserted after the capsule has been placed. In combination with external beam radiotherapy, brachytherapy allows higher doses to be used with less damage to surrounding organs compared to external beam techniques.



Cancer pain: assessment and management

Edited by Eduardo D. Bruera and Russell K. Portenoy
Cambridge University Press, 500 pp,
£130.00

The last 15 years have seen major advances in our ability to control pain. Oral morphine has become the mainstay of therapy for serious cancer pain therapy, at least in the Western world, and specialists now agree that pain can be relieved in 70%–90% of cancer patients. Yet an increasing body of evidence shows that cancer pain is often poorly assessed and undertreated.

According to the editors of *Cancer pain*, the main reason for this lies in inadequate healthcare and poor professional education, which result in prejudice and a failure to actively listen on the part of many healthcare professionals, particularly physicians. Written by an international team of contributors, *Cancer pain* provides a truly comprehensive, clinically oriented, scholarly review of all aspects of this complex, multidimensional issue, including the ethical foundations of pain in medical illness and the particular way pain manifests itself in specific populations such as the elderly and children.

The textbook argues that management of pain is most effective when it is included as part of an integrated treatment plan, devised and implemented by an interdisciplinary team that includes family caregivers, and it contains a very helpful chapter that looks at the role of family caregivers in cancer pain management.

It also discusses the unique characteristics of cancer pain – its pathophysiology, epidemiology, clinical assessment, diagnosis and pharmacological and non-pharmacological management. Of note, among the latter, are chapters on psychological interventions and rehabilitation medicine interventions (ambulatory aids, massages, acupuncture, prayer, etc.). While rehabilitation disciplines have much to offer cancer patients in pain, observes Theresa Gillis, “access to rehabilitation disciplines is frequently limited by knowledge gaps among oncologists, patients and rehabilitationists themselves.” The book is a helpful resource for all those dealing with cancer pain – physicians, nurses and medical students alike.

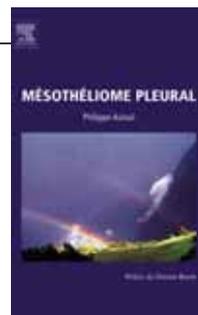
Le cancer du poumon

Edited by Jean Trédaniel
Masson, 334 pp, euro 60.00

Mésothéliome pleural

Edited by Philippe Astoul
Elsevier, 238 pp, euro 30.00

Two French publications give a complete and up-to-date picture of lung cancer and pleural mesothelioma. The management of lung cancer has seen two major advances in the last decade. One is the use of integrated positron emission tomography (PET) scan and computed tomography, which has dramatically



changed diagnostic evaluation, particularly in the detection of metastases. The other is chemotherapy, which has been shown to be effective and is now being used in conjunction with surgery and radiotherapy.

Despite these advances, lung cancer remains the number one killer among cancers in most of the Western world, and the majority of lung cancer patients are still being diagnosed at a late stage in the illness (IIIB or IV). The culprit is, alas, well known and Trédaniel rightly devotes two lengthy chapters to epidemiology and prevention.

Astoul's book, the first in French on malignant pleural mesothelioma, is of an equally high standard. Although the incidence of mesothelioma is low, it has steadily increased in France over the last two decades and is expected to rise significantly over the next two. Though the risk of the disease from asbestos exposure was acknowledged in 1960, thousands of workers have continued to be exposed to this killer material. Due to the long latency of the disease (30–40 years), these workers are expected to develop malignant mesothelioma in the near future, in what Astoul terms “a tremendous failure of preventive medicine.”

