

**PERIPHERAL ARTERIAL DISEASE:
DIAGNOSIS AND TREATMENT**

(Contemporary Cardiology.) Edited by Jay D. Coffman
and Robert T. Eberhardt. 356 pp., illustrated.
Totowa, N.J., Humana, 2003. \$129.50.
ISBN 1-58829-052-2.

PERIPHERAL ARTERIAL DISEASE AND ITS associated mortality are increasing worldwide. Although bench and bedside research have been widely neglected and the disorder is often overlooked, interest in peripheral arterial disease is growing rapidly. *Peripheral Arterial Disease* supports this interest by pointing the way toward less invasive procedures that can be used to diagnose and treat this disease.

“Noninvasive and endovascular approaches first” is the fiber that 27 well-known authors have threaded through 19 chapters covering the most important aspects of peripheral arterial disease. Chapters on the causes, epidemiology, pathology, pathogenesis, and natural history of peripheral arterial disease are followed by chapters on clinical aspects, diagnosis, and the management of the disease, as well as discussions of risk factors associated with treatment. The book also includes chapters on the special aspects of peripheral arterial disease in women and in patients with diabetic foot disease or vasculitis.

The focus is clearly on peripheral arterial disease, since neither central and peripheral aneurysmal disease nor cerebrovascular and supra-aortic arterial disorders are covered adequately. The prevention of myocardial and cerebrovascular events and the use of antiplatelet therapy, on the other hand, receive extensive attention. The excellent disquisition on exercise rehabilitation, which is the most effective conservative treatment of peripheral arterial disease, is exemplary.

This comprehensive textbook has a number of strengths. The editors have assembled as contributors a team of experts who emphasize the analysis of primary data from key studies in the field and who provide thorough reference lists. Besides chapters that deal with material that has already been presented in a number of books, readers will also find valuable chapters on subjects that are rarely seen elsewhere, such as the one on arterial vascular disease in women. Nearly every aspect of periph-

eral arterial disease is covered, providing a comprehensive overview but with the disadvantage of occasional superficiality in the chapters dealing with well-known modes of treatment. This blemish, however, can easily be overlooked in a readable book limited to just over 350 pages, and it is generously compensated for by the extensive discussion of emerging endovascular, genetic, angiogenic, and drug therapies for peripheral arterial disease. A small but sufficient number of well-labeled figures throughout the book facilitate comprehension.

The book is dedicated to two distinguished vascular specialists who died last year. The chapters by these expert clinicians and investigators are the highlights of the book. Gene Strandness, of the University of Washington, developed diagnostic ultrasonographic techniques, and his chapter on arterial hemodynamics rests on a lifetime commitment to work in this area. He designed the first electric analogue model of the peripheral circulation, which is a great teaching tool. The book is also dedicated to Jeff Isner of Boston, who pioneered clinical applications of gene therapy.

Peripheral Arterial Disease is an outstanding textbook — less so for specialists, but all the more an excellent reference for students, residents, and general practitioners. On the bookshelves of scientists and clinicians in related disciplines and in multidisciplinary teams, this book will provide a state-of-the-art review of current knowledge of peripheral arterial disease, and it will undoubtedly remain an excellent reference for some years to come.

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CORRECTION

The Dilemma of Medicaid (May 22, 2003;348:2140-8). On page 2143, line 11 of the left-hand column should have read “from an estimated \$4.8 billion to \$21.0 billion,” rather than “to \$210 billion,” as printed. We regret the error.