and axillary arteries. Initial results and long-term follow-up. Clin Radiol 46: 104–107
6. Selby JB, Matsumoto AH, Tegtmeyer CJ, Hartwell GD, Tribble CG, Daniel TM et al. (1993) Balloon angioplasty above the aortic arch: Immediate and long-term results. Am J Radiol 160: 631–635
7. Kachel R, Endert G, Basche S, Grossmann K, Glaser FH (1990) Percutaneous transluminal angioplasty of carotid, vertebral, and innominate artery stenosis. Cardiovasc Intervent Radiol 10: 142–146
8. Vitek J (1989) Subclavian artery angioplasty and the origin of the vertebral artery. Radiology 170: 407–409
9. Soulen MC, Sullivan K (1991) Subclavian artery angioplasty proximal to a left internal mammary coronary artery bypass graft. Cardiovasc Intervent Radiol 14: 355–357
10. Georges NP, Ferretti JA (1993) Percutaneous transluminal angioplasty of subclavian artery occlusion for treatment of coronary – subclavian steal. AJR 161: 399–400
11. Levitt RG, Wholey MH, Jarmolowski CR (1992) Subclavian artery angioplasty for treatment. JVIR 3: 73–76
12. Siegal W, Loop FD (1976) Comparison of internal mammary artery and saphenous vein for myocardial revascularization circulation. Circulation 3 (Suppl S4): 1–3
13. Dorros G, Lewin RF, Jamnadas P, Mathiak LM (1990) Peripheral transluminal angioplasty of the subclavian and innominate arteries utilizing the brachial approach; acute outcome and follow-up. Cathet Cardiovasc Diagn 90: 71–76

Book reviews

European Radiology

Haller J. O., Slovis T. L.: Pediatric Radiology, 2nd edition. Heidelberg, New York, Hong Kong: Springer-Verlag, 1995, pp 217, Figs. 201, 96 $

Eleven years after the first edition, the authors bring us a new and updated book because new developments in imaging modalities such as ultrasound, CT, and MRI have contributed to more detailed diagnostic imaging, also in pediatric radiology.

This small book (217 pages) consists of nine chapters which read easily, and after each chapter there is a small list of references.

The reader is confronted with the teaching aspects in all nine chapters. The authors find it more important for the reader to learn how to interpret a radiograph and what the most useful and informative next radiological investigation is in a common pathology, than to give a typical extensive summation of pathology as we find in other textbooks.

The physical aspects of the several imaging modalities and their applications are discussed briefly in the first chapter. A brief reflection is made on radiation dose, which is very important in pediatric radiology.

The subsequent eight chapters describe chest examination in children, the chest in the neonate and very young infant, gastrointestinal tract, urinary tract, abdominal and pelvic masses, skeleton, central nervous system and special procedures such as arthrography, sialography, angiographic procedures, and interventional radiography.

Technical factors are discussed in the beginning of most chapters, followed by a description of a logical interpretation or workup of the radiographs and/or contrast examinations. Common clinical situations are described briefly for each topic.

The illustrations (radiographs, computed tomograms, sonograms, MR images, and nuclear medicine images) are mainly of good quality. The drawings and tables are very informative and clear.

You can find 15 important "rules" spread throughout the book and some illustrations are followed by quiz-like questions answered in an appendix.

In conclusion, the concept of writing makes this book very useful for radiologists in training as an initial confrontation with basic pediatric radiologic topics. A more detailed description of pathology requires another classic pediatric imaging textbook.

L. Breysem, Leuven

Raby N., Berman L., de Lacey G.: Accident & Emergency Radiology: A Survival Guide. London, Philadelphia, Toronto, Sydney, Tokyo: WB Saunders Company Ltd, 1995. 254 p, ISBN 0-7020-1905-4, £15.95

The vast majority of patients seen in the Accident & Emergency Department are managed initially by relatively inexperienced junior doctors. Furthermore, it is also common practice to delegate the reporting of the A & E radiographs to junior trainees in radiology. This "survival guide" is designed to help these doctors reduce the incidence of misdiagnosis.

This book is based on an instructional course developed over the many years that the authors have been teaching A & E radiology. The facts are presented in a simple and logical manner with clear and concise advice on the systematic approach for scrutinising the radiographs. It contains a vast wealth of facts distilled from many sources (orthopaedic and radiological) which are succinctly grouped covering the practical aspects of radiographic anatomy, normal variants, signs of injury and common pitfalls in interpretation. At the end of each chapter the "key points" to remember are summarised and relevant references are added for further reading.

The first chapter covers the basic principles of image acquisition and emphasises the principle requiring two views in the radiological examination of an injury. The next 13 chapters are superb, covering trauma to the appendicular and axial skeleton. One can use the relevant chapters for quick reference as and when the need arises. The next two chapters cover somewhat superficially some aspects of chest and abdominal conditions, and are followed by an additional two useful chapters on penetrating and swallowed foreign bodies.

The authors quite rightly have included an abundance of excellent computer-generated drawings. The reproduction of radiographic abnormalities on the illustrations, however, does vary. Although the quality is adequate in most cases, there are instances when one has to rely on the helpful "arrows" to identify the relevant abnormalities.

At just under £16 this pocket guide is a must for every "white coat" in the A & E Department. It should also serve al an ideal primer to trainee radiologists who initially find themselves off "the deep end".

V. Pullicino, Shropshire