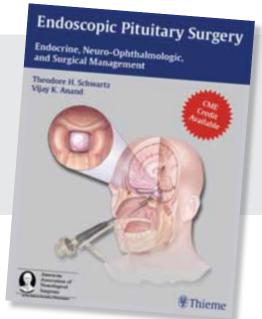
Endoscopic Pituitary Surgery: Endocrine, Neuro-opthalmologic and Surgical Management

By Theodor Schwartz and Vijay Anand

Thieme publishers, Stuttgart- New York, November 2011, 1st Edition, 384 pp, 300 illustrations Hardback, \$179.99, £145.99, € 169,00

ISBN: 9781604063479

"Practical Endoscopic Skull Base Surgery" published by the same authors in 2007 has been one of the most useful books that I read early in my practice and beautifully illustrated all the caveats and pitfalls awaiting someone embarking in endoscopic skull base surgery. So, I was eagerly awaiting their second combined book, and I was not disappointed. It is even better illustrated than their previous book, it is balanced, authoritative and clear; there are some excellent chapters on anatomy of the area, radiologic assessment of pituitary tumours as well as chapters dealing individually with prolactinomata, TSH producing tumours, acromegaly and Cushing disease. But where the book really shines, and testifies to the majestic overview of the authors, is in beautifully and objectively discussing all the current controversies in the area. Although the authors make it clear that they belong (like most of us) in the endoscopic era of management of pituitary tumours, they nevertheless provide the podium to a very balanced discussion of the merits of the microscopic versus endoscopic approach, ("Microscopic and Endoscopic Transphenoidal pituitary surgery: A reasoned and balanced dialectic"), which, I must admit, made me a much less fanatic proponent of the endoscopic approach. The same balanced, informed approach is also applied to a number of other current controversies in pituitary surgery, such as the use intraoperative MRI and the use of 3D endoscopes. A number of international experts, a virtual "who is who" of endoscopic skull base surgery have contributed with chapters, including Carl Snyderman, Paolo Cappabianca, Dharambir Sethi, Giorgio Frank and Ernesto Pasquini, Daniel Kelly and Felice Esposito. There are also three excellent small chapters on management of postoperative sinusitis, the management of arterial injury and CSF leak that will prove useful to us lesser mortals, who despite all our best efforts, have the complication.



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