

## PDF hosted at the Radboud Repository of the Radboud University Nijmegen

The following full text is a publisher's version.

For additional information about this publication click this link.

<http://hdl.handle.net/2066/23447>

Please be advised that this information was generated on 2018-07-07 and may be subject to change.

## Book reviews

### **Advanced Gynecologic Laparoscopy. A Practical Guide**

Edited by P.G. Cusumano and J.A. Deprest

The Parthenon Publishing Group New York — London, Casterton Hall, Carnforth, Lancs LA6 2LA (UK), ISBN 1-85070-655-7 Hardback 236 pp, Price \*55.00/\$89.00, 1996

Laparoscopic surgery is a promising and fast growing surgical technique. This type of surgery is a challenge for the surgeons who perform it and the companies that make the necessary instruments.

This beautiful publication is easy to read and contains attractive pictures and useful schemes for performing advanced gynecologic laparoscopies.

We have to admire the courage of the editors in opening this publication with a chapter containing critical reflections on advanced gynecologic laparoscopy by Professor Brosens. This chapter must be obligatory literature for those residents and gynecologists who think that they can do everything both by laparotomy and also by laparoscopy.

It is striking — again in a positive way — to see the impressive contribution of our very inventive Belgian colleagues in this book. There are of course some points of concern. We are missing the contributions of the godfathers of the two totally different schools of laparoscopic surgery in Kiel and Clermont — Ferrand. The other concern — but not really in the scope of this publication — is that we lack a critical prospective comparison of the same surgical techniques by laparotomy and by laparoscopy, because at present it is not yet scientifically proven that patient care with laparoscopy is statistically significantly better in certain procedures than laparotomy.

Concerning advanced gynecologic surgery we want to express our wish for:

- more publications like this.
- more and less expensive courses in laparoscopic surgery, accredited by local gynecologic societies.
- more international prospective studies to prove that laparoscopic techniques are not only fascinating but also beneficial for patients.

Wim N.P. Willemsen  
Nijmegen, The Netherlands

PII S0301-2115(96)02422-2

### **Transvaginal Sonography in Infertility**

B. Yee, G.F. Rosen, D.L. Cassidenti

Lippincott-Raven, Philadelphia, 1996; 225 pp.; \$98.00; ISBN 0-7817-0305-0

This is an authoritative slim volume on a subject of increasing interest. The division into sections makes it particularly easy to use as a reference book.

The first section on 'Normal Pelvic Anatomy and Techniques' proves useful and the authors' own description of orientation using an icon of the bony pelvis is interesting. Unfortunately there is an error in page 5 referring to this, where right and left are transposed, which confused initially. The physics review is basic and clear. The second section entitled 'Evaluation and Management of the Infertile Woman' begins with detailed physiology of the menstrual cycle which is well correlated with ultrasound appearances. Uterine and tubal problems are discussed with good ultrasound images.

The third section 'Ultrasound in the Treatment of Infertility' deals with ovulation induction and assisted reproductive techniques. These chapters contained rather too much detail on treatment for a radiologist. However, this was countered by an excellent fourth section on 'Ultrasound in the Diagnosis and Management of Early Pregnancy'. Here, physiology, biochemistry and ultrasound came together in a clear and informative way. The final section includes brief descriptions of the pathology of the pelvic organs with their effect on fertility.

In summary, this is a well conceived book which covers the subject succinctly. The illustrations are relevant and particularly good and it is well referenced. The errors should be remedied in later editions. As a radiologist with a special interest in gynaecological ultrasound I enjoyed reading this book. At a cost of \$98.00 I suspect this book is not for individual purchase, but it would be a valuable addition to any ultrasound department library.

Delia Martinez  
Leeds, UK

PII S0301-2115(96)02427-X

Lippincott had its headquarters in Philadelphia, Pennsylvania, with other United States locations in Baltimore, Maryland, New York City, New York, Hagerstown, Maryland, and Ambler, Pennsylvania, as well as locations in London, Hong Kong, and Sydney. Most of those offices are still in service under Wolters Kluwer. History[edit]. The publisher had its origins in a Philadelphia bookstall opened by Benjamin Warner and Jacob Johnson in 1792. Joshua Ballinger Lippincott assumed control of the firm in 1836. It was later merged with Raven Press in 1995 to become Lippincott-Raven Publishers, which then merged with Williams & Wilkins, ultimately forming Lippincott Williams & Wilkins in 1998. See also[edit]. Journals published by LWW. Transvaginal colour flow imaging of the uterine arteries during the ovarian and menstrual cycles. *Hum Reprod* 1990; 5(4): 391-395. 15. Achiron R, Levran D, Sivan E, Lipitz S, Dor J, Mashiach S. Endometrial blood flow response to hormone replacement therapy in women with premature ovarian failure: A transvaginal Doppler study. 27. Pritts EA, Parker WH, Olive DL. Fibroids and infertility: an updated systematic review of the evidence. *Fertil Steril* 2009; 91(4): 1215-1223. The potential value of magnetic resonance imaging in infertility. *Clin Radiol* 1995; 50(2): 75-79. Perioovulatory follicular volume and vascularization determined by 3D and power Doppler sonography as pregnancy predictors in intrauterine insemination cycles. *J Clin Ultrasound* 2011; 39(5): 243-247. P or PP One Or Two Seals. Bearing housings for aligning cylindrical roller bearings metric series. Gg, fg. GG51. GG 51 Plummer Block Housing FG Flanged Housing. 140. Sphere Bore In mm. 2). Immune infertility was diagnosed in 61% of patients prior and 55% after the surgery showing no statistically significant difference ( $p > 0.05$ ). Changes in the volume, concentration and morphology of the spermatozoa were also statistically insignificant (Table 1;  $p > 0.05$ ). Statistically significant increase in the amount of spermatozoa with progressive motility ( $p < 0.05$ ) and in the estimated number of progressively motile and morphologically normal spermatozoa in the ejaculate was demonstrated in 67% of patients ( $p < 0.05$ ). (b) Progressive motile spermatozoa PR. 75. 225. 200 175  $p = 0.00006$ . 60. Sizyakin DV. (1996) Mechanisms of infertility in varicocele patients. PhD thesis, The Rostov State Medical University, Rostov-on-Don.