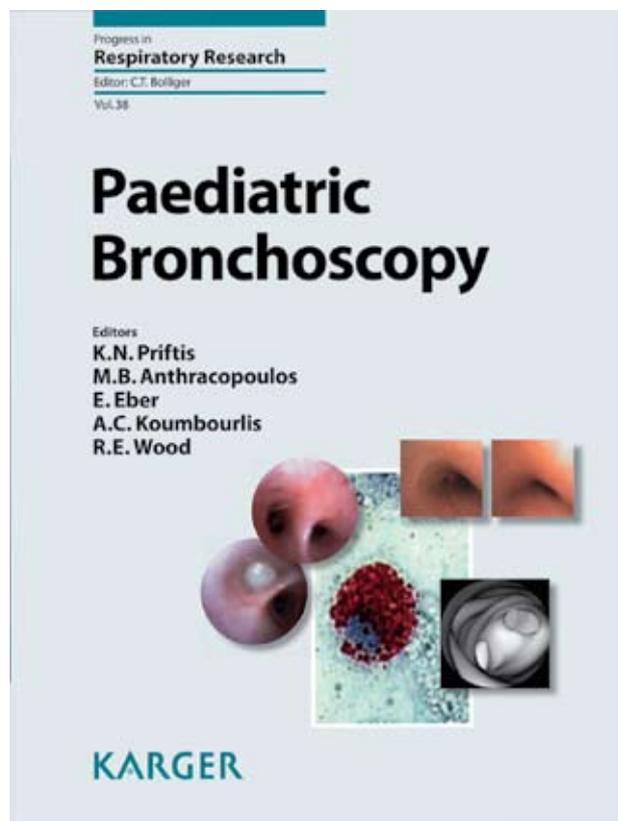


# K.N. Priftis, M.B. Anthracopoulos, E. Eber, A.C. Koumbourlis, R.E. Wood - "Paediatric Bronchoscopy"

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**K.N. Priftis, M.B. Anthracopoulos, E. Eber, A.C. Koumbourlis, R.E. Wood**

I envy them!

A little over 30 years ago, returning from Philadelphia with a flexible bronchoscope in my luggage, I was fully aware that I was carrying a treasure, a valuable tool that would distinguish pulmonology as an essential and respected medical specialty. Little did I know, however, that one day I would witness Greek pulmonologists (or paediatric pulmonologists) edit-

ing a medical book with international acceptance and validity about bronchoscopy.

The 38<sup>th</sup> volume in the series "Progress in Respiratory Research", entitled 'Paediatric Bronchoscopy', Karger Publishers, is edited by K. N. Priftis, M. B. Anthracopoulos, E. Eber, A. C. Koumbourlis and R. E. Wood. The predominating Greek contribution is considered a great success for Greek pulmonology, taking into account that a previous volume "Interstitial lung disease" was edited by U. Costabel and R. DuBois. This volume has been modestly described by its editors as a state of the art review, rather than a textbook. However, it serves as both a reference book (or textbook) and a full updated review of the current literature up until 2009.

Its subject matter ranges widely from practical issues, such as the necessary equipment and anaesthesia, to everyday clinical practice, including use of the bronchoscope for bronchoalveolar lavage (BAL), and for investigation of various clinical entities, such as asthma, atelectasis and middle lobe syndrome, as well as in other specialized circumstances, such as lung transplantations, in paediatric intensive care, etc.

I was particularly intrigued by the chapters comparing bronchoscopy with a flexible bronchoscope with other "competing" techniques, such as the rigid bronchoscope or virtual bronchoscopy, which clearly demonstrate that these techniques are not opposing, but complementary. These chapters contain a novel "wisdom", which is the simultaneous use of flexible and rigid bronchoscopes by a paediatric pulmonologist and an ear, nose and throat (ENT) specialist. In support of this novelty, the "guru" of paediatric bronchoscopy and senior editor of the volume, R.F. Wood (Cincinnati, USA) refers to himself as professor of both paediatrics and ENT and describes his long-lasting collaboration (as a paediatric pulmonologist) with the ENT specialist R. Cotton. Just consider what happens in Greece...

Professor Wood has written one of the two most impressive chapters of this volume, the final chapter "A four-decade perspective on paediatric bronchoscopy – Where have we come from, and where are we going?", while the other is the preface written by that other "guru", A. Bush (Brompton Hospital, London, U.K.). These two chapters provide a complete overview of the current use of the flexible bronchoscope in children, and describe the initial concerns after the first years of its application, and the ensuing enthusiasm about its bright future. This is exactly what we would record 10-20 years ago as pulmonologists specializing in bronchoscopy.

This volume is addressed not only to paediatric pulmonologists and bronchoscopy specialists, but also to paediatricians dedicated to improving the care of their young patients, as through this volume they can become acquainted with the vast potential of this technique and contribute to the advance of paediatric pulmonology. Moreover, this book is relevant for all pulmonologists specializing in bronchoscopy, of whom there are now significant numbers, after 30 years of effort. They will be able to study the similarities and differences between the use of rigid and flexible bronchoscope in children and adults, which may possibly lead to the implementation of new ideas. As an example, they could initiate collaboration with other medical specialists who perform bronchoscopy (e.g., rigid bronchoscopy in ENT, virtual bronchoscopy in radiology). I consider this volume to be of great value for one more, rather selfish, reason. Until there are adequate numbers of paediatric pulmonologists/ bronchoscopy specialists in all the major hospitals in Greece, we will continue called upon as pulmonologists to fill the gap and perform bronchoscopy on older children. I myself have pulled nuts and pen caps out of a child's bronchus on many occasions, while a plane was waiting at the airport to transport the patient from Ioannina to Athens...