Pediatric Critical Care – Fourth Edition

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This is the fourth addition of a textbook which is long recognized as one of the core reference textbooks in the specialty of pediatric critical care medicine (PCCM). This edition should be seriously considered by trainees embarking on a career in PCCM or by established specialists seeking to update their desktop reference book.

Similar to the other textbook models, the list of chapter authors is drawn from many of the experts who frequent international conferences along with authors who are beginning their careers. It is notable that the chapter authors are drawn predominantly from North America, with surprisingly few authors from elsewhere in the world. This approach has the advantage of contributing content that reflects contemporary North American practice, terminology, and nuances; however, with this type of focus, it has the disadvantage of possibly losing other perspectives, as PCCM is truly an international specialty.

For the most part, the textbook format and writing style is consistent, although there are some chapters that are particularly strong and others that leave room for improvement. In my review of the textbook, I found the chapters in which I have a professional interest to be especially strong. I also used several chapters to structure resident tutorials and found them to be a comprehensive resource. The textbook was not designed as a resource for a resident to use when setting a ventilator at 4 a.m. while on-call, but it does provide depth into the fundamentals of the specialty.

This edition of the book comes with an online version, which makes it accessible for those who wish to consult the textbook while on the go. The online version is intuitive

and easy to use, and by using the search function, readers can quickly identify whether the book has the answer to a focused question. More often than not, I received answers to my focused questions when I made use of the search function, which, in my view, is characteristic of many similar texts.

At the beginning of the textbook, the editors acknowledge that pediatric intensive care is a resource-intense high-acuity specialty provided largely by academic institutions. There are some especially solid chapters that address institutional organization, ethics, family-centred care, quality metrics, research, education, and evidence-based medicine. I applaud the editors for this approach, as they recognize that most of an intensivist's time is spent in pursuing the academic and administrative mandate of an institution and not in direct patient contact. This first part of the textbook provides a foundation for this perspective, and it is as important as the “comfort food” in the following chapters based on systems and disease.

The focus of the remainder of the book is on applied physiology, pathology, and therapeutics—what a reader would expect from an intensive care textbook. The cardiovascular system is the main focus of the second part of the textbook. While the basic knowledge of this system is adequate, in my opinion, the coverage of the pediatric congenital cardiac surgical population is not comprehensive enough to meet the challenges of working in a large congenital cardiac surgical program. Programs that have large cardiac intensive care components would require an additional core textbook to cover this material in detail. Yet, I do not consider this as an indictment of this textbook but rather the reality of what some might consider a sister specialty.

The neurocritical care section of the text is particularly strong and comprehensive. The textbook also includes

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expertise on aspects of the specialty that are becoming increasingly relevant, such as genomics, proteomics, and the advances in our understanding of molecular biology and immunology. In my view, this portion of the book is a “must-read” despite the reality that these are rapidly evolving areas of medicine.

In summary, while I recognize that choice of textbook is largely personal preference, I consider this edition to be in

keeping with the current trends of the PCCM specialty, and it should stand the test of the next five to ten years in the evolution of the specialty.

Competing interests None declared.