Hans Peter Dietz, Lennox P.J. Hoyte, Anneke B. Steensma (eds): Atlas of Pelvic Floor Ultrasound

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This book takes a novice to the use of ultrasound in urogynaecology through an amazing journey exploring the use of this modality in assessing female patients with pelvic floor dysfunction. Its simplicity, rich practical detail and clear images will persuade the reader of the value of this investigation in day-to-day clinical practice.

The book starts by describing the clinical anatomy of the pelvic floor, which provides the basis from which one can understand the images obtained by different ultrasound techniques applied in examining the pelvic floor. This is supported by an illustration of magnetic resonance imaging of the female pelvis in all views at various levels to enable understanding the soft tissue images obtained on static 2-dimensional ultrasound, as a first step in appreciating this imaging modality.

Basic ultrasound physics and equipment are described after that, to enable appreciation of the principles of ultrasound image generation, before outlining the fine and advanced qualities available in modern computerised ultrasound machines, including 3- and 4-dimensional imaging, volume contrast imaging, speckle reduction and tomographic ultrasound imaging. Different techniques used in visualising the pelvic floor, including translabial (transperineal and interiotal) as well as transrectal and trans-

vaginal ultrasound, are explained with emphasis on position and technique of examination as well as views and their interpretation.

This is followed by a systematic, detailed and practical explanation of the examination technique for as well as the significance of different signs detected on ultrasound imaging of the female pelvic floor. These signs include bladder neck descent, rotation and funnelling, retrovesical angle, urethral sphincter, colour Doppler detection of urinary incontinence, levator activation on stress, bladder wall thickness, position of the cervix and pouch of Douglas, or vaginal vault in hysterectomised patients, vaginal wall prolapse, the function of the anorectum, the appearance of the anal sphincter as well as detection of collections as well as solid and cystic masses. After synthetic material insertion, the signs include tape position, appearance and symmetry as well as the location of any recurrent prolapse after mesh repair.

The book concludes with a clinical guide to the use of 4-dimensional ultrasound, which is applied in a carefully selected 15 cases that capture a wide range of clinical presentations, as shown in an accompanying DVD.

This concise, yet practical and detailed, book is a testimony to the first author's input that explored and developed the horizons of ultrasound imaging to provide insight into the aetiology, pathology, prognosis and management of different urogynaecological presentations and oversaw the growth of its potential from irrelevance to becoming an integral part of patient assessment. The book is an indispensable resource to all urogynaecologists who are keen to provide the best care for their patients.

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