

A Case a Week: Sleep Disorders from the Cleveland Clinic

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“See one, do one, teach one” is an aphorism quoted time and again by medical trainees and their teachers. And indeed, to become proficient in the art of medicine, it is not enough to simply memorize tables of statistics, or the loci of genetic mutations which play a role in disease development. One needs to learn to appreciate patients as individuals who seek medical help for afflictions preventing them from living their lives as they would like to or were accustomed to doing prior to their onset. Although they may share the same diagnosis, the preferred treatment for one patient may be absolutely unsuited for another because of a variety of factors too numerous (and oftentimes too subtle) to be enumerated in a standard textbook.

That is why learning by example is so important. However, because there is so much variability in how a particular condition affects a specific person, it is impossible to “see one” of everything. And even after the training period is over, it is to be expected that the scope of one’s practice will encompass much more than what was seen during training, and not just because of advances in medical science. Unfortunately, it is often then that it becomes more difficult to continue to learn by example because of the nature of one’s work environment.

“A Case a Week: Sleep Disorders from the Cleveland Clinic” is a fantastic resource for trainees just getting started in sleep medicine as well as for those already deeply immersed in its practice. One of the hallmarks of any good nonfiction book is that it brings the reader to look at an old problem from a new angle and to consider aspects not previously seen. This compilation of clinical cases does exactly that, many times over.

The majority of the cases presented are complex, and for most of them the authors adopt a multidisciplinary approach to treating the patients described. That said, most cover very familiar clinical scenarios, and those with more experience practicing sleep medicine will doubtless feel as though they could have easily written them up themselves. This does not, however, mean that seasoned practitioners will not appreciate discussion of less mainstream approaches to common problems. For instance, how many of us are familiar with teaching diaphragmatic breathing using a biofeedback device in order to overcome the discomfort associated with positive airway pressure (PAP) treatment?

The titles of the cases are catchy and humorous, and the writing style is free flowing, imparting a “this is how we do it”

feel. The fact that some of the cases do not have all of the ends wrapped up, and indeed, on occasion, conclude with less than perfect outcomes allows the reader to feel as if a colleague were relating some difficult cases that she herself struggled with, something which then leads the reader to ponder over what he might have done or would do in a similar situation.

Many of the cases discuss pitfalls to be avoided in practice in a style perfectly suited for trainees. As obvious as some of them may seem to a more senior clinician (for example, not doing a multiple sleep latency test without taking into consideration a possible circadian phase delay), the truth is that until one has to actually work up a patient with excessive daytime sleepiness, thinking about this as part of the evaluative process may not be second nature, no matter how book smart one is. Most of us learn from our own experience; the not-so-smart repeat their errors time and time again; and the truly wise learn from the mistakes of others. Reviewing a case in which something was missed may reinforce its importance so that the wiser path to learning is taken more often than not.

The book is rich in charts, photographs, illustrations, and diagrams; includes 6 different questionnaires in the appendices and has links to 18 videos available online which nicely supplement the cases discussed; and is laid out in a format that is easy to read.

Inevitably, comparisons will be made to the “Casebook of Sleep Medicine” published by the American Academy of Sleep Medicine. While both books present and discuss clinical cases in sleep medicine, they are different enough in style and content to complement each other and to comfortably coexist in the library of anyone wishing to broaden her or his perspective on how best to deliver good care to patients with a variety of sleep disorders.

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DISCLOSURE STATEMENT

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