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BOOK REVIEW

Core Topics in Airway Management, 3rd edition
Tim Cook and Michael Seltz Kristensen, editors
Cambridge University Press. $89.99, pp. 330, ISBN No: 9781108419536

Arriving in the middle of the ongoing coronavirus pandemic, the latest edition of *Core Topics in Airway Management* could not have been more welcome than during a pandemic characterised by airway management. This book, the third in a series started in 2006 and last updated in 2011, is a timely addition to the airway literature and likely to become a foundational reference worldwide for any clinician who manages the airway. The third edition retains the spirit and style of the series, delivering information in a clear, easily digested format, despite an almost total revision of all chapters. The text will be appreciated both by developing clinicians and by seasoned airway managers seeking a current definitive resource.

Two new editors have contributed this latest edition, Tim Cook and Michael Seltz Kristensen, building on the work of founding editors Adrian Pearce and Ian Calder. Both have wide-ranging experience in bedside clinical care, the epidemiology of airway issues, and the development of international society guidelines related to airway management. Together, with this deep and broad experience, they are well suited to serve as editors for a textbook that describes airway management in various clinical settings, and not exclusively limited to the operating theatre.

The book is comprehensive in scope, with 330 pages and 38 chapters divided into three sections: Background and Techniques, Clinical Settings and Subspecialties, and Organisation. Chapters logically follow one another, with the first section beginning with airway anatomy and physiology before airway assessment and management techniques. The second section covers clinical settings and subspecialties, ranging from paediatric considerations to specific airway management scenarios during cardiopulmonary resuscitation and the bleeding airway. The third section on organisation closes the book to examine pertinent organisational and human factors and their capacity to contribute to and protect against error and patient harm.

The book is as current as a physical textbook can be, covering emerging topics such as airway ultrasonography, virtual endoscopy, and airway management in respiratory pandemics. Regarding clinical controversies in which research or consensus has yet to establish a definitive practice, the authors present the available evidence and the known pros and cons of competing ideas with minimal editorialising. While delivering on current trends, the authors also offer sage wisdom in their chapter on respiratory pandemics: 'There may also be a temptation to use techniques which the operator is not practised in… A high-risk situation is rarely, if ever, a time to try untested and unfamiliar techniques for the first time'.

A primary strength of the textbook is its diversity in authorship. The editors made an intentional effort to recruit authors from around the world to provide a diverse perspective, and this strategy has paid off with a textbook that is not limited to any singular national or specialist society dogma. Drawing authors from four continents, the book provides an international perspective on airway management. This diversity of experience and knowledge will allow the reader to consider problems or techniques in a manner different from what they are accustomed to. Clinicians, and more importantly, patients, benefit from this sharing of knowledge and experience.

Another strength of the book is its focus on the 'human role' in airway management and the dedication of the final and arguably most crucial section to 'Organisation,' which examines what institutional, organisational, and behavioural factors shape success in airway management. Although acknowledged and explored in the second edition, evolving research and enhanced understanding has generated chapters describing institutional organisation, training, and human factors. As illustrated in this section, a clear connection exists between individual modifiable and non-modifiable factors that determine an airway management approach's success, and provides actionable insights to optimise patient care and safety.

A final foundational strength is its clarity in writing, format, and excellent, colourful supporting images. Despite many authors, each chapter flows well and has a consistent form that keeps the reader feeling they are reading one cohesive book. When considering ways to improve this book, we frequently hoped for a video to demonstrate unfamiliar techniques or supplemental online content, which also may be of

particular use to those without local expertise or equipment. Finally, we felt that the chapter on human factors in airway management might belong at the book's beginning. It represents a foundational element of safety on which the rest of the book builds.

In summary, the third edition of *Core Topics in Airway Management* is well presented, easy to read, and likely to become a favourite textbook for any clinician from the prehospital setting to the intensive care unit who manages the airway. With a diverse, current, and comprehensive perspective on basic airway management concepts and emerging techniques and issues, this book is appropriately a 'core' textbook for those seeking to improve their knowledge and skills in airway management.

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