

New anticoagulants, a new book and old gags

There can be few ENT surgeons who have not felt a sense of confusion when faced with a patient receiving regular treatment with one of the new oral anticoagulant drugs in a difficult case of epistaxis or in a case where the individual is scheduled for surgery. The paper by Kumar and Moorthy attempts to relieve this confusion and is most welcome.¹ They advise liaison with haematology colleagues and encourage protocols within trusts. This article complements the survey of venous thromboembolism prophylaxis by Nash *et al.*² and the audit of epistaxis management,³ both of which were published in *The Journal of Laryngology & Otolology* last year.

For those with a bent for medical history, Rice's paper on the history of the tonsillectomy gag, inspired by a Barbara Hepworth painting, is a good place to start in the study of tonsillectomy history.⁴ Last year's paper of Lamprell and Ahluwalia is a run down of the named instruments on the tonsillectomy tray, which all staff should be familiar with.⁵

Implant science continues its onward march, and this issue contains papers that: compare an active middle-ear implant with conventional aids in mixed hearing loss,⁶ investigate the preservation of hearing and cochlear structures in implanted children,⁷ and examine the use of implants in superficial siderosis.⁸

The old chestnut: the conundrum of voice versus airway in laser cordotomy is assessed by Asik *et al.* in a case series that showed the usual voice versus airway trade-off, with a more detailed analysis than usual of both voice and airway.⁹

Finally, after many years of waiting, we have an updated, manageable, single-volume ENT textbook that reflects UK practice, and which carries on a proud tradition of Scottish ENT education: the new *Logan Turner's Diseases of the Nose, Throat and Ear: Head and Neck Surgery*. This textbook is

reviewed in *The Journal*.¹⁰ The old edition of the textbook was a mainstay of examination candidates' revision and this new 'bible' should fill that role admirably.

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