

BOOK REVIEW

ROME III: The Functional Gastrointestinal Disorders Douglas A. Drossman, Enrico Corazziari, Michel Delvaux, Robin C. Spiller, Nicholas J. Talley, W. Grant Thompson, William E Whitehead. Yale University Section of Digestive Disease: Degnon Associates, 2006. third edn, 1048 pages, \$125.00. When it was first convened in 1990, the Rome committee sought to convey order to the largely amorphous world of functional gastrointestinal problems (FGIDs).

1. Sixteen years later, within the third version of the Rome criteria, the authors continue their quest to replace and refine the classification of FGIDs.
2. The first 6 chapters are dedicated to neurogastroenterology, pharmacology, the function of gender and tradition, and the psychological aspects of FGIDs.
3. Although a basic understanding of those aspects of FGIDs may be helpful, the extent of element in a couple of of those initial chapters (ie, the basics of neurogastroenterology) is more than is necessary for the common clinician.

As in previous points, the discussion of FGIDs is organized by organ system. Each disorder's criteria are clearly listed at the beginning of the chapter followed by a detailed discussion of appropriate diagnostic and therapeutic strategies. Salient research are succinctly summarized when acceptable, allowing clinicians the alternative to quickly reference supporting information.

Rome III does embrace several essential adjustments to the earlier edition

The time frame standards required for FGID analysis has been simplified, several new classification classes have been created (mainly within the realm of pediatric FGIDs), and diagnostic criteria have been amended for functional dyspepsia and irritable bowel syndrome. Rome III is clearly written and properly organized.

Although the book's dimension and subject material may at first seem overwhelming, its wonderful use of tables and diagnostic flow charts allows for simple software to medical follow.

The patient questionnaires and scoring algorithms contained in the appendix are arguably probably the most helpful to the training clinician.

Also highlighted on this part is the specific testing necessary to exclude the presence of underlying structural illness earlier than analysis of a selected FGID. Recognizing the inherent difficulty in adopting new pointers, the authors even embrace the old Rome II standards side-by-side with the updated criteria.

Recommendation: In all, the authors of Rome III have carried out an excellent job of making a useful resource on FGIDs that is complete and detailed whereas additionally being clinically relevant and easy-to-use. A will need to have for any working towards gastroenterologist.

Anish A. Sheth, MD Yale University School of Medicine New Haven, CT