signs of side effects. This is good news. Why is this so? And why not in the remaining, perhaps 10%, of divers? Are there mechanisms that could be protective in other groups as well? Again, a problem worthy of deeper scientific study.

## **Decompression sickness**

Although the possibility of DCS after repeated apnea diving has been pointed out by others, we reported the first Doppler bubble score grade 1 in a freediver after a single deep dive.<sup>3</sup> This is alarming, especially as diving gets progressively deeper. I recommend strongly that chamber facilities should always be provided to deep freedivers – not only to those with previous DCS – and that freediving tables should be developed. Post-dive oxygen is already being used as divers become more aware of the potential DCS risk.<sup>3</sup>

Whilst the deepest diving in the variable weight and no-limits disciplines is certainly not something I would recommend, the people doing this nevertheless provide a model for studying extreme survival. From a natural science perspective, it is interesting to try to understand how this is at all possible. This may also be useful for other survival situations, not the least in emergency medical situations. I believe better understanding of how our bodies work is a good thing, and that it will increase survival in many different situations. I remain uncertain in what ways my reviews could be considered "uncritical" and how these writers suggest we go about our common goal, to make diving safer, without trying to better understand how our bodies work when we dive. To ignore good news and report only the bad is unscientific. The only way to make the divers listen is by gaining their trust. This is not done by banning their sport, but by providing solid facts. That is, I believe, our job as scientists.

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## Key words

Breath-hold diving, hypoxia, physiology, decompression sickness, barotrauma, safety, letters (to the Editor)

# Diving medicine for scuba divers

# Dear Editor,

*Diving medicine for scuba divers* by Edmonds, Thomas, McKenzie and Pennefather is a web-based book available as a free, downloadable text. Recently it has had to move to a different web host. Thus, it and all bookmarked subdirectories will no longer be available at the old address, which one needs to delete and replace with a new one: <www.divingmedicine.info>.

Since the text was made available almost three years ago, there have been over 30,000 downloads. Because we do not apply copyright restrictions, dive instructors and clubs are encouraged to supply copies to their clients and members; diving physicians have supplied specific chapters to their diver patients. Thus we have no idea of the actual number of copies distributed.

We have upgraded the text, and so even those with downloaded copies should now replace them with the 2012 4th edition. Our appreciation goes to all those who have made suggestions for corrections and modifications.

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### Key words

Textbook, world wide web, recreational diving, letters (to the Editor)