

Hospital, Miami Beach, Florida, AND ARTHUR TOM, F.F.A.R.C.S., D.A., L.R.C.P., Consultant Anaesthetist, North Gloucestershire Clinical Area, Gloucestershire, England. Cloth. Pp. 102, with 17 figures and 1 table. The Reporter Press, Paul K. Blanchard, Inc., North Conway, New Hampshire, 1965.

Analgesia is defined as a combined state of analgesia and amnesia, and for teaching and practical purposes the plane of analgesia is included in Stage 1 second plane of the Guedel classification of the stages of anesthesia.

To achieve this state the authors employ an apparatus from which the rebreathing bag has been eliminated. After the nose piece is applied to the patient, a prop is inserted in the mouth and a pack placed in its anterior portion. The anesthetic mixture is administered in a ratio of 80 per cent nitrous oxide and 20 per cent oxygen, at a positive pressure of 7 mm. of mercury. A moist towel or piece of rubber dam is placed over the mouth to prevent breathing through it. The nasal inhaler is adjusted to correspond with the pressure of the gases so that free exchange is assured. If the patient shows resistance, the gas pressure may be increased up to 15 mm. of mercury. The signs of analgesia are described as follows: (a) Shallow Stage—staring eye, does not blink to stimuli, lash has little or no reflex, eyelid does not resist retraction; (b) Medium Stage—oscillating eye has tendency to roll; (c) Deep Stage—conjugate deviation of eyeballs.

Most operations on ambulatory patients are performed in the deep stage. If regional anesthesia is used as a supplement, it is achieved while the patient is in the medium stage. For resistant or difficult patients, the same physiologic mixture of gases is used, but other general anesthetic agents or regional anesthesia are used as supplements.

This book will be of interest to all dentists and those physicians whose interest includes this specialized field of anesthesia.

FRANK M. CREM, M.D.

**Clinical Anesthesia Series. Obstetric Complications.** EDITED BY JOHN J. BONICA, M.D. Cloth. \$7.50. Pp. 202, with 59 illustrations and 4 tables. F. A. Davis Co., Philadelphia, 1965.

Edited by a well-known and respected clinician and teacher, this is the third volume of the 1965 popular Clinical Anesthesia Series. Obstetrical complications and their anesthetic management are presented in an extremely dogmatic manner in a well-indexed volume, with extensive bibliographies appended to each of the eight chapters. It ap-

pears to this reviewer to fall short of the objectives outlined by Dr. Bonica in his preface to this monograph. When read in conjunction with Anesthesiology's July-August 1965 Symposium on "Maternal and Fetal Physiology in the Perinatal Period," it serves as a clinical adjuvant to an already superb exhibition of concepts in obstetrical physiology. This monograph does serve a useful purpose in refreshing the anesthesiologist's memory of the abnormal physiology of obstetrics, and for this reason deserves a place on the reference bookshelf of all anesthesiologists.

J. GERARD CONVERSE, M.D.

**Clinical Anesthesia. Vol. 2. Clinical Management of the Patient in Shock.** EDITED BY LOUIS R. ORKIN, M.D. Cloth. \$7.50. Pp. 216, with illustrations. F. A. Davis Co., Philadelphia, 1965.

This edition of Clinical Anesthesia covers the clinical management of the patient in shock in a concise and detailed manner.

The book is divided into twelve chapters as follows: Nitrous Oxide-Thiopental-Relaxant, by Frederick Van Bergen, M.D.; Diagnosis and Therapy of the Physiologic Changes Occurring during Shock and Massive Transfusion, by William S. Howland, M.D. and Olga Schweizer, M.D.; Electrolyte Therapy in Shock: Management during Anesthesia, by M. T. Jenkins, M.D., A. H. Giesecke, Jr., M.D. and G. Thomas Shires, M.D.; Pharmacologic Adjuncts to the Management of Shock, by Alon P. Winnie, M.D. and Vincent J. Collins, M.D.; Local Infiltration or Peripheral Nerve Block Anesthesia for Surgery on the Patient in Shock, by L. Donald Bridenbaugh, M.D. and Daniel C. Moore, M.D.; Cyclopropane Anesthesia by Howard L. Zauder, M.D., Ph.D.; Ether Analgesia for the Patient in Shock, by Joseph F. Artusio, Jr., M.D.; Halothane Anesthesia during Hypovolemic Hypotension, by William L. Collins, B.S. and Leonard W. Fabian, M.D.; Neurolept Analgesia, by Guenter Corssen, M.D. and Peter Chodoff, M.D.; Shock in the Obstetric Patient, by Gertie F. Marx, M.D. and Shock and Pulmonary Embolism by Louis R. M. Del Guercio, M.D.; and Critique by Louis R. Orkin, M.D.

The subjects are excellently presented so as to be of interest to all practicing physicians.

V. K. STOELTING, M.D.

**A Nurse's Guide to Anaesthetics, Resuscitation and Intensive Care. SECOND EDITION** BY WALTER NORRIS, M.D., F.F.A.R.C.S., AND DONALD CAMPBELL, M.B., Ch.B., D.A., F.F.A.R.C.S., Consultant Anaesthetists, Glasgow