

tions of the lung and the role these play in reaction and in tumor formation are stimulating.

The book brings together a large amount of information. For the reader not versed in respiratory physiology or the pulmonary circulation it will provide a wide scope of information by the highest authorities in the specific subarea. The book encompasses every significant aspect of pathology, biochemistry and physiology of the lung. The individual who is acquainted with the literature on respiratory physiology or pathology of the lung may find that some chapters offer nothing new for him, but nonetheless there probably will be other chapters from which he will gain new information. The book, however, does offer for this reader, a good solid reference work.

Dr. Licbow in his epilogue offers a characterization of the book, "from diversity a certain harmony—a dazzling array and complexity of methods and skills deployed to investigate a single organ," with which statement one can fully agree. "The Lung" shows how intricate and complex the unimpressive-looking sac really is.

HAROLD A. LYONS, M.D.

Premedication, Local and General Anesthesia in Dentistry. By NIELS BJORN JONCHSEN AND JESS HAYDEN, JR. Cloth. Pp. 158, with illustrations. Lea and Febiger, Philadelphia, 1967. \$7.50.

The co-authors and seven contributors attempt to cover the scope of pain and apprehension. In spite of the title, most of the book is confined to local anesthesia, with a minimal emphasis on premedication and general anesthesia.

Local infiltration and nerve-block techniques are explained adequately. There are excellent supplemental anatomical drawings and photographs of dissected specimens.

It is unfortunate that the excellent chapter on "Anatomy" could not have been integrated with the chapter on "Infiltration and Nerve Block Techniques" instead of being separate.

The first and second chapters cover the physical evaluation of the patient and many of the psychological aspects of a dental practice.

The chapter on "Psychological Aspects of Dental Practice" is written by a psychiatrist in an interesting and logical manner. It discusses the need for concern for the patient as a person and understanding of his feelings and emotional needs.

General anesthesia is covered in one chapter, 12 pages long, which is intended, primarily, as an introduction for the undergraduate dental student.

The final chapter, "Clinical Illustrations," presents 17 cases of patients with problems of gagging, apprehension, cerebral palsy, etc. and the manner in which they were treated.

The book, written primarily for dental students, has a place as a supplement to other texts on anesthesia in dentistry.

REUBEN SELDIN, D.D.S.

Der Narkoseszwischenfall (Anesthesia Accidents). By BRUNO TSCHIRREN. Cloth. Pp. 162, 7 tables, 31 illustrations. Verlag Hans Huber, Bern and Stuttgart, 1967.

While anesthetic accidents will always happen, one cannot escape the fact that in many instances more forethought would prevent them. This publication—fourth in a series about problems of surgery—seeks to familiarize the reader with the possible kinds of accidents which may occur during anesthesia. These are dealt with in a competent though didactic way, and followed by a synopsis on treatment in a special chapter. The clear text is enlivened by 87 case histories which illustrate the goal of successful prophylaxis. The extensive literature index (especially Anglo-American) will be appreciated by every serious student. The book is recommended to everyone working in an operating theatre.

B. J. URBAN, M.D.

Medical Education and Anesthesia. Edited by JOSEPH M. WITTE. In *Clinical Anesthesia*, Vol. 1. Cloth. Pp. 154, with illustrations and tables. F. A. Davis Company, Philadelphia, 1966. \$14.50.

Education in Anesthesiology—Report of a Macy Conference. Edited by JOHN P. BUNKEE. Cloth. Pp. 167, with illustrations and tables. Columbia University Press, New York and London, 1967. \$7.00.

Although both of these texts are devoted to the subject of anesthesia and education and are purported to be directed to the practicing anesthesiologist and the academician, each has its own format and attractions. Dr. White introduces the "Clinical Anesthesia Series" with the thought that "Education and medical care are inextricably interdependent." He adds that broadening the base of education in anesthesiology will be to no avail unless the application of the new skills by the physician anesthetist is devoted to patient care. This introduction justifies the inclusion of a text on medical education in a series devoted to clinical anesthesia. In addition to sections devoted to trends and goals in medical education as they are changing in medical curricula throughout this country, there are portions devoted to the anesthesia survey and the problems in teaching anesthesia in the medical curriculum, internship, and residency. New trends in learning are described in chapters on the National Library of Medicine and the role of computers in medical education and anesthesiology.

The text has been directed to all anesthesiologists. It achieves its goal. One quickly passes over the concept of recruitment of new physicians into a highly attractive field of "scientific" anesthesia and comes upon the realization that, as the scope and pattern of medical education is changing, so must education in anesthesia change. After reading this text any anesthesiologist should be

able to consider how he may become a more enlightened and informed physician in a revolutionary period of medical education, and thereby become a better physician contributing to improvement in patient care.

Dr. Bunker has edited a book based on a two-day Macy Conference devoted to anesthesiology. Although this conference apparently included practicing anesthesiologists as well as academicians, the reader will note that the orientation is more directed toward the academician. As in the clinical anesthesia monograph, there are sections devoted to the teaching of anesthesia in the medical school and at the graduate level. If one is interested in the pros and cons of teaching a clinical specialty in a basic science course, there is an excellent section which includes an outstanding discussion by Dr. Walter F. Riker, Jr. Dr. Riker points out that not every academic anesthesiologist is qualified to participate in a basic science lecture series; even if he has superior training and orientation, as well as basic science, he must adapt to the format as it is designed by the basic science department.

In a panel chaired by Dr. Stuart Cullen, the problems of training the "very bright" resident are discussed in detail. This panel also defined the differences between an educational program and a training program, and noted the very common problems associated with two classes of citizens in an educational program, the clinical resident and the research fellow.

Sections which describe techniques in teaching anesthesia in the United Kingdom, Sweden and Japan are included. This text is recommended primarily to those interested in teaching anesthesia in a medical school and to medical educators in general. It has less application for those interested in teaching anesthesia outside the medical school.

BURTON S. EPSTEIN, M.D.

Lung Disease. EDITED BY DUNCAN A. HOLADAY, with the assistance of Christian C. Rattenborg. Cloth. Pp. 189, with illustrations and tables. F. A. Davis Company, Philadelphia, 1967. \$14.50.

This volume is a part of the Clinical Anesthesia Series. The book "is intended to serve as a guide for the safe management of patients with pre-existing lung disease who are to undergo anesthesia and surgical operation." The editor hopes through this publication, to reduce the number of errors in judgment and technique arising from inaccurate diagnosis, incomplete preoperative preparation and inadequate methods of management.

The contributors, 15 in all, are versed in the areas of their presentations. The chapters develop the subject in logical sequence, beginning with the pathophysiology of chronic lung disease and ending with anesthesia and obstructive lung disease. The final three chapters are special topics, the

anesthetic management of the "wet lung," anesthesia for children with pulmonary disorders, and the anesthetic management of tracheoesophageal fistula. Every phase of the problem of anesthesia and chronic lung disease is included.

All contributors agree, essentially, regarding the methods of preoperative evaluation and the significance of such studies, and the call for essential respiratory support during operation, and postoperatively for the patient with chronic pulmonary disease. This agreement has led to much repetition throughout the volume, most of the authors discussing the preoperative evaluation, the tests required, their interpretation and significance. The editor should have made arrangements to lessen this burden to the reader. Repetition for learning may allow some justification.

The chapters by Bendixen on the pathophysiology of chronic lung disease and by Rattenborg and Holaday on mechanisms affecting ventilation and perfusion of the lungs during anesthesia both contain clear and understandable explanations of the mechanics and principles of gas exchange in the lung and their alterations during anesthesia. Mittman expresses his topic of preoperative evaluation in terms of the pulmonary physiologist, with principles which are generally acceptable. The chapter by Pontoppidan and Bushnell on respiratory therapy for convalescing surgical patients with chronic lung disease is noteworthy. It is well written and informative. The techniques, monitoring and therapeutic, are clearly described and illustrated with figures. This chapter can be considered the keystone of the book.

In general, the discussions of selection of anesthetic agents, their method of administration, potential adverse reactions and complications, are made by several contributors, and all are in fair agreement. There is apparent disagreement about the use of atropine in chronic pulmonary disease management between Holaday and Rattenborg and Safar and Karpinski. The former authors avoid its use unless for cardiac problems and the latter employ it without harm. Holaday and Rattenborg stress the use of epidural block postoperatively, whereas Safar and Karpinski discuss its changes on respiration.

Throughout the volume there are excellent descriptions of the use of various techniques and equipment for management of the patient with chronic pulmonary disease. Allan and Roskow include the special techniques and best equipment for managing problems in children. Although practically all authors of this book recommended the chemical acetylcysteine as a thinning agent for bronchial secretions, its use is not universally accepted. The greatest emphasis, and rightly so, is given to humidification for thinning mucous secretions.

Detection of chronic pulmonary disease, evaluation of the degree of respiratory impairment, preoperative management and the time for operation, anesthetic management and choice of anesthetic