

areas of interest, and a number of the reproductions are of poor quality. On the other hand, the pictures of patients positioned for various procedures provide clear illustrations of the problems the anesthesiologist and his patient are about to face.

Evaluation of the text in view of information currently available in a number of recent review articles indicates its functional inadequacy in this area. However, no current text devoted to neuroanesthesia is presently available, although recent publishers' advance notices indicate that at least two books are about to be published. A combination of a number of review articles on cerebrovascular physiology and pharmacology and McComish and Bodley's text would provide a suitable reference source for neuroanesthetic practice until the newer offerings can be evaluated.

The purchaser of this book receives a practical cookbook to neurosurgical anesthesia and little additional food for thought. Considering that a stated goal of the book is to improve the anesthesiologist's comprehension and enjoyment of neuroanesthesia, the skimpiness of the basic concept chapters will do much to undermine his confidence when he interacts with his, hopefully, more up-to-date neurosurgical colleagues. There is no one-stop shopping here!

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Note: The above book was received several years after its publication. Review was deemed justified because there is no comparable text currently in print.—B.R.F.

IRCS Journal of Medical Science, University Park Press, Baltimore, Maryland 21202, 1975. Annual subscription \$77.00.

"The International Research Communications System (IRCS) exists to provide scientists with a medium for the immediate publication of original research results in all areas of biomedical research." Communications are limited to 500 words, five references, and such tables and illustrations as can be included in a single page of print. The reports are reviewed and published within an average of four weeks in one of the IRCS Specialist Journals. The IRCS Journal of Medical Science, a monthly, reprints about 20 reports selected for their general interest, as well as a complete list of all articles in those journals. This interesting experiment in communication could be useful to young workers in a hurry afraid of being scooped (the urgency is not apparent in all cases). Whether the journal will appeal to mature scientists who like to evaluate the quality of what they read is more problematic. The publishers say this is a new way to keep up-to-date; they do not say it is a better one.—B.R.F.

Public Health Aspects of Critical Care Medicine and Anesthesiology. EDITED BY PETER SAFAR. Philadelphia, F. A. Davis Co., 1974. 396 pp. Price: \$20.00.

The purpose of this book is to encourage and assist physicians and other personnel to extend their roles beyond those of treating individual patients to health maintenance, medical care delivery, and the discovery and implementation of possible solutions to the society's problems in critical care medicine (resuscitation, emergency medical care, and intensive care).

These goals are admirably met by the authors. Dr. Safar begins with a well organized, thoughtful analysis of what is right and wrong with medical care, particularly as it relates to emergency medical services. He discusses the position of emergency medical services and critical care medicine from a global perspective and then goes on to review the national health care industry. For those accountable to the Joint Commission on Accreditation of Hospitals, a chapter contributed by that organization discusses the development, function, and standards for anesthesia services and special care units.

The achievements and failures of emergency and critical care medicine in Allegheny County, Pennsylvania, from the street ambulance to the operating room and intensive care unit, are carefully defined and illustrated. Guidelines for staffing, organizing, physical standards and leadership are presented, along with an extensive bibliography for further education. Dr. Safar has long promulgated that knowledge of cardiopulmonary resuscitation requires a broad base at all levels of the community. Accordingly, a teaching program for cardiopulmonary resuscitation, structured for varying degrees of expertise, is included.

Dr. John Bunker considers the problem of surgical workloads from several viewpoints, and regards anesthetic mortality as a public health hazard, in keeping with the "public health" aspect of the book. An grossing chapter on the delivery of anesthesia services outside of the United States and Canada follows. The economic implications of providing even basic anesthesia to the underdeveloped countries of the world are enormous. Sensible recommendations are offered for a non-sensible world where, for example, the quality of medical care offered at the Hadassah Hospital in Jerusalem, Israel, cannot be shared with some nearby populations. As Dr. Safar states:

Efforts to prevent premature death and to reduce pain and suffering have been a farce throughout history, when national and political leaders have forced young people to kill and die in wars, while physicians at home have labored to keep alive non-salvageable patients or have treated essentially healthy persons.

Several excellent short chapters discuss anesthesiology in relation to inhalation therapists, nurse anesthetists, dental anesthesia, allied health personnel, obstetrical anesthesia, outpatient anesthesia, and departmental and individual financing. One suggestion that disturbs the reviewer involves a comparison between the need for critical care physi-