

Discussion of each drug thereafter is similarly organized into chemistry and pharmacokinetics, pharmacologic actions, and clinical practice. Of these sections, that on neurolept anesthesia is rather short and less detailed than the others. However, it does provide a useful resumé of this technique, and includes a welcome denigration of pre-mixed preparations. The opening historical section was also too brief for the reviewer's satisfaction.

The pertinent literature is extensively and critically reviewed, and considerable thought has clearly been given to fitting together the pieces of each jigsaw in a logical fashion. This has been achieved in various ways, but the text always remains eminently readable and the progression of ideas clear and succinct. Most impressive is the consistent way in which theory has been effectively married to clinical practice. This clearly reflects the considerable experience of the authors in this field. Cross-referencing between different parts of the book is good. Almost all facts and fables mentioned are extensively referenced: e.g., the chapter on effects of barbiturates on the body is followed by almost three hundred references. This represents a survey of the literature on intravenous anaesthesia up to and including 1973 that is unsurpassed.

Practice on both sides of the Atlantic has been reflected throughout. American anesthesiologists will find the sections on steroids and eugenols of particular theoretical interest and will, no doubt, regret the present lack of these useful agents in their clinical armamentarium.

The book is nicely laid out, with good subtitling and an adequate index, making for quick reference. Diagrams are clear and with few exceptions well captioned. Typographical and grammatical errors are refreshingly rare.

This monograph, with its wealth of information, can be highly recommended not only for departmental libraries but also for the personal use of every practising anesthesiologist.

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Abrégé de Médecine d'Urgence et d'Anesthésie Réanimation. BY G. FRANÇOIS, M. POISVERT, R. DELEUZE, AND M. CARA. Paris, Masson et Cie, 1975. Pages: 326. Price: about \$9.50.

This text is a heartening sign of how deeply anesthesiological modes of thought have penetrated into emergency medicine. It is certainly encouraging to see the essential physiologic principles and lines of management laid out in such a logical, systematic manner for medical students. It is less encouraging to note the total absence of references and the startling misspellings of well-known names, such as "Moddel" and "Kouvenhoven" and "Maggil," surprising in view of the meticulous orthography otherwise characteristic of French books.

As usual, multiple authorship makes for unevenness, but the important chapters are all excellent. The flavor of this work is manifest in its definitions, such as "An organism is in distress when it can no longer by itself assure its own survival"; "A patient in ventilatory distress is one unable to meet his or her ventilatory demand"; and in its use of the term "circulatory arrest" rather than "cardiac arrest."

The second quarter of the book surveys the fundamentals of anesthesiology, beginning with chapters on sleep and pain. These and the ones on preparation of the patient and the generalities of general anesthesia pass muster, but the discussion of anesthetic agents is deployed in interminable tables good only for a cram course, if that. One notes that the chapter on curarization says nothing about decurarization and the chapter on local anesthesia is marred by an entry that gives the maximal safe dose of tetracaine as 200 mg. A tenfold error of this kind, though the only one in the book, is serious. The incidents and accidents of general anesthesia are dealt with in the concluding chapter of this section, tersely but admirably.

The third quarter takes the student on an interesting run through the essentials of resuscitation, with useful practical tidbits on venipuncture, and the fourth begins with an excellent illustrated lesson on how to rescue accident victims and transfer them to stretchers. There is nothing quite like this in English, and anyone who can read French and wants to teach or understand the essentials of emergency medicine ought to own this pioneering book.

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Acupuncture for Patients. BY TERUO MATSUMOTO. Springfield, Ill., Charles C. Thomas, 1975. Pages: 107. Price: \$7.50.

The purpose of this book is to clear up some of the myths surrounding acupuncture, and to give an overall background of acupuncture practice for patients contemplating such treatment. This is a worthwhile aim inasmuch as health care delivery in the United States is sometimes complicated by the misconceptions that surround certain treatment modalities, and the ignorance of the public about the potentials and limitations of well-publicized therapies. Implicit in the text is an attempt to provide a guide for finger-pressure massage based on acupuncture theory.

At first glance, the reader develops the impression that this book was hurriedly prepared. There are many errors in spelling and grammar. Most lay readers will find parts of the text difficult because the authors have employed sophisticated medical terminology. Excellent interpretations and definitions of terms are provided at times, but

in many instances these are lacking. In general, the book is solidly organized, and presented in such a way that the reader can gain a broad perspective of Chinese folk medicine and the rationale for acupuncture therapy.

It is impossible to evaluate either the accuracy of the information on classic acupuncture presented in the text, or the validity of the theoretical constructs introduced, as there is no scientific data base against which such material can be judged. The text is roughly similar to many other books on acupuncture produced by Westerners, in that it describes a series of acupuncture pathways, termed "meridians," and lists sites along those pathways that may be used to treat disease. This approach is, strictly speaking, contrary to Oriental medicine in its purest form, since classically every patient is diagnosed individually and treated in a unique way.

This book has several errors and omissions in acupuncture mappings. For example, the fifth point on the spleen meridian is said to be located just below the eye, whereas classic mappings locate this point just above the ankle. Cardiac and vascular meridians are misidentified in one of the figures. The reader experiences some difficulty in identifying most acupuncture points described in the text. While there are many lucid drawings illustrating the locations of acupuncture sites, they are all identified anatomically, rather than by their Oriental names or a numbering system. The lay reader will find it difficult to come to grips with the technical language of anatomy as he attempts to locate the sites described on the figures provided.

The authors successfully discuss their research on acupuncture in language understandable to most readers, and deal with some of the basic issues. Unfortunately, they do not discuss work done by others, or reports by investigators in China that have been available for some time.

A strong point of the book is that the authors repeatedly caution that pain or other symptoms may be signals of underlying pathologic conditions that require immediate medical attention. While finger-pressure therapy is recommended for a variety of problems, patients are cautioned to obtain a medical examination before attempting to apply the principles of acupuncture to themselves.

In conclusion, the text is partially successful in that it does provide an intelligible overview of Oriental medical therapies. A strong effort to specify and clear up existing myths was not evident in the book. Undoubtedly, some critics who question the potential validity of acupuncture will argue that the authors are perpetuating mythical concepts rather than eliminating them.

In what ways could this book meet the needs of physicians and patients? Potentially, it could serve to bridge the gap in understanding and communication between physician and patient, and to alter the beliefs and attitudes that the patient brings to the therapeutic encounter. Materials designed to educate the patient and to give him a

realistic perspective on his condition and potential therapies for it could serve to make health care delivery more efficient and effectual. It is difficult to judge whether this book can serve this purpose, since acupuncture therapy is a moot issue. It would seem that only those physicians who practice, or at least believe in the potentials of, Oriental therapies, would be comfortable in recommending this book to patients.

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The Human Larynx: A Functional Study. By
B. RAYMOND FINK. New York, Raven Press, 1975.
Pages: 193. (Price not given.)

The author announces in his preface that this book excludes data obtained from work on the larynges of experimental animals. This can be disconcerting to the student of laryngeal physiology. Consternation is brief, however, for one soon becomes aware, even before finishing the first chapter, that what one is being treated to is a delightful exposition of the mechanism of the human larynx presented from the standpoint of mechanical coupling, elastic recoil, and passive displacement of the various laryngeal components. The author's emphasis on human studies is certainly commendable; one could debate, however, whether studies in man on the functions of the larynx differ to any significant extent from data obtained in experimental animals, except, of course, insofar as phonation and, perhaps, the swallowing mechanism are concerned.

Much has been written over the past two decades about laryngeal muscular activity in producing movements of the vocal folds under normal conditions and in producing various glottic configurations when the motor innervation has been injured. By contrast, almost nothing, except the publications of B. R. Fink, has appeared on the contribution of the elastic tissue membranes and ligaments, the shape of the cricoid articular facets, and the rhythmic vertical displacement of the larynx with respiration. The author's hypothesis of mechanical coupling of the larynx with the lower respiratory tract seems entirely compatible with previously reported observations of laryngeal muscle activity during respiration, since the coordinated mobility of the thyroid, cricoid, and arytenoid cartilages would require a rhythmic activity in the muscles linking these cartilages to preserve their mutual orientation. The mechanism fails, for example, when the laryngeal muscles are paralyzed, since this disrupts the delicate balance of tensions on which the system depends.

The section on evolution is filled with interesting, provocative ideas that will delight the laryngologist and would have pleased the late Sir Victor