Static Charges Not the Culprit

To the Editor:—In reference to the paper by Perel et al.,1 I do not believe a static spark could have been responsible for the burning of the nasal catheter or the patient. I have produced static sparks on woolen blankets in oxygen chambers many times and have never been able to induce a fire. Static electrical charges of the type generated by a patient lying in bed are an inadequate source of energy to ignite an oxygen mixture.

I believe that a much more likely explanation would be that a match was inadvertently lit without the knowledge of the physicians or nurses in attendance. Usually the patient or visitors light a cigarette, unaware of the hazard of an open flame when oxygen is flowing. It is important to clarify the probable cause of the burn because of the medicolegal implications, as well as the safety of patients.

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REFERENCE

(Accepted for publication February 11, 1977.)

Book Reviews

B. Raymond Fink, M.D., Editor


This book consists entirely of abstracts of articles on, or related to, anesthesiology, selected from more than 60 medical journals published during 1975. The abstracts are brief and clear, and most of them are followed by a short editorial comment that may serve to point out the subject. Several tables, 60 figures, and author and subject indices contribute to the usefulness of this carefully proofread and well-produced book.

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The second edition of Collins' book has grown 42 per cent in length and 71 per cent in price in the decade since the first edition was published. Like its predecessor, it is arranged in four sections: Fundamental Practices, Regional Anesthesia, Physiological Considerations, and Pharmacological Considerations. Its stated aims are to be "not . . . exhaustive but . . . a concise, comprehensive and documented text." The preface also gives us a preview of its future companion-piece, a many-authored book to be titled "Practices in Anesthesiology," which will cover four other sections: Special Problems in Management, Complications, Blood and Intravenous Therapy, and Respiratory Therapy.

The approach is indeed more encyclopedic than analytic, and the text is naturally fuller in some areas than in others. It is apparent, for instance, that Collins shares with many of us a delight in some of the mechanical aspects of anesthetic equipment. While I confess to being titillated on learning the meaning of still one more of the markings stamped on the shoulder of an oxygen cylinder, however, I must say that even I found the illustrations on how to sharpen needles somewhat anachronistic, and the engineering drawings of endotracheal tube connectors irrelevant.

Manifestly not concise, in my opinion the grasp of the book would come closer still to its reach if, by virtue of some judicious pruning, more room had been made for a fuller exploration of the recent literature, or better still, for some interpretive or analytic writing. It was disappointing, for instance, not to find any mention of membrane effects of anesthetic drugs in the chapter on theories of narcosis, and to find three chapters on muscle relaxants without any mention of the work of Walts or the Waals. I found the chapter on monitoring the anesthetized patient both dated and uncritical, and the section on the diagnosis of death remarkably convoluted. I greatly enjoyed the chapter on history, and the section on regional anesthesia was cogent and well illustrated.

There is an uncommonly large number of proofreader's and editor's lapses. The table of contents lists "Reversal of Relaxation Antagonists to Relaxant Drugs" and "Physiology of Respiration Neural Regulation" without benefit of punctuation; a line or two of type has been omitted from a passage in the preface; and the last five pages of the chapter on cyclopropane anesthesia are entitled "Ethylene Anesthesia." More disturbing is the style of the bibliography at the end of each chapter, which makes it very difficult to follow the references in the text into the literature. Reference 9 on page 1322 is not given in that chapter's bibliography at all.

In contrast, Collins' literary style is refreshingly uncomplicated. His diction and syntax are direct and easy to read, and the grammatical lapses are infrequent. "Moving such patients should be careful and gentle" is a direct transcription from the first edition.

In all, the book is a remarkable accomplishment. It was a prodigious undertaking and, in recent years, a unique one. No comprehensive text on anesthesia has been written alone in modern times (i.e., since Lundby's in the summer of '42). While I am sure that most large libraries will wish to have a copy, I do