

ment and is not referenced, although there is a list of 80 recommended readings at the end.

The only serious omission is the lack of information on intravenous and arterial cannulation techniques, including central venous and pulmonary arterial pressure monitoring. This is certainly an essential aspect of life support and deserves mention in an introductory text such as this. Many will also take issue with the author's dogmatic stance on the exclusive use of metal tracheostomy cannulas, with no mention being made of the availability and advantages of plastic tracheostomy tubes that incorporate controlled pressure cuffs.

Easy reading, this short book is an excellent quick review for someone who has been away from the critical care field.

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Anesthesia and Respiratory Function. EDITED BY E. R. KAUFER.
Boston, Little, Brown and Company, 1977. Pages: 205. Price: PNS.

This book is a collection of papers dealing with recent advances in specific areas of respiratory physiology and pharmacology. Each is well written, well balanced, well edited, well referenced, modern, of broad scope, and of adequate depth and therefore successful in achieving its particular objective. All of the authors are recognized authorities in their fields of interest.

The first paper discusses the effects of anesthetic drugs and disease on chemical regulation of ventilation, and is of solid interest for all. The second discusses recent advances in the evaluation of respiratory drive and initially repeats material in the first paper, but continues with a good discussion of occlusion pressure and respiratory timing and the effects of anesthetic drugs on these variables. The next paper, a discussion of the neural regulation of respiration, will benefit all requiring updating of their basic science understanding of this subject. The fourth, on recent advances in pulmonary gas exchange, presents the method for determining continuous distribution of ventilation/perfusion ratio, the rationale of the method, and the experimental and theoretical advances in gas exchange that the method provides. It will interest all respiratory physiologists and investigators. The succeeding paper, discussing the mechanical properties of the respiratory system during anesthesia, in addition to being factual, is thoughtful and provocative. The sixth describes recent developments in the physiology of bronchomotor tone and the pharmacology of bronchodilators. It is exceptionally strong in both basic science considerations and clinical relevance, and ends with an exploration of the anesthetic management of the asthmatic patient. The seventh and last paper extensively and in a clinically relevant manner discusses the effects of the total anesthetic experience on respiratory defense mechanisms.

A stronger attempt at correlation of subject matter with clinical practice would have increased the value of the first four papers. I was disappointed to find that recent advances in the physiology of IPPB, PEEP, and IMV and pulmonary vasomotor control had been omitted. Aside from these minor reservations, the book is good value for almost all anesthesiologists willing to keep up with the rapidly expanding information and concepts related to the interaction of anesthesia with respiratory function.

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Pain: A Source Book for Nurses and Other Health Professionals.
By A. K. JACOX. Boston, Little, Brown and Company, 1977.
Pages: 535. Price: PNS.

This text fulfills its description as a source book on pain for health professionals. Most of the information contained is current and pertinent.

The material is divided into four parts. Part I discusses pain theories, physiologic and psychological mechanisms, and pain measurement. Part II describes the various modalities of therapy available for the relief of chronic pain, including pharmacologic, surgical, stimulative and psychological approaches. Part III discusses the more common pain syndromes, grouped according to etiology. Included in this portion of the text is an excellent chapter on the pain experience in children. Part IV is an annotated cross-reference bibliography of classic and pertinent literature on pain. This bibliography, combined with the references at the end of each chapter, provides a comprehensive index of the major contributions to the literature.

A third of the chapters are reproduced from other publications. This, together with the fact that the text is comprised of individual contributions of many authors, results in considerable repetition. Theories and mechanisms are duplicated in Chapters 1 and 2, psychological contributions to the pain state in 3 and 4, classification of pain in 6 and 15, and stimulation techniques in 7 and 15. The continuity could have been improved by skillful editing.

The chapter on narcotic and non-narcotic analgesics is a compendium of the pharmacologic effects of most of the drugs in current use. The author, however, fails to discuss the problems of habituation and addiction in chronic pain patients or to describe a rational approach to the pharmacologic management of chronic pain.

In Part III, the discussions of management of specific pain entities are well oriented to the nursing professional. Illustrations are few, but contribute significantly to the text.

In general, this book is recommended reading, not only for the allied health professional, but also for the physician who is seeking a single text to provide an overview of both chronic pain mechanisms and management. Here he can also find therapeutic approaches to some specific pain states.

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Pulmonary Aspiration. EDITED BY R. B. ROBERTS. Boston, Little, Brown and Company, 1977. Pages: 153. Price: \$12.00.

This book covers, in eight chapters, each by a different author, the principal aspiration syndromes. It is presented within the current series, *International Anesthesiology Clinics*, volume 15, number 1. Each chapter is independently referenced, and a comprehensive index is provided. Every contributor is a noted authority in the area of expertise covered by his chapter. The book is primarily aimed at the clinician, and as such, provides a useful manual for the practicing anesthesiologist, anesthesiology resident, nurse anesthetist, and others involved with a clinical care of patients at risk from aspiration. However, for those expecting a detailed academic discussion of the underlying pathophysiologic dynamics there is little to excite.

Obviously, in a book comprised of separate independent contributions within related areas, some overlap and redundancy must be expected. Fortunately, for the most part the redundancies serve to emphasize vitally important points: the effectiveness of controlled pulmonary ventilation and the appropriate use of posi-