Book Reviews

B. Raymond Fink, M.D., Editor


Physiology for the Anesthesiologist purports to provide the practicing anesthesiologist with an outline of the subject that will help in understanding the changes that occur during anesthesia. As such, it achieves its purpose.

The text reads easily, and the authors have managed to extract a great deal of relevant data from the voluminous amount of literature pertaining to the subjects discussed. The problem in writing such a book (as the authors suggest) is not so much what to include but what to leave out. All the chapters commence with a brief anatomic description. While one can understand the reasons for this, one wonders whether it is appropriate in a physiology textbook.

There are some contradictory and confusing statements. For example, in discussing the conductive mechanisms of the heart, one could fault the sentence, “The first portion of the heart to be activated is the right side of the septum, and the depolarization of the septum spreads from left to right.” In the paragraph dealing with the pulmonary circulation there is emphasis on the role of alveolar hypoxia in producing pulmonary vasodilation, yet further down the page it is stated that the pulmonary hypertension found in hypoxemia is secondary to a chemoreceptor reflex. There are other statements that could be challenged, such as “the only way to increase oxygen delivery to the mycardium is by coronary vasodilation.” Even more provocative is the suggested difficulty in differentiating between hypotension and shock. I suspect the protagonists of controlled hypotension in anesthesia would take exception to the implication that they are producing shock in their practice! There are other minor discrepancies, such as considering serotonin and 5-hydroxytryptamine as being different hormones.

These and other errors could have been prevented by a more critical review of the volume prior to its publication. The chapters dealing with respiration and acid–base balance are probably the best in the book. One would have liked to see some mention of metabolism of anesthetic agents and enzyme induction. Overall, the practicing anesthesiologist will benefit from reading this publication.

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This book contains the papers submitted in advance and presented at a symposium held in the Department of Physiology, University of Bristol, England, July 25–27, 1977. This Bristol meeting was a satellite of the XXVII International Congress of Physiological Sciences held in Paris. Forty-two papers, all of which deal with basic aspects of trigeminal pain, are included; clinical aspects were deliberately excluded.

The symposium was organized by means of a circular announcing the meeting and inviting papers to be submitted. The editors make it clear that all of the papers included in this volume are unrefered. One paper is included that was developed after the meeting to clarify problems associated with the lack of uniformity in the terminology used to describe various structures in the medulla and their relationships to corresponding structures in the spinal cord.

Although focusing on the trigeminal area, the material is quite relevant to fundamental pain research in general. It will be particularly valuable, however, to investigators working in areas related to the specific topics under discussion. This book is definitely not intended for the general reader interested in pain, and no discussion or index is provided. The cost ($49.50) seems unusually high for a book of this type. A paperback volume, using less expensive paper, would better meet the need for dissemination of the information.

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These compiled abstracts of articles published in medical journals in 1973–1976 have been well chosen for their interest to anesthesiologists, and reflect an intense search of the literature. They have been culled from the major English-language journals and in a few instances from foreign journals, including one Russian publication.


Following the seminal studies of C. Dreyfus-Brisac and her associates in Paris, a small group of investigators in Europe and the