

BOOK REVIEWS

Burnell R. Brown, Jr., M.D., Ph.D., Editor

Anesthesia. Edited by RONALD D. MILLER. New York, Churchill Livingstone, 1981. 2 Volumes. Pages 1529. Price \$98.00.

For some time in anesthesia circles and particularly because so many writers were engaged, it has been no secret that the All-American textbook on anesthesiology was in the wings. Now, one of two potential rivals has appeared on stage ready to endure the first night's criticism. This debut calls to mind some antecedents: in 1914, James Tayloe Gwathmey's *Anesthesia*, a collaborative work; John Silas Lundy's solo effort in 1942, *Clinical Anesthesia*; in 1954, Donald E. Hale's *Anesthesiology by Forty American Authors*; and Vincent J. Collins' *Principles of Anesthesiology* in 1966.

Customarily the editor proclaims his aims for this work as representing the current state of the art, not an encyclopedia and truly a collaborative effort written by recognized authorities in their respective fields. The latter comprise a second generation of youthful American anesthesiologists with some conformity in that 17 hail from the California University system, 10 from San Francisco alone. State of the art it is, but shouldn't this volume also serve as an encyclopedia, a summary of current knowledge, wherein almost any essential item can be retrieved? Without going into detail more than a few relevant subjects cannot be found in the indices.

Initially I encountered some problems in utilizing this book. Section 1 deals with Preparation of the Patient, Use of Anesthesia Agents—Preoperative and Intraoperative, while Section 2 bespeaks of Physiological Functions During Anesthesia. Section 3 covers The Systems and Specific Areas, then Consultant Anesthesia Practice is discussed in 4. While this arrangement may seem logical and the individual topics are well-chosen and comprehensive in coverage, one must resort to salutatory action for continuity of thought. For instance, "Respiratory Pharmacology of Inhaled Anesthetic Agents" (Chapter 13), is separate from "Respiratory Physiology and Respiratory Function During Anesthesia" (Chapter 22), both apart from "Acid-Base Equilibrium and Blood-Gas Measurement" (a chapter which might have been associated with "Pulmonary Function"—later on), and Anesthesia for Thoracic Surgery (chapter 29). Similarly, "The Electrocardiogram and Anesthesia" (chapter 7) is distinct from "Circulatory Pharmacology of Inhaled Anesthetics" (chapter 12), "Cardiovascular Physiology" (chapter 23), "Anesthesia Effects on Cerebral Blood Flow" (chapter

25), and not close at all to "Anesthesia for Cardiac Surgery" (chapter 30) and "Anesthesia for Vascular Surgery" (chapter 31).

In comparison with other English works of the genre, and insofar as grand design is a consideration, some might prefer the ingenious arrangement according to functions in H. C. Churchill-Davidson's, *A Practice of Anaesthesia*: respiratory system, cardiovascular system, nervous system, and so on. While Miller's text is offered in two volumes for convenience in handling, Gray and Nunn's *General Anaesthesia* confines basic principles to one part and clinical practice to the other. But we do need an American creation for its own patois and flavor of practice.

Some random observations! (One cannot engulf a work of this size in just a few sittings, anymore than possible with Tolstoi's *War and Peace*, or Mann's *Magic Mountain*.) Why is there no hint of historic antecedents in this putative general review of anesthesia? Chapters 1 and 2 are related: the one an argument over routine preoperative evaluation, the second concerned with preoperative assessment of special problems which perhaps ought to be part of specific areas in Volume 2. As there is no section on endocrines, we are given a few paragraphs on pheochromocytoma and similar ailments under the preoperative rubric. These chapters are not well-written with a combined total of 492 references and many a bibliographic error—a bit too much for consumption by the average reader. Chapter 3 briefly dismisses psychological preparation for anesthesia without insight into the graver aspects. Isn't "MAC", here treated alone, a matter to be considered under "How Inhaled Anesthetics Work"? Would everyone agree to elevation of the intravenous narcotics to full status as anesthetics, as in another chapter?

A review of an important book of this nature inevitably reveals the personality and prejudices of a reviewer, but the essential aims are to dissect the work for the edification of its readers, to make comparisons with others of the genre, and possibly to influence revision for the better. The current work is a laudable effort surely with further editions on the horizon.

LEROY D. VANDAM, M.D.
Professor of Anaesthesia, Emeritus
Harvard Medical School
Boston, Massachusetts

Books Received

Title & Edition	Author/Editor	Publisher		Pages	Price
		Address, Name, Year			
Chest Physiotherapy in the Intensive Care Unit	Colin F. Mackenzie Nancy Ciesla P. Cristina Imle Nancy Klemic (Editors)	Easton, Maryland Williams and Wilkins Company 1981		260	\$23.00 (soft-cover)
<i>The editors have prefaced this book with the hope that it will "provide others with a well-tested, practical approach to chest physiotherapy for intensive care patients."</i>					
Coagulation—The Essentials	David P. Fischbach Richard P. Fogdall	Baltimore, Maryland Williams and Wilkins 1981		252	\$19.00 (soft-cover)

This book presents an account of the essentials of coagulation for use by all who care for critically ill patients.