

BOOK REVIEWS

Carol A. Hirshman, M.D., Ph.D., Editor

The Management of Pain. Second Edition. 2 Volumes. EDITED BY JOHN J. BONICA, WITH JOHN D. LOESER, C. RICHARD CHAPMAN, AND WILBERT E. FORDYCE. Philadelphia, Lea and Febiger, 1990. Pages: 2, 120. Price: \$227.00.

The first edition of this textbook, entitled *The Management of Pain, with Special Emphasis on the Use of Analgesic Block in Diagnosis, Prognosis and Therapy*, was published in 1953. The author, John J. Bonica, a pioneer in the field of pain management and the founder of the International Association for the Study of Pain, has long provided the leadership that has resulted in the maturation of pain and its management as a distinct clinical specialty. The first edition of this book was described as "encyclopedic," "monumental," and a "masterpiece." The second edition is an authoritative reference *par excellence*: it combines the basic science and clinical aspects of virtually every conceivable acute and chronic pain syndrome.

With this edition, the book has undergone a major transformation. From the title of the book, the phrase "special emphasis on the use of analgesic block" has been deleted. This, I presume, reflects our understanding that analgesic blocks represent only one aspect of the multifaceted approach to the management of pain, especially chronic pain. Whereas the first edition was predominantly the monumental work of a single author, in this edition Bonica has benefited from the editorial collaboration of three other leaders in the field. In addition, several experts in their respective fields have contributed chapters. Bonica has, however, taken great pains to maintain a uniform format and harmonious presentation throughout the text. In this reviewer's opinion, a unique feature of the previous edition was the numerous case reports that illustrated specific points of discussion. Unfortunately, probably because of space limitations, several of these cases have been deleted from this edition. In general, however, comparison of the first and second editions truly reflects the advances made during the last four decades in our understanding of the mechanisms of pain and its management.

This book is organized into five parts. Part I (9 chapters) contains basic scientific and clinical information relevant to acute and chronic pain. It also includes a chapter that provides an interesting historical perspective on the evolution of multidisciplinary pain programs. Part II (21 chapters) provides a general discussion of acute painful conditions and chronic pain syndromes. The chapter on pain of neuropathic origin is particularly erudite and reflects the authors' extensive experience in managing these patients. In keeping with the recent developments in the management of pain in pediatric patients, 2 chapters address considerations of pain in this population. Part III (6 chapters) is devoted to the evaluation of the patient with pain. This section not only includes chapters on the medical evaluation of the patient with pain, but also emphasizes the need for a comprehensive assessment of the patient, including a psychologic and psychosocial evaluation. Part IV (41 chapters) deals with pain in different regions of the body. Although there are some overlaps in the information presented in parts II and IV, I would agree with the authors' statement that the repetitions "emphasize important issues" and minimize the need for readers to turn pages from one section to the other. Part V (23 chapters) discusses methods, procedures, and techniques for the symptomatic control of pain. Pharmacologic, psychological and psychosocial, physical therapeutic, electrical stimulation, regional analgesic-anesthetic and neurosurgical treatments are considered.

The writing is uniformly lucid and the general format attractive. The authors present a forceful, rational, and comprehensive approach to the management of the patient with pain of varied etiology. The illustrations, tables, and photographs are presented tastefully and enhance the text. The proofreading and editing is of superior quality.

Despite the weight of each volume, the quality of the paper and the binding makes the book surprisingly easy to handle. The text is abundantly referenced. As mentioned by the author in the preface, a text of this magnitude is a long undertaking. This in part, and perhaps inevitably, is reflected in the bibliography. In 26 chapters the most recent reference dated back to 1986, and in 23 other chapters the most recent reference was from 1987. The subject index is thorough and informative with reference to illustrations, tables, and text.

The majority of the textbooks on pain are directed specifically either to the researcher or to the clinician. In addition, the focus is usually on the management of either acute pain or chronic pain syndromes. This text emphasizes both the basic science and clinical aspects of pain and addresses both acute and chronic painful conditions. Hence, this book is unique and cannot rightfully be compared to any other text in the field.

This text is an invaluable reference and should be required for every library and for anyone involved in the study or management of pain. It is a useful resource for all practitioners, students, and physicians-in-training. I would recommend this book to every fellow and hope that the cost of the book does not place it outside his or her budget.

This book is well worth the wait.

SRINIVASA N. RAJA, M.D.
Associate Professor
Anesthesiology and Critical Care Medicine
Johns Hopkins University
600 North Wolfe Street / CMSC 550
Baltimore, Maryland 21205-2181

Anesthesia for Cardiac Surgery. EDITED BY JAMES A. DINARDO AND MICHAEL J. SCHWARZ. Norwalk, Connecticut, Appleton and Lange, 1990. Pages: 337. Price: \$55.00.

There are now at least eight textbooks available on the subject of cardiac anesthesia. This latest addition presents Boston's Beth Israel Hospital approach, being written mostly by Dr. DiNardo (eight of the twelve chapters) who is now in Tucson, Arizona.

The book is organized logically, beginning with chapters on preoperative assessment, interpretation of cardiac catheterization data, and monitoring, and concluding with chapters on central nervous system injury and postoperative care. Between these are chapters addressing specific considerations for the various types of surgery, and general chapters on the management of cardiopulmonary bypass and myocardial protection. The shortest chapter is that on postoperative care (the last), comprising a very condensed 13 pages with 50 references, while the longest chapters are those on anesthesia for congenital heart disease (56 pages with 121 references) and central nervous system injury (42 pages with an incredible 399 references).

As an introductory text, the size, layout, and cost are definitely appealing, and for these reasons I found myself wanting to like the book. In most respects the stated purpose of providing "an overall conceptual framework for the anesthetic management of cardiac surgical patients" is accomplished, as are the other objectives of providing additional information to both the experienced and less experienced clinician. Realistically, the main audience for this book is residents and fellows in cardiac anesthesia, for whom I did find certain aspects of the book to be deficient.

The initial chapters provide a good summary of most aspects of the preoperative evaluation of adult patients. Interpretation of cardiac catheterization data is very nicely presented, although the specific relevance of the findings to anesthetic management is not discussed. A

rather surprising omission is the evaluation of right heart function in the potential transplant recipient. Transplantation is not mentioned anywhere in this book.

The chapter on monitoring is surprisingly disappointing. On the positive side, the pulmonary artery (PA) catheter, transesophageal echocardiography, and the ECG all are discussed in some detail, and there is a very good analysis of PA pressure waveforms with representative tracings. However, where I expected to find anatomic drawings, there are only pictures of the catheters and introducers. Neither the controversy about the indications for PA catheters, nor the various types of catheters (oxygen saturation, pacing, right ventricular ejection fraction), is mentioned. There are no "tricks of the trade" given for the patient in whom either access or flotation is difficult. In the echocardiography section, there are no figures to aid the discussion. Finally, a reference on the sensitivity of ECG leads V5 and II in detecting ischemia is misquoted and implies that these two leads detect 100% of ischemia after exercise. In fact, this sensitivity was achieved only with leads II, aVf, and V3-V6.

In the next chapters (myocardial revascularization and valvular disorders), the editors redeem themselves with excellent presentations of pathophysiology and the basis of anesthetic management. There is some repetition of anesthetic technique (the usual opioid-based technique is recommended throughout) where I would have preferred more discussion; however, these chapters provide a very good summary of current knowledge and clinical practice.

Congenital disease, pericardial disease, and emergency surgery are presented clearly, in well-written, concise chapters. Management of

cardiopulmonary bypass (CPB) and myocardial preservation are also nicely summarized, and up-to-date concepts and modern techniques are presented. Autotransfusion is mentioned, but this important subject is not discussed (with regard to rationale and techniques).

The chapter on central nervous system injury is a comprehensive and detailed review with many references to experimental work, and concludes that "it is currently impossible to justify quantitative recommendations regarding any isolated individual parameter or technique during CPB." In contrast, the postoperative care section offers many specific recommendations and very little discussion, although some of the suggestions may not be widely accepted. (For instance, "Solu-Medrol 125 mg iv" is suggested for fever $>39.5^{\circ}$ C.) The profound contrast between these last two chapters reflects the different authorship.

This book does a good job of summarizing the pathophysiology of surgical cardiac disease and the various phases of operative management. There are some clear strengths, but also some deficiencies as outlined above. As it stands, with these reservations, it can be recommended as a well-written, relatively inexpensive, concise introduction to the practice of cardiac anesthesia.

JAMES G. RAMSAY, M.D., F.R.C.P.(C.)
Associate Professor of Anesthesiology
Department of Anesthesiology
Emory University School of Medicine
1364 Clifton Road, N.E.
Atlanta, Georgia 30322

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The Reply by Rosenberg (Rosenberg H: Reply to Safety of general anesthesia in patients previously tested negative for malignant hyperthermia susceptibility. *ANESTHESIOLOGY* 73:582, 1990) should include Gregory C. Allen, M.D. and Jeffrey E. Fletcher, Ph.D., Department of Anesthesiology, Hahnemann University as coauthors.