

## BOOK REVIEWS

Carol A. Hirschman, M.D., Editor

**Physiology of Spinal Anesthesia.** 4th edition. Nicholas M. Green and Soren J. Brull. Baltimore, Williams & Wilkins, 1993. Pages: 387. Price: \$75.00.

This revision of the standard and classic text on the subject of the physiology of spinal anesthesia does an excellent job of including the up-to-date research information on this subject. It remains the definitive reference text in this area. Although the coverage is generally exhaustive of each topic, its narrow focus remains. Unfortunately, the reader seeking discussion of specific techniques and drugs and of the factors that influence the height of spinal anesthesia will be disappointed. It is also unfortunate that the whole new frontier of subarachnoid opioids is not explored. Nevertheless, these were not in the scope of the original book, and the authors (as stated in the preface) have maintained their boundaries. The brief, additional chapter on epidural anesthesia is a welcome supplement. It gives an introduction to the physiology associated with that technique and some educational comparisons to spinal anesthesia itself, although it avoids discussion of practical topics such as techniques, dosage, and opioid application. Even its review of physiology is short and leaves room for expansion in future editions.

There are a few minor areas of inconsistency. The discussion of the parasympathetic effects of spinal anesthesia is disproportionately brief compared to the discussion of the sympathetic system. The clinical problem of urinary retention is relegated only a brief discussion later in the book, separated from the earlier notes on the parasympathetic system. Treatment of this subject is attenuated compared to the lengthy discussion of tourniquet pain and sympathetic blockade. Also, the recent concern over the sudden onset of bradycardia and of sudden cardiac arrest during spinal anesthesia is treated in the discussion, which is placed far from the descriptions of the effect of sympathetic blockade on heart rate. The physiology and the reflexes (Bezold-Jarisch) are discussed at length in both sections but are separated by 40 pages, without a cross reference! Anomalies such as this suggest that some of the newer literature has been "worked into" the text without a full reorganization of the subject.

Other minor shortcomings are the paucity of figures and tables and the relatively sketchy index. Although the text is well written and clear and each section is well organized, there are few subheadings to identify the transitions in long sections of text.

Overall, however, this remains an impressive and invaluable reference source. Though limited in scope for the individual practitioner, it is an invaluable resource for any library or academic bookshelf.

**Michael F. Mulroy, M.D.**  
Department of Anesthesiology  
Virginia Mason Clinic/B2-AN  
1100 Ninth Avenue  
Seattle, Washington 98111

**Anesthesia for Obstetrics.** Edited by S. M. Shnider and G. Levinson. Baltimore, Williams & Wilkins, 1993. Pages: 744. Price: \$95.00.

For the last 14 yr, *Anesthesia for Obstetrics* has been the standard source of information about obstetric anesthesia. As for the 1st and 2nd editions, published in 1979 and 1987, respectively, the 3rd edition is intended to serve as a reference for students and practitioners

of this subspecialty. This textbook is intended to be used as both a guide for clinical practice and an authoritative reference in the field.

*Anesthesia for Obstetrics* accomplishes these goals. In general, the material is comprehensive and easy to read and contains a wealth of figures, tables, and illustrations that improve comprehension of information in the text. Repetition and omission are minimal for a multiauthored text of this magnitude.

Thirty-four authors contributed to 39 chapters and one appendix. Thirty-seven chapters and the appendix were updated from the 2nd edition. Two chapters concerning retroental fibroplasia and respiratory failure in the neonate were present in the 2nd edition but were not included in the 3rd. Two new chapters, addressing issues related to human immunodeficiency virus and anesthetic concerns related to maternal substance abuse, have been added since the 2nd edition. A chapter dealing with lawsuits and obstetric anesthesia contains a new section that reviews obstetric anesthesia closed claims. These additions are particularly valuable because of the increasing problems presented by maternal substance abuse and human immunodeficiency virus.

Most of the updated chapters are well organized, scholarly, and authoritative and contain a wealth of current information. A chapter on the effects of anesthesia on uterine activity and labor provides recent references and an unbiased discussion about the controversies regarding epidural analgesia during labor and the incidence of operative delivery. References from both the obstetrics and the anesthesia literature are included. These issues were not discussed in depth in the previous edition. The chapter about local anesthetics discusses two recent concerns with the use of chloroprocaine for epidural anesthesia: backache and reduction in the efficacy of  $\mu$ -receptor agonists. Another valuable section of that chapter elucidates the pharmacology of a new local anesthetic, ropivacaine. Chapters on systemic medication and intraspinal opiates during labor include some recent information about fetal/neonatal effects of opioids. The chapter addressing anesthetic management of preterm labor and delivery is enlightening, because it includes many recent references to important human and animal studies that have changed management principles in this area.

Some of the chapters could have supplied more details about areas of recent controversy. Although concerns about the use of a spinal microcatheter for continuous spinal anesthesia are mentioned in the chapter about analgesia for labor, potential mechanisms of neurotoxicity are not discussed. The chapter about preeclampsia includes an appropriate discussion of controversies regarding potential hypotension associated with spinal anesthesia for cesarean section, but references to support this fear are not provided. Information for a few of the chapters, such as the chapter that discusses physiologic changes of pregnancy, is derived primarily from older references, although few new studies have contributed significantly to this area.

In summary, this textbook remains the standard reference and practice guide in obstetric anesthesia. The additional information in the 3rd edition makes the acquisition of this text desirable for anyone who practices obstetric anesthesia, even for those who possess the 2nd edition.

**Karen S. Lindeman, M.D.**  
Division of Obstetric Anesthesia  
Department of Anesthesiology/Critical Care Medicine  
The Johns Hopkins University  
Baltimore, Maryland 21205