

REVIEWS OF EDUCATIONAL MATERIAL

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Rapid-sequence Review of Anesthesiology: With Time-limited Pressure. By Won K. Chee. Boston, Butterworth-Heinemann, 1997. Pages: 168. Price: \$35.00.

In the late 1970s, there was no American reference textbook of anesthesiology. A good introductory textbook had been available for 20 years, and a few subspecialty textbooks were in print, but no one on this side of the Atlantic Ocean had put together a complete reference textbook on anesthesiology for some time. By the late 1980s, so many textbooks on anesthesiology had been published that they could be grouped according to their purpose and function. Anesthesia textbooks were available as general reference textbooks, subspecialty monographs, introductory books, review textbooks, handbooks, and pocket manuals. Second and third edition reference textbooks grew to two or three volumes to include more facts; one publisher reduced print size to prevent a text from becoming overweight. Portability became a problem for some excellent publications. Well-motivated students could and do still study the entire contents of these texts over many months, yet the need for distillations of the expanding anesthesiology knowledge base arose for times when a quicker review was needed. Dr. Chee has provided us with a review textbook that might be studied quickly. Its format is devoted totally to outlines and tables and an occasional schematic diagram, allowing a reader to skim through information in a rapid sequence.

Although the outline format might limit the depth of content possible, the learning style of the reader must be considered when a review textbook is chosen. Most publications use sentences, paragraphs, tables, and figures to convey knowledge to a reader. We have been learning that way all our lives. Some students have a particular affinity for a question and answer format. There are popular review textbooks composed almost entirely of multiple choice questions. Patient-oriented reviews are structured around evaluation and management plans for actual or imagined patients. Some students have a particular facility for thinking in terms of outlines and lists; certain tasks in medicine such as considering differential diagnoses or treatment options are particularly well suited to outlines.

Those who like to think in terms of outlines will appreciate Dr. Chee's review. It literally fulfills its claim to provide succinct and relevant information in a highly concentrated and clarified form for those who seek quick, conceptual orientation in clinical anesthesiology. Superficiality is the price paid for brevity here, but textbooks much larger than this one can also be called superficial when compared with a multivolume reference work: review textbooks are designed for different purposes than reference textbooks. This review will refresh the reader's organization of facts, although a much greater depth of knowledge will be necessary. Its lack of index and references limit further reading, although the book's tables are often helpful for collecting, comparing, and contrasting some areas of important clinical information (*i.e.*, management of valvular heart diseases, p 32). Those who seek a rapid-sequence review and prefer to learn in an outline format will appreciate Dr. Chee's contribution to the literature.

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The Critically Ill Cardiac Patient: Multisystem Dysfunction and Management. Edited by Vladimir Kvetan and David R. Dantzer. Philadelphia, Lippincott-Raven, 1996. Pages: 432. Price: \$139.00.

The editors of *The Critically Ill Cardiac Patient: Multisystem Dysfunction and Management* state that the book is directed toward cardiologists in training and in practice. The editors believe that cardiology fellowship training does not place enough emphasis on the multisystem dysfunction that exists in critically ill cardiac patients. This book is intended to offer a state-of-the-art collaborative view of critical care management. Among the 50 contributors are academic cardiologists, anesthesiologists, internists, surgeons, obstetricians, pulmonologists, and radiologists.

The 417-page book contains 22 chapters covering a range of topics. Chapter 1 provides a cursory overview of the pathophysiology of cardiac failure. Presumably those with extensive cardiology training would require little review of this subject. Chapter 2 addresses assessment of the high-risk cardiac patient for non-cardiac surgery. This complicated and well-researched topic is adequately reviewed, and an algorithm for preoperative risk assessment is presented. However, as an anesthesiologist who commonly addresses issues of risk assessment with cardiologists, I would like to have seen a more comprehensive review of this topic. In addition, the comment that, "It is generally accepted that the negative inotropic action of general anesthetics makes spinal anesthesia preferable (when possible) for patients with severe left ventricular dysfunction," is a gross simplification of a complicated issue. Chapter 21 provides a nice overview of the various models used for risk stratification of cardiac surgical patients, and Chapter 22 does an excellent job of summarizing post-myocardial infarction risk stratification.

Chapter 3 provides a summary of ventilatory support in cardiac failure with specific emphasis on the effects of intrathoracic pressure changes on ventricular function and venous return. No mention of some of the more contemporary methods of ventilatory support such as pressure support, reverse I:E ratios, or high frequency ventilation are made.

Chapters 4 and 5 summarize the basics of oxygen transport and delivery and of regional blood flow in critically ill patients. Chapter 6, entitled *Cardiac Metabolism and Nutrition Support*, offers a nice summary of cardiac metabolism but makes no specific recommendations on providing nutritional support.

Chapters 7, 8, and 9 review renal, abdominal, and neurologic disorders in critically ill patients. The genesis, diagnosis, and treatment of renal failure is well covered. Included is a summary of the various methods of hemofiltration and dialysis. The chapter on abdominal crises is concise and well written. The chapter on neurologic disorders addresses cerebral emboli and cerebral hypoperfusion as well as concurrent cerebrovascular and coronary artery disease. It also includes a short explanation of alpha-stat and pH-stat blood gas man-