REVIEWS OF EDUCATIONAL MATERIAL

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Pain Relief in Labour. Edited by Felicity Reynolds. London, BMJ Publishing Group, 1997. Pages: 256. Price: 27.00£.

Pain Relief in Labour is one of a growing number of textbooks in the area of management of labor pain. This textbook by Russell, Scrutton, and Porter has some influences characteristic of practice in the United Kingdom. The textbook is intended for the nonanesthesia care provider, such as midwives, obstetricians, and general practitioners. The emphasis is, not unexpectedly, on *nonregional* labor analgesic techniques, including "natural childbirth," transcutaneous electrical nerve stimulation, acupuncture, hypnosis, herbal remedies (including aromatherapy), homeopathy, and inhalational analgesia for labor.

This textbook begins with a description of US and UK surveys of labor analgesia practices. A table depicts that in the United States in 1990, 0% of cases were performed with inhalational analgesia for labor analgesia, and 33% of cases were performed with epidural analgesia for labor. In contrast, in the United Kingdom in 1992, 60% of cases were performed with inhalational analgesia for labor analgesia, and 20% of cases were performed with epidural analgesia for labor. The authors state that inhalational analgesia with nitrous oxide is an option despite their statement that "nausea and vomiting is very common with nitrous oxide." The data presented may incorrectly convey to the reader a sense that inhalational analgesia is without complications or without loss of maternal protective airway reflexes and loss of maternal consciousness. The authors state that "failure to provide epidural analgesia was the single most frequent cause of anxiety and disappointment among laboring women. There are insufficient anaesthetists in the UK and many countries to provide an efficient epidural service universally."

Who should inform the mother about pain relief and methods of analgesia? The authors suggest "midwives not anaesthetists" provide information to the patient but recommend development of a liaison between midwives, obstetricians, general practitioners, and anesthetists. This comment raises concerns regarding which individual can effectively and accurately disseminate information regarding regional analgesic techniques for labor. Should the nonanesthesia care provider carry this responsibility?

The psychological methods of pain relief, including "natural" childbirth, psychoprophylaxis, hypnosis, and biofeedback are discussed with emphasis on the benefits of antenatal training for these psychological methods and suggestion that these methods should be "strongly encouraged" by the midwives, obstetricians, and general practitioners. The physical methods of pain relief, including transcutaneous electrical nerve stimulation, massage, water bath, aromatherapy, homeopathy, and herbalism, suggest *effective* analgesia for the first stage of labor only. Reports on efficacy are anecdotal and without clear scientific evidence. The authors state, "Though many nonpharmacological approaches to pain relief have been put forward, few have been widely used and fewer still subjected to randomized trials."

The authors briefly review the anatomy and physiology of regional analgesia for labor with nice diagrams and illustrations of spinal–epidural anatomy. There is also a brief review of the indications and contraindications of regional analgesia for labor and reference to the effects and complications of regional analgesia for labor (*i.e.*, potential *association* of epidural analgesia for labor with obstetric outcome).

The final part of the textbook illustrates "practical procedures" for regional analgesia for labor with sample infusion regimens. A guide is also provided for the nonanesthesia care provider on how to administer an epidural top-up dose.

Is this book worth buying? This textbook is more suited for the *nonanesthesia* care provider, such as the midwife, obstetrician, or general practitioner. For anesthesiology trainees and practitioners, this book is of peripheral interest only.

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Pediatric Cardiac Anesthesia, 3rd Edition. Edited by Carol L. Lake. Stamford, Connecticut, Appleton and Lange, 1998. Pages: 698. Price: $145.00.

This is the third edition of the multiple-authored text edited by Carol Lake, M.D., concerning anesthesia and postoperative care of pediatric patients with congenital heart disease. In the 5 years since the second edition, pediatric congenital heart surgery and anesthesia have continued to advance rapidly, which makes a new edition of this text beneficial and timely. The textbook contains 27 chapters contributed by many distinguished faculty with clinical and research expertise in pediatric patients with congenital heart disease. By having a variety of authors from different institutions, one avoids the tendency of some textbooks to become a manual of institutional preferences for care of patients. This textbook provides the reader with a well-balanced, readily available source describing perioperative care of a diverse and complex group of patients and an extensive collection of references for additional reading. The textbook may be separated into three parts: introduction to the general aspects of anesthesia for pediatric congenital heart patients, defects of congenital heart disease, and postoperative care of pediatric patients after congenital heart repair.

After a brief history of congenital heart surgery from its inception until the present by the editor Carol Lake, M.D., the next three chapters review basic pathophysiology of congenital heart disease and fetal and neonatal development and function. Chapter 4, by Kathleen Chance, M.D., F.A.A.P., is an excellent description of fetal and neonatal circulation and cardiac function, electrophysiology, and ultrastructure of the myocardial cell. It provides a good foundation of the basic principles of perioperative care of the pediatric congenital heart patient. A valuable addition to the textbook is a chapter by Jeanny K. Park, M.D., on pediatric cardiac electrophysiology, which reviews basic electrophysiology. A later chapter describes electrophysiologic procedures performed in the catheterization laboratory to treat certain arrhythmias, such as Wolff-Parkinson-White syndrome, in more detail.

Chapter 8, by Roger A. Moore, M.D., on the preoperative evaluation and preparation of the pediatric congenital heart patient, appears earlier in the textbook compared with the second edition, which is an example of the third edition's improved organization. I highly recommend this chapter to any anesthesia student who will be exposed to