

REVIEWS OF EDUCATIONAL MATERIAL

James C. Eisenach, M.D., Editor

The Fourth International Symposium on the History of Anaesthesia. Edited by Jochen Schulte am Esch, Michael Goerig. Lübeck, Germany, Verlag DrägerDruck, 1998. Pages: 878. Cost: \$90.00.

This book contains the published proceedings of the Fourth International Symposium on the History of Anaesthesia, held in Hamburg, Germany, on April 26–29, 1997. Although the history of this specialty may seem arcane and uninteresting to some readers, this book contains a number of fascinating vignettes. Special lectures by T. B. Boulton and L. E. Morris outline the history of pain and its alleviation during surgery. Others of the more than 150 essays, which emphasize Western European and North American contributions, describe such topics as the history of neuroanesthesia, the introduction of lidocaine, early reports from around the world about death and complications after anesthesia, the history of resuscitation, and forgotten contributors to the development of anesthesia in various locales. The harmful effects of foolishness, missteps, and racism on the development and application of anesthetic techniques are also detailed.

I particularly enjoyed reading about the early applications of spinal and other regional anesthetic techniques, about the lives of pioneers and innovators in anesthesia, and about the central individuals in the Wooley and Roe tragedies.

Costing \$90, this book is unlikely to become a bestseller. It will be of great interest to medical historians and to the many physicians for whom history is a captivating hobby. Reading this work made me regret that I had not attended the symposium.

John Butterworth, M.D.
Professor
Department of Anesthesiology
Wake Forest University School of Medicine
Winston-Salem, North Carolina 27157
jbutter@wfubmc.edu

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Novel Aspects of Pain Management: Opioids and Beyond. Edited by Jana Sawynok, Alan Cowan. New York, Wiley-Liss, 1999. Pages: 373. Cost: \$119.95.

This text definitely is not "Pain Drugs for Dummies" because it contains 17 scholarly reviews, with an average of 121 references each. Intended for academic scientists, clinicians interested in new therapies for pain control, and scientists in the pharmaceutical industry, this text evaluates many groups of compounds that affect pain processing. These include opioids, antiinflammatories, vanilloids, neurokinins, excitatory amino acids, inhibitory amino acids, α -adrenergic agonists, serotonergic agents, purines, cholinergic agonists, dopaminergic drugs, antidepressants, and voltage-gated ion-channel modulators, to name a few. Additional chapters about the neurophysiology of pain, animal models of pain, and special discussions related to peripherally acting agents and spinal drug interactions all make for a comprehensive text about drugs for pain treatment.

This is not a book for light reading, but it is a useful summary of work on analgesics up to the current time. Consisting predominantly of text and tables, along with a limited number of figures, the book compresses a huge amount of information. The authors and editors are well-recognized pain researchers and scholars from North America and Europe who have treated their subjects fairly, citing more than their own work on the topic. According to the preface, the authors were asked to provide an historical perspective of the class of agents they considered and to assess the potential for therapeutic development. The discussions focus heavily on basic science investigations, but important aspects related to the translation of these investigations into clinical practice are not ignored, even when the results have been disappointing.

If you are looking for a book to assist your interpretation of what a new substance is being rubbed, swallowed, or injected to block pain this week, this is the book for you. If you are a new investigator who wants to study analgesics, you have found a treasure. If you are looking for clinical "pearls" related to pain management, this is not your text. It is somewhat expensive, but, considering the life span of a text that summarizes an active research field, the cost is probably justifiable. Overall, this is a useful summary of ongoing research related to analgesics that is beneficial to novices and experienced investigators both.

Timothy J. Ness, M.D., Ph.D.

Associate Professor
Department of Anesthesiology
University of Alabama at Birmingham
Birmingham, Alabama
tim.ness@ccc.uab.edu

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Perioperative Care in Cardiac Anesthesia and Surgery. By Davy C. H. Cheng, Tirone E. David. Austin, Landes Bioscience, 1998. Pages: 247. Cost: \$45.00.

Perioperative Care in Cardiac Anesthesia and Surgery is a pocket-size spiral-bound manual. This book is the combined effort of 46 contributors, all of whom are from either the University of Toronto or the Toronto General Hospital, Toronto, Canada. The manual includes 40 chapters that are grouped into four major sections: "General Introduction into the Toronto General Hospital Cardiac Surgical Program and Fast Track Cardiac Surgical Procedures," "Anesthesia for Cardiac pulmonary Bypass Management," "Surgical Technique and Postoperative Considerations," and "Postoperative Cardiac Surgical Unit Management." There is an extensive appendix and an adequate index.

The authors summarize their subject in the introduction: "This handbook describes the perioperative management of adult patients who undergo cardiac surgery at our center." The text is largely a compendium of practice management paradigms that involve patients who present for cardiac anesthesia and surgery at the contributors' two institutions. The book thus represents "the Toronto way." The introductory chapter outlines the authors' institutions' combined cardiac morbidity and mortality rates for 11,112 patients undergoing cardiovascular operations with use of cardiopulmonary bypass from 1993 to 1997. The overall operative mortality rate for the period was

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3.4%. Data regarding mortality by surgical procedure and significant morbidities are outlined clearly in the first table. These data provide the foundation for the authors' recommendations throughout the book. From their experience in a successful, busy cardiothoracic surgery practice, they describe techniques and make recommendations that practitioners everywhere can apply.

The individual chapters are well-written and follow a basic outline format. Each chapter is approximately 2-10 pages, with an average length of 3 or 4 pages. There is heavy use of tables and lists, but surprisingly few diagrams. The tables and lists serve as quick references for specific problems clinicians may encounter. These are especially helpful in certain infrequent events. For example, Chapter 12 is a handy reference for clinicians who rarely, if ever, have an occasion to use nitric oxide. The majority of chapters discuss the material adequately; however, on occasion, the text is basic and general and is best suited for a resident or a fellow at the first stages of training in cardiothoracic anesthesia and surgery. Several of the chapters, however, provide excellent in-depth information. In particular, Chapter 17, "Intra-aortic Balloon Pumps," and Chapter 20, "Valvular Heart Disease," are particularly well-written.

The book's strength is its ability to present a large amount of information in a concise format. The appendices are particularly helpful, especially for managers in a cardiovascular intensive care unit and section heads of cardiothoracic surgery or cardiothoracic anesthesia programs who design and implement accelerated recovery programs. Each chapter ends with a short list of suggested readings. Although these supplement the reader's research pool, the text itself does not have references. I consider this a troubling omission. On many occasions, a particular fact or figure is given for a disease condition, but these statements are not referenced, and, therefore, readers must further investigate or verify statements on their own. A second edition would be strengthened by an abbreviated reference list.

Drs. Cheng and David have provided a well-written reference manual. *Perioperative Care in Cardiac Anesthesia and Surgery* is a comprehensive work, including the preoperative, intraoperative, and postoperative course of patients presenting for cardiothoracic surgery.

David A. Zvara, M.D.
Associate Professor
Department of Anesthesiology
Wake Forest University School of Medicine
Winston-Salem, North Carolina 27157
dzvara@wfubmc.edu

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Procedures and Techniques in Intensive Care Medicine, Second Edition. Edited by Richard S. Irwin, James M. Rippe, Frank B. Cerra, Frederick J. Curley, Stephen O. Heard. Philadelphia, Lippincott Williams & Wilkins, 1999. Pages: 307. Cost: \$59.00.

In the preface of *Procedures and Techniques in Intensive Care Medicine*, 2nd edition, the editors state that this book is reprinted

directly from the first section of *Irwin and Rippe's Intensive Care Medicine*, 4th edition (edited by Richard S. Irwin, Frank B. Cerra, James M. Rippe, Philadelphia, Lippincott Williams & Wilkins, 1998), one of the classic textbooks of critical care. The editors intend their work to be a "comprehensive guide to techniques and procedures in intensive care" in which "every procedure and technique required for certification in critical care or tested in internal medicine, surgical, anesthesiology or critical care board examination is presented and discussed in depth." This book clearly meets or exceeds these goals.

This multidisciplinary text has 31 chapters contributed by 45 authors from various parts of the United States. The topic of each chapter is a specific procedure, and all imaginable procedures are discussed from airway management and endotracheal intubation to temporary mechanical assistance for left ventricular failure. Each chapter discusses applied anatomy and physiology in a general manner and then presents indications, contraindications, equipment, techniques, and complications. Most chapters make good use of tables, figures, and black-and-white photographs and are extensively referenced. However, many references are from as early as 1996 or 1997.

The quality of the chapters is excellent and consistent throughout the book. Controversial material is presented fairly and is clearly identified as controversial (such as timing of tracheostomy in chapter 16, use of antibiotic impregnated catheters in chapter 2, and so forth). The text is well-organized, with minimal overlap of material among chapters, and the index is complete and easy to use.

Because this text is reprinted from a larger book, there are some references to chapters in the larger book that are not in this text, such as in chapter 1, in which the reader is referred to chapter 66 for discussion on weaning from mechanical ventilation, or in chapter 4, in which the reader is referred to chapters 36, 37, 41, 59, and 177 for more detailed discussions of diseases in which pulmonary artery catheters may be useful. I found this distracting because I wanted to check these references in the larger book.

Some newer monitoring techniques (such as continuous cardiac output, lithium dilution cardiac output, carbon dioxide elimination cardiac output, and so forth) are not discussed, and I found no information about monitoring the neuromuscular junction.

The editors believe that this "separate, more portable book will be useful not only to critical care specialists, but also to emergency department physicians, surgeons, CCRNs, and general medical residents." I do not think this 8½ × 11-in, ¾-in-thick book is very portable. Also, costing \$59, it is rather expensive. I think a smaller, more focused, less expensive handbook that could be carried in a coat pocket could be an excellent future project for these authors.

This book is thorough, well-balanced, and discusses almost all procedures and techniques in critical care. This work, or the larger textbook, should be available in all areas where critical care is practiced.

Michael H. Wall, M.D.
Assistant Professor
Cardiac Anesthesia and Critical Care Medicine
Wake Forest University School of Medicine
Winston-Salem, North Carolina
mhwall@wfubmc.edu

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