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Anesthesia Unplugged: A Step-by-step Guide to Techniques and Procedures. By Christopher Gallagher, M.D., Ricardo Martinez-Ruiz, M.D., and David Lubarsky, M.D. New York, McGraw-Hill Medical, 2007. Pages: 462. Price: \$89.95.

I have spent much of my academic life explaining to medical students and nonanesthesiologists that procedures are not all that anesthesia is about. Therefore, when I started to read this book I had a natural antithesis to it. That having been said, it is a very good book. It is exactly as the title suggests, a step-by-step guide to any procedure you might want to perform in the course of anesthetic management. It starts out with simple things such as placement of intravenous catheters and explains how to perform this technique in the same way any of us would explain to students and residents. Subsequent chapters include helpful guides to placement of internal jugular, brachial, subclavian, and femoral venous catheters and how to pass pulmonary artery catheters. The book then progresses to techniques for placing arterial catheters, obtaining and managing airways, and handling many other techniques, such as performance of spinals and epidurals, regional blocks, lung isolation, transesophageal echocardiology, and transvenous pacing. There are even chapters on operating room efficiency and positioning.

The style of writing is breezy, irreverent, and unaffected. This makes reading quite entertaining and not at all difficult. These characteristics are important advantages for a clinical textbook. I had both a resident and a student nurse anesthetist each read selected chapters, and they thought the teaching points were excellent and useful. Importantly, they wanted to know where to buy the book.

There are some excellent features of this book. Each chapter clearly gives indications, contraindications, complications, and helpful hints for problems that may occur. There are photographs that follow the explanations, and they are clear and helpful. One of the more interesting features is the reference section at the end of each chapter. It is annotated, with a short synopsis describing each reference. I have never seen this summary approach used in a text before, and it makes it easy to decide which references to go to for more information. There were other helpful features. For example, in the airway chapter there was a great suggestion on how to preoxygenate the claustrophobic patient: Simply remove the mask from the circuit and let the patient breathe through the tubing like a straw. The pacemaker and transesophageal echocardiology chapters do not pretend to be authoritative texts, but they do give good basic information on how these technologies work.

There are a few weak points to consider. I think regional blocks are better covered in regional textbooks, although this book is a reasonable introduction. The authors mention "external Zoll® pads," which is a great plug for that particular company (ZOLL Medical Corporation, Chelmsford, MA), but leaves out everyone else who makes external pacers. Some of the irreverence is completely unnecessary and may be offensive to some readers. For example, in the airway chapter there is a column about masks worn by Batman, Superman, and the Lone Ranger. Why? In a reference to lack of preoxygenation, there are several nonsensical comments such as "you'll be hip deep in caca" and "you've already screwed the pooch." In the regional chapter, there is a series of photographs that keep referring to the model "looking dead." These types of statements are completely unnecessary and if edited out would add to a better professional approach to teaching procedures.

All in all, I think this book is a useful addition to the teaching armamentarium in anesthesia. Learners will enjoy learning from it, and teachers will find it a useful guide and reference. If subsequent editions seriously edit out the less professional statements, it will be even better.

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(Accepted for publication April 13, 2007.)

Spinal and Epidural Anesthesia. By Cynthia A. Wong, M.D. New York, McGraw-Hill, 2007. Pages: 374. Price: \$99.00.

Spinal and Epidural Anesthesia, edited by Cynthia Wong, M.D., is a multiauthor, in-depth textbook on neuraxial anesthesia. The authors have targeted a major subspecialty of regional anesthesia and focused on this subject in greater depth than the broader textbooks are capable of doing. Although Drs. Philip Bromage and J. Alfred Lee might disagree with the authors' assertion that there "are no textbooks devoted solely to the clinical practice of spinal and epidural anesthesia," it is true that there has not been such a textbook in the past 20 yr, and their offering makes a substantial step in bringing us all up-to-date with the advances in neuraxial technique and applications.

The book is well designed, with in-depth chapters on the anatomy, pharmacology, and physiology of neuraxial techniques, complemented by an extensive section on the clinical application of these techniques to various subspecialties. These latter sections include obstetrics and postoperative pain management, as well as the many surgical subspecialties where neuraxial techniques are particularly useful. The chapters all exhibit extensive depth and modern references, although in the process they have omitted some of the classics that have not been surpassed (such as Abraham *et al.*'s description of a spinal test dose of lidocaine).¹ The text is generally clear and well written and supplemented by a generous quantity of black-and-white illustrations and photographs. The lack of colored illustrations is only a minor drawback. The tables and highlights are particularly useful in stressing the key points and guiding the reader through the pertinent sections.

The author has assembled an impressive collection of contributors to the various chapters, many of whom are clearly identified as experts in their subspecialty fields. The multiauthor aspect carries the inevitable counterbalance of depth from each author, combined with an unavoidable overlap on several of the important subtopics. And, of course, there is the personal bias of the individual chapter authors as to their favorite techniques. The issue of post-dural puncture headache, for example, is described in one chapter as "increased with youth" but in another as being "rare in pediatric patients." The corollary discussion of epidural blood patch similarly suffers an unfortunate lack of detail in the discussion of the timing and ideal volume to be injected. Likewise, many of the chapters on subspecialty application of techniques repeat issues of dosage and side effects that are covered in the general chapters.

Overall, however, there is excellent depth, despite a few omissions. In the Orthopedic chapter, there is the most fleeting reference to the advantages of peripheral nerve catheters as an alternative to neuraxial techniques when anticoagulation is an issue. The Chronic Pain section claims to address the issue of prevention of chronic pain, but does not address the recent awareness of chronic postsurgical pain that may be reduced by the more aggressive use of neuraxial analgesic techniques. And sometimes the depth is too much. The Acute Pain chapter includes so many options and alternatives, and even multiple recommended dose regimens, that the reader may leave the text with unanswered questions about where to start with a postoperative infusion. But that may be, as the authors point out, because there is no answer!

Nevertheless, this text provides an in-depth review of our current understanding of neuraxial anesthesia and its clinical applications. It is a useful resource for both the trainee and the experienced clinician.

The dilemma that will face most potential purchasers is the one that the authors identify in the preface: There are several general and regional anesthesia textbooks that already cover similar material in their specialized chapters. And on the other hand, the obstetrics chapters provide an excellent overview, but are they a substitute for a textbook devoted solely to the subject? There is no doubt that this textbook covers the material involved in great depth, and especially the clinical application of the neuraxial blocks. For someone wishing for a greater depth of knowledge and the most recent references in the field, this textbook offers a welcome addition to his or her library.

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Reference

1. Abraham RA, Harris AP, Maxwell LG, Kaplow S: The efficacy of 1.5% lidocaine with 7.5% dextrose and epinephrine as an epidural test dose for obstetrics. *ANESTHESIOLOGY* 1986; 64:116-9

(Accepted for publication April 13, 2007.)