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Handbook of Ambulatory Anesthesia, Second Edition. Edited by Rebecca S. Twersky, M.D., M.P.H., and Beverly K. Philip, M.D. New York, Springer, 2008. Pages: 484. Price: \$79.95.

In the past 30 yr there has been a massive proliferation of ambulatory surgical centers as well as procedural and diagnostic sites, with a corresponding increase in the number of patients requiring ambulatory anesthetic services. Anesthesiologists are continually faced with one overwhelming question: Which patients should be cared for in these ambulatory settings, and which should be anesthetized in the traditional hospital setting?

The Handbook of Ambulatory Anesthesia, second edition, edited by Rebecca S. Twersky, M.D., M.P.H. and Beverly K. Philip, M.D. answers this question and provides comprehensive support for the answer(s) with a summary of clinical research, published guidelines and consensus, as well as individual expert opinion. The handbook emphasizes the relevant diseases and clinical entities facing the ambulatory anesthesiologist, and also addresses the administrative concerns associated with ambulatory surgery and anesthesia including recovery, discharge, quality management, accreditation, and business fundamentals.

This is a soft cover book of 484 pages with 16 chapters written by 30 expert authors. The editors have standardized each chapter, beginning with a brief outline, followed by text enhanced with illustrations and tables, and concluding with a summary and a listing of key references. Chapters 1 through 9 are a concise review of adult and pediatric clinical challenges, sedation, and regional and general anesthesia. The content is easy to read with a rapid flow of the most pertinent information. However, it provided no additional information beyond that available in other current anesthesiology handbooks.

After these early chapters the handbook starts to set itself apart from others and provides information unique to the ambulatory setting. Chapters 10 and 11 introduce the reader to anesthesia outside of the operating room, including space requirements, equipment and administrative considerations, and a brief summary of common procedures and recommendations on anesthetic technique. Chapters 12 and 13 discuss recovery, criteria for discharge, emergency transport issues, and common postoperative complications and how to handle them in light of the ambulatory setting. Chapter 14 introduces the reader to the accreditation and regulation of ambulatory surgical facilities and provides a nice list of "hot-button" issues of particular importance to the ambulatory anesthesiologist. This list includes intraoperative awareness, sedation by nonanesthesiologists, monitor and ventilator alarm systems, the definition of "immediate availability" of anesthesiologists when the anesthesia is being provided under the supervision of the anesthesiologist, informed consent, and medication security. Chapter 15 provides information about the financial stability and profitability of the ambulatory surgical center. The final chapter provides an overview of both the initial planning and development, and the daily management of the ambulatory surgical center. This chapter delineates the roles of ambulatory surgical center professionals and other personnel and their impact on creating a safe, smoothly functioning, and profitable center. The handbook also contains 20 appendices with important tables and figures which are likely to be referenced frequently by the practitioner. The index for these appendices is listed on both the inside front and back covers of the handbook.

This handbook provides an overview of the common clinical issues facing the ambulatory anesthesiologist as well as an introduction to the administrative items necessary for the successful development and performance of the ambulatory surgical center. As for this book's limitations, I noticed several incorrect drug dosages and mislabeled information embedded in the text and appendices. The lack of font color (black text only) made the reading a bit monotonous.

Ambulatory anesthesiologists will likely refer to this handbook when faced with clinical dilemmas, with its scope, chapter organization and

succinct clarity capable of addressing most concerns. Ambulatory surgical administrative personnel will find the handbook useful in gaining a perspective of the clinical challenges facing the ambulatory patient, anesthesiologist, and surgeon.

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Geriatric Anesthesiology, 2nd Edition. Edited by Jeffrey H. Silverstein, M.D.; G. Alec Rooke, M.D., Ph.D.; J. G. Reves; M.D.; and Charles H. McLeskey, M.D. New York, Springer Science and Business Media, LLC, 2008. Pages: 440. Price: \$119.00.

A little over 10 years after the first edition, *Geriatric Anesthesiology* has grown not just in age, but also in scope and maturity with the publication of a second edition. The preface begins with, "The goal of getting older is to age successfully." To this reviewer, the parallel goal of a second edition is to update the first edition and enlarge upon it. The editors have accomplished that goal.

The book is very naturally divided into four major sections: Introduction to Clinical Geriatrics, Cardinal Manifestations of Aging and Disease in the Elderly, Anesthetic Management of the Aged Surgical Candidate, and Anesthesia for Common Surgical Procedures in the Aged.

Part I will likely be the least read section of the book, but clearly belongs in a text like this. It paints the picture of geriatric medicine in general, and then specifically relates it to our specialty. The authors remind us just how much of our practice is still empirically based while we strive to generate the Class I evidence needed to become more evidence-based in our care of older patients when and where it makes a difference. In the last chapter, Jankowski and Cook do a wonderful job enumerating research priorities in geriatric anesthesiology. They tickle the reader's brain to think about and participate in getting our minds around the still-to-be pursued questions that deserve to be answered on behalf of the fastest growing demographic population in our specialty.

Part II consists of chapters on the major systems and processes and explains why and how they behave differently in the older patient. The chapters are interestingly written with great detail and are, for the most part, unusually well referenced and current. The postoperative central nervous system dysfunction chapter is a must-read treatment of the topic. The only awkward element is one chapter on operative debridement of chronic wounds, which only touches on intraoperative care considerations and is better suited to a surgery textbook.

Part III tackles risk stratification and reduction and the spectrum of pharmacology topics (opioids, chronic medicines, hypnotics, relaxants, inhalation, regional and pain management). It also includes discussions on fluid management and a chapter on anesthesia considerations for geriatric outpatients. The latter is my first choice for the must-read chapter from this part of the book. Each chapter is again a thoughtful synthesis of the literature and stands on its own, with very little repetition between chapters.

Part IV provides seven chapters tackling topics (e.g., sedation) and procedures (e.g., orthopedic, urologic, thoracic, cardiac, vascular, and abdominal) common to the older patient. I liked that the chapters were not written in a "how to" style, but rather in one that describes the issues and considerations and related published data to provide a framework on which to base one's own practice.

In summary, the second edition of *Geriatric Anesthesiology* is a very refreshed and well-referenced second edition with a remarkable number of references from the new millennium. If you are looking for a

book on how to specifically do *x* or *y*, you will be disappointed. If, however, you want a well-written, easily read textbook on issues ranging from politics, capacitance, and physiology to postoperative cognition, various common procedures and associated medical evidence surrounding the care of older patients, then this book is for you. It fits very comfortably in the "referred to" section of my bookshelf and very capably and thoroughly informs the reader who is interested in both the scope and detail of geriatric anesthesiology. I was struck by how in the age of the internet as a typical first source, this book provides a very efficient shortcut to Web surfing to address geriatric anesthesia questions and topics. The editors and authors are to be congratulated.

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Principles and Practice of Pharmacology for Anaesthetists, 5th Edition. By Norman Calvey, B.Sc., M.D., Ph.D., and Norton Williams, M.B., Ch.B., F.F.A.R.C.S. Hoboken, New Jersey; Wiley, John & Sons, Inc.; 2008. Pages: 352. Price: \$200.00.

Peruse the bookshelf of any anesthesiologist and you are sure to find a selection or two on pharmacology. Few elements are more central to the practice of medicine than understanding the drugs we use. The administration of medication is the foundation of our specialty, and sets anesthesiology apart from other areas of medicine. The outside world, including some of our medical colleges, view our practice as something akin to a mysterious spell with a convenient "on and off" switch. However, refined knowledge of pharmacology, and specifically anesthetic agents, allows us to transform the event into a predictable experience.

Calvey and Williams have written a current, fifth edition of their previous work entitled, *Principles and Practice of Pharmacology for Anaesthetists*. The title is the first clue that these authors are colleagues from "across the pond," specifically the University of Liverpool. In 352 pages, these gentlemen have created an updated text that provides a strong scientific base in pharmacology and a relevant guide for practicing clinicians.

As stated in the preface, each chapter has been overhauled to reflect the state of the art in pharmacology. Each section is divided into key word subsections that break up the tedious academia into manageable pods of digestible information. They have made liberal use of tables and diagrams. The table in Chapter 9 outlining local anesthetics is a noteworthy example. A complete summary of the pharmacologic characteristics of all commonly used agents is presented. Charts of this sort are perfect tools for learning these drugs and preparing for board examinations. Flow charts, such as the one outlining the receptor mechanism behind malignant hyperthermia, are also pertinent adjuncts for essential material. Unfortunately some drawings are a bit rudimentary, and the monochromatic green accent to the black and white illustrations is less than engaging. Given that this text is more expensive than other comparable tomes, higher-quality graphics and illustrations would be expected.

The authors do make an attempt to broaden the scope of this new edition. The important segment on adverse drug reactions briefly outlines the physiology of the more common hypersensitivity reactions we encounter. Unfortunately, the subject matter is overrun by British nomenclature that makes it conceptually challenging for those from outside the British Isles to absorb.

The first 6 of the 17 chapters cover the basic science of pharmacology. Topics include absorption and elimination, drug action, drug interactions, variable response, pharmacokinetics, and adverse reactions. Attention is then turned to specifics of anesthetic pharmaceuti-

als. Each major drug is given a separate heading and summary for convenient reference. The final chapters address drugs commonly used in the perioperative period such as antihypertensives, anticoagulants, and hypoglycemics. The initial chapters give a solid foundation of knowledge that is built upon in the chapters to follow. When read from cover to cover, one receives a cohesive overview of pharmacology relevant to anesthesia. Appropriate physiology is reviewed where needed to elucidate the mechanism of various drugs. Best of all, with only two authors there is little redundancy. The book is kept concise by referencing other chapters for further explanation, avoiding repetition. A ton of information is packed into this volume.

It should be noted that the European authors only refer to drugs currently available in Great Britain, some of which will be less familiar to the American audience. Further, generic drugs are referred to according to the recommendations of the International Nonproprietary Names. Although the reader may be aware of paracetamol, suxamethonium, dopexamine, and enoximone, their reference may be distracting for the average American practitioner and confusing for trainees.

Pharmacology is a highly complex subject that is made more accessible for common practice in this text. In a manageable length, the authors have created a complete knowledge base for the nubile anesthesiologist. For the practicing clinician, the detailed index and succinct summaries of specific topics make ready reference quick and convenient. This book will surely be welcome in the European community, an audience already familiar with previous editions. It will be interesting to see how well it is received in the competitive United States academic textbook market.

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Analgesia, Anaesthesia and Pregnancy: A Practical Guide, 2nd Edition. Edited by Steve Yentis, M.B.B.S., B.Sc., M.D., F.R.C.A.; Anne May, F.R.C.A.; Surbhi Malhotra, M.B.B.S., F.R.C.A.; with David Bogod, F.R.C.A.; Diana Brighthouse, B.M., F.R.C.A.; and Chris Elton, M.B., Ch.B., F.R.C.A. Cambridge, England, Cambridge University Press, 2007. Pages: 414. Price: \$70.00.

An experienced team of British obstetric anesthesiologists has edited the second edition of this practical guide. It provides useful information for the anesthesiologist in training as well as for the anesthesiology specialist.

Frequently occurring problems are presented in brief mini-sections, a format that makes this work useful for quick and easy browsing. The chapters are well written and the information is concisely presented. The problems are outlined, the management options are discussed, and the key messages are presented at the end of each chapter in gray boxes. The authors make suggestions for further reading at the end of most chapters.

The first section deals with preconception and conception. Strategies for management of ovarian hyperstimulation syndrome as well as anesthesia for assisted reproduction technologies are presented.

There are many problems that can arise during pregnancy, and the second section in this book is remarkably comprehensive in their presentation. Pregnancy and pregnancy-related problems are discussed from anesthetic, obstetric, or nonobstetric perspectives. Common problems (e.g., aortocaval compression syndrome or pain of labor) as well as strategies for managing rare situations (e.g., intrauterine surgery) are described in detail. The spectrum of topics extends from spinal anesthesia for delivery to air embolism to awareness during general anesthesia for cesarean delivery. A number of the issues listed are more of a concern for the obstetrician than for the anesthesiologist. However, understanding the underlying obstetric pathology and ther-