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 anesthesia. I was struck by how in the age of the internet as a 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.

Nikolaus Gravenstein, M.D., *The Jerome M. Modell, M.D.,
Nikolaus Gravenstein, M.D.,* congratulated.


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 anesthesia 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 pharmacuticals. 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.

Natalia S. Ivascu, M.D.,* Weill Cornell Medical College, New York, New York. nib9009@med.cornell.edu

(Accepted for publication December 15, 2008.)


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 hypervascularization 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-
The hospitalization of a newborn has not gained popularity in the United States. Similarly, although many anesthesiologists in the United Kingdom and may make this omission seem rather curious to American practitioners. The widespread use of chloroprocaine in the United States an epidural catheter either during labor or for emergency cesarean delivery. The widespread use of chloroprocaine in the United States may make this omission seem rather curious to American practitioners. Similarly, although many anesthesiologists in the United Kingdom and most parts of continental Europe. Thus, it is not listed as an option for “topping up” an epidural catheter either during labor or for emergency cesarean delivery. The widespread use of chloroprocaine in the United States may make this omission seem rather curious to American practitioners. While most management strategies are universally applicable, others are limited to the United Kingdom, although differences to the United States are usually, but not consistently, mentioned. For example, chloroprocaine is not available in the United Kingdom and most parts of the UK. However, it is not listed among the options for “topping up” an epidural catheter either during labor or for emergency cesarean delivery. The widespread use of chloroprocaine in the United States may make this omission seem rather curious to American practitioners.

Another controversial topic (e.g., cricoid pressure) is discussed using the perspective of current United Kingdom practices. A section on vaginal birth after cesarean is titled “Trial of Scar,” a uniquely British term which many American anesthesiologists will not recognize. The text does, however, mention the more common acronym of “VBAC.” While the American obstetric anesthesiologist may appreciate a comparative approach to practice, such as learning about inhalation analgesia (Entonox) for labor, midwifery training, and midwife-controlled epidural top-ups, the book is primarily aimed at a United Kingdom or European audience. With the aforementioned limitation in mind, this book makes a nice addition to the library of anesthesiologists who want a concise and yet comprehensive book covering a wide range of topics in obstetric anesthesia.

Dirk Varellmann, M.D., D.E.S.A., William Camann, M.D.* "Brigham and Women’s Hospital, Harvard Medical School, Boston, Massachusetts. wcamann@partners.org

(Accepted for publication December 16, 2008.)


Medical students are challenged by the limited number of textbooks that provide quick and practical introductions to anesthesiology. Lecture Notes: Clinical Anaesthesia introduces medical students, nurses and nurse anesthetists, and nonanesthesiologist general practitioners to the current practices of clinical anesthesiology. The textbook is also a useful tool to instructor anesthesiologists searching for a core text to recommend to their rotating medical students.

In addition to concepts in general anesthesia administration and management, Lecture Notes: Clinical Anaesthesia provides a fair content of pain management principles and peripheral nerve blocks. In its six chapters, the book places emphasis on the role of anesthesiologists as perioperative physicians, not just operating room anesthesia providers. Three chapters of the book concentrate on perioperative medicine: chapter one, Anesthesia Assessment and Preparation for Surgery; chapter five, Recognition and Management of the Acutely Ill Patient on the Ward; and chapter six, Management of the Critically Ill Patient.

Although Lecture Notes: Clinical Anaesthesia has been condensed in its third edition to 172 pages, it did not lose its standards of clear diagrams, photographs, and key facts boxes. These traits have to be some of the strongest features in earlier editions of this book. The photographs and diagrams assist learners, particularly visual learners, to comprehend key principles in anesthesiology such as applying mask ventilation, performing correct chest compression during cardiopulmonary resuscitation, and inserting laryngeal mask airways. In addition, the book contains self-assessment questions at the end of each chapter that focus the students’ attention on the important concepts, with answers provided at the end of the book. In the reference section of each chapter, useful Web sites related to the chapter are provided as an excellent feature for modern learners who are very comfortable using technology and the internet for learning purposes.

Although Lecture Notes: Clinical Anaesthesia contains a fair amount of pharmacology, it falls short of providing any significant content in physiology. In addition, other than a quick review on obstetric anesthesiology, the book does not provide any content regarding other subspecialties in anesthesiology such as pediatric or cardiothoracic anesthesiology.

In summary, Lecture Notes: Clinical Anaesthesia offers a comprehensive review of general anesthesiology principles and practices in a quick and easy-to-read style. I recommend it as an excellent first-step for students and other medical professionals who are interested in the field of anesthesiology. The book provides principles of clinical anesthesiology in text, tables, and photographs, but students are encouraged to expand beyond this book for more in-depth knowledge of the medical specialty of anesthesiology.

Mohanad Shukry, M.D.* "Oklahoma University Health Sciences Center, Oklahoma City, Oklahoma. mohanad-shukry@ouhsc.edu

(Accepted for publication January 6, 2009.)