

25. Hack HA: The perioperative management of children with pheochromocytoma. *Paediatr Anaesth* 2000; 10:463-76
26. Prys-Roberts C, Farndon JR: Efficacy and safety of doxazosin for perioperative management of patients with pheochromocytoma. *World J Surg* 2002; 26:1037-42
27. Schwartz JJ, Akhtar S, Rosenbaum SH: Endocrine function, *Clinical Anesthesia*, 6th edition. Edited by Barash PG, Cullen BF, Stoelting RK, Cahalan MK, Stock MC. Philadelphia, Lippincott Williams & Wilkins, 2006, pp 1279-304
28. Steinsapir J, Carr AA, Prisant LM, Bransome ED Jr: Metyrosine and pheochromocytoma. *Arch Intern Med* 1997; 157:901-6
29. Boutros AR, Bravo EL, Zanettin G, Straffon RA: Perioperative management of 63 patients with pheochromocytoma. *Cleve Clin J Med* 1990; 57:613-7
30. Ulchaker JC, Goldfarb DA, Bravo EL, Novick AC: Successful outcomes in pheochromocytoma surgery in the modern era. *J Urol* 1999; 161:764-7
31. Wuethrich PY, Hsu Schmitz SF, Kessler TM, Thalmann GN, Studer UE, Stueber F, Burkhard FC: Potential influence of the anesthetic technique used during open radical prostatectomy on prostate cancer-related outcome: A retrospective study. *ANESTHESIOLOGY* 2010; 113:570-6
32. Looney M, Doran P, Buggy DJ: Effect of anesthetic technique on serum vascular endothelial growth factor C and transforming growth factor β in women undergoing anesthesia and surgery for breast cancer. *ANESTHESIOLOGY* 2010; 113:1118-25
33. Libert N, Tourtier JP, Védrine L, Chargari C: Inhibitors of angiogenesis: New hopes for oncologists, new challenges for anesthesiologists. *ANESTHESIOLOGY* 2010; 113:704-12

ANESTHESIOLOGY REFLECTIONS

Ivan the Terrible Anesthetist



So just how was the nose of the “dummy patient” damaged (*simulated on right*) at the 1939 New York World’s Fair? Well, at the Medicine and Public Health Building of the 1939 New York World’s Fair (*left*), anesthesia exhibitors had affectionately given their “dummy anesthetist” the nickname “Ivan.” According to *New York Times* reporter Meyer Berger, all that the mechanized mannequin was required to do was “to clap the metal ether cone on the dummy patient’s face.” When electrical wiring failed, “Ivan began pounding the patient as if to do him in.” As the power was switched off, Berger observed that “Ivan stopped the assault, holding the cone in midair.” (Copyright © the American Society of Anesthesiologists, Inc. This image also appears in the *Anesthesiology Reflections* online collection available at www.anesthesiology.org.)

George S. Bause, M.D., M.P.H., Honorary Curator, ASA’s Wood Library-Museum of Anesthesiology, Park Ridge, Illinois, and Clinical Associate Professor, Case Western Reserve University, Cleveland, Ohio. UJYC@aol.com.