other, longer term, use. Use of prostacyclin and effects of cardioplegic
suction on platelets and other blood elements are discussed in both the
chapter on anticoagulation and on microemboli.
Unfortunately, the two chapters on cardiac anesthesia attempt to
summarize material which is satisfactorily covered only in depth in the
existing texts on cardiac anesthesia. Except for the section describing
the termination of cardiopulmonary bypass, these chapters have little
to offer the American cardiac anesthesiologist, and are of questionable
value in a text on cardiopulmonary bypass. Indeed, the British influence
of these chapters even extends to the suggestion of diazepam with
a cup of tea as a premedicant prior to cardiac surgery.
Despite multi-authorship, the writing style is remarkably similar,
clear, and lucid. Misprints are uncommon. With the exception of a
single chapter in which there are no references, points of view are well
substantiated by appropriate references. However, the majority of the
references are from 1984 or earlier, which is a problem in a rapidly
changing field. In summary, this book is a valuable addition to depart-
mental libraries and to the library of the practicing cardiac anes-
thesiologist because of its complete and excellent review of perfusion
physiology.

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Manual of Anesthesia in Cancer Care. Edited by Howland,
Rooney, and Goldiner. Churchill Livingstone, 1986. Pages:
321. Price: $27.00

The Manual of Anesthesia in Cancer Care is a 12-chapter, 321-page
paperback book written to "orient the non-oncologic anesthesiologist
not only to the possibilities of cure but to the myriad physiologic
abnormalities that can occur in cancer patients." The strength of this
book lies within a few select chapters. The first chapter includes a
standard tumor grading system, a review of anticancer regimens (i.e.,
surgery, radiation therapy, and chemotherapy), brief summaries of
selected tumor types, and various medical and surgical emergencies
seen with cancer care. A chapter on the immunocompromised patient
reviews the different types of immunodeficiency, including an infor-
mati ve section on acquired immune deficiency syndrome (AIDS) with
recommended precautions for the anesthesiologist. A chapter on
chemotherapy outlines the common chemotherapeutic agents and
various tumor sensitivities, as well as modes of action and complica-
tions. A concise, fact-filled summary concludes this chapter. A chapter
on "special considerations" in the cancer patient presents pertinent
issues, such as hyperalimentation, the problem of infection in the
immunosuppressed patient, and an excellent overview on the treatment of
cancer pain. The aforementioned chapters highlight points unique to
cancer management, and present material which may be new or in
need of review for the "non-oncologic anesthesiologist." In these
chapters, the authors sprinkle some "pearls" on the medical and anes-
thetic management of cancer patients.

The remaining chapters, however, review areas that are quite famil-
lar to anesthesiologists. Chapters on preoperative evaluation, intraop-
erative monitoring, postoperative care, and critical care offer very
little information that cannot be found in most standard anesthesia
texts. Separate chapters on hemostasis and blood component therapy
could have been combined into one concise chapter. A chapter on the
development of anesthetic techniques and a review of research
projects in cancer patients at Memorial Sloan-Kettering Cancer Center
appeared out of place in a manual of this nature.

The book was not well edited. Sections were poorly organized, some
subtitles were misleading, and areas were repetitious. A number of
errors (i.e., incorrect calculation of dopamine dose, referring the
reader to Chapter 5 instead of Chapter 1 for information on SIADH,
etc.) were present in the text. An annoying feature was the introduc-
tion of certain points by the statement "of interest to the anesthesi-
ologist is . . .," prompting the reader to check the title of the book
and wonder for whom it was written.
In summary, an entire book on anesthesia in cancer care appears to
be excessive. A well-organized, comprehensive chapter in a standard
text or a review article covering topics unique to this patient popula-
tion would be more appropriate and valuable.

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