

*Alan Jay Schwartz, M.D., M.S.Ed., Editor*

### **Oxford Handbook of Anaesthesia, 4th Edition.**

Edited by Keith G. Allman and Iain H. Wilson. New York, Oxford University Press, 2016. Pages: 1266. Price: \$57.50 (Flexibound), \$35.74 (Kindle Edition).

As the medical (and anesthetic) literature burgeons, authors and editors of a general handbook increasingly face the challenge of being thorough without being unduly expansive. The latest version of this self-described “practical evidence-based guide for anaesthetists” has approached this daunting task with some success through a combination of terse writing and small print. This 1,266-page volume measures one-and-a-half inches thick and may fit into the front pocket of a white coat, though carrying it there will risk tilting its owner to one side. The principal benefit of owning it, however, is the abundance of anesthesia-related topics that are covered within it.

The volume is divided into 44 chapters, with most topics presented in 1- to 2-page chunks. The chapters are organized by both organ systems and surgical disciplines; there also are sections on uncommon conditions, critical care, anesthetic emergencies, airway management, acute pain, and regional anesthesia, as well as a drug formulary and a useful compendium of anesthesia-related data in graphs and charts. The editors state that the book was “written for those who have mastered basic anaesthetic techniques but need advice for the many common problems encountered in clinical practice.” The title and the presence of the pervasive anaesthetic diphthong clearly indicate its UK origins, and the writing obviously reflects UK practice. As such, this book aptly fits a niche for anesthesia trainees and practitioners within that system.

Does this volume have value for Americans or for non-UK personnel? Of course it does: most practices are common and most knowledge is shared covalently. The use of ultrasound for regional nerve blocks is now universal, and malignant hyperthermia requires dantrolene treatment wherever it occurs. Once one has gotten past pethidine for meperidine and paracetamol for acetaminophen, however, differences abound. Mivacurium is still available in England, while target-controlled infusions have not penetrated the United States. References to the National Institute for Health and Care Excellence and the Trust are not familiar to American readers; nor is the high dependency unit. Measurements in kPa are usually translated into mmHg, but not always. Recommendations for perioperative diabetes management also differ from those usually presented in the United States. Just the same, there is copious information on many topics in this book that warrants having it for ready reference.

Even so, thumbing through this handbook felt delightfully like hitchhiking through the English countryside (of operating theatres). Taking this tour, I gained an appreciation of

what was similar and what differed in our practices of anesthesia in 2016. We have learned from each other over the years, and that reciprocity is alive and well represented in this book. American and British beginners in our field will best be served by reading texts constructed in their respective environments. More seasoned American anesthesiologists, on the other hand, can benefit from learning about practice in the United Kingdom, and this handbook is the perfect vehicle for that experience.

**Philip Lebowitz, M.D., M.B.A.**, Albert Einstein College of Medicine, Montefiore Medical Center, Bronx, New York. plebowit@montefiore.org

*(Accepted for publication April 5, 2016.)*

### **A Case Approach to Perioperative Drug-Drug Interactions.**

Edited by Catherine Marcucci, M.D., Michael P. Hutchens, M.D., Erica D. Wittwer, M.D., Ph.D., Toby N. Weingarten, M.D., Juraj Sprung, M.D., Ph.D., Wayne T. Nicholson, M.D., Pharm.D., M.Sc., Kirk Lalwani, M.D., David G. Metro, M.D., Randal O. Dull, M.D., Ph.D., Christopher E. Swide, M.D., F. Jacob Seagull, Ph.D., Jeffrey R. Kirsch, M.D., and Neil B. Sandson, M.D. New York, Springer Science+Business Media, 2015. Pages: 978. Price: \$69.99 (e-Book), \$99.00 (Softcover).

In *A Case Approach to Perioperative Drug-Drug Interactions*, Drs. Marcucci and Hutchens assembled a team of 13 editors with expertise in anesthetic pharmacology and perioperative medicine to prepare an easy-to-read yet comprehensive treatise of drug–drug interactions (DDIs). With nearly 200 contributing authors and 220 chapters, the book provides a first of its kind in-depth look at DDIs that perioperative clinicians will find useful in anesthesia patient care.

The editors quickly established the rationale for the book. They point out that the U.S. Food and Drug Administration has approved more than 10,000 prescription medications; these medications often contain more than 1 active ingredient. Exploring possible interactions between approved drugs, along with supplements and foods known to influence drug metabolism, makes for millions of potential DDIs. It is impossible for a clinician to stay up-to-date on existing and new DDIs. This book represents a comprehensive solution to that dilemma of clinicians.

A glance through the table of contents quickly suggests to the reader that this will be an entertaining read. The book consists of catchy chapter titles, such as “Naturally Occurring and Nasty,” “Royal Flush,” and “Keep an ‘Ion’ the Twitches,” to engage readers as authors present complex concepts in concise brief chapters. The intent is to break up a large and