

James C. Eisenach, M.D., Editor

**Nunn's Applied Respiratory Physiology, 5th Edition.** By Andrew B. Lumb. Oxford, Butterworth-Heinemann, 2000. Pages: 687. Price: \$115.00.

For over 30 yr, John Nunn's *Applied Respiratory Physiology* has served as a standard reference for generations of physicians wishing to ground their clinical practice firmly on a physiologic foundation. Its enduring popularity is a testimony to Dr. Nunn's skills as communicator and scientist and his unflagging energy in keeping abreast of developments in the field. Many investigators, including myself, have presented work at scientific meetings and then were immediately accosted by Dr. Nunn, pencil and pad in hand, wanting to get the details right so that the results could be included in the next edition of his text.

In this new edition, Dr. Nunn, upon his retirement, passes the torch to a practicing clinician with research interests, Dr. Andrew Lumb. Reflecting this change, this edition is more clinically focused, with a greater emphasis on the pathophysiology of pulmonary disease, which is now accorded a separate section. Readers will find this reorganization of material welcome. New chapters discuss specifically airway diseases, and, in an interesting conjunction, breathing in closed environments, ranging from closed-circle anesthesia to space habitation. At the same time, core information, such as the classic description of oxygen's journey from environment to mitochondria, is preserved from earlier editions, including the beloved elegant line drawings and diagrams, which prove that the current fad of multicolored text and figures is not necessary to convey information effectively.

Considering the wide range of disciplines now important to pulmonary physiology (from molecular biology to physics), keeping a single-authored text up-to-date is a daunting task indeed. Happily, Dr. Lumb is usually up to the challenge. For example, the chapter on the effects of anesthesia on the respiratory system nicely summarizes the recent literature, a feat that some recent editions of standard anesthesia texts have been unable to achieve. Although discussion of significant developments in other areas (such as recent work detailing the importance of nongravitational factors in determining pulmonary blood flow) is sometimes omitted, this does not detract from the overall utility of the text. Some may wish for a more detailed treatment of current "hot topics," such as ventilator-induced lung injury, but to me, much of this book's charm lies in its evenhanded treatment of a wide range of subjects ranging from the topical to the obscure. Plenty of texts talk about ventilators in excruciating detail, but where else can you learn about earth's prebiotic atmosphere (a sort of steamy seltzer), how oxygen tension was monitored in diesel-powered submarines (during long dives, cigarettes wouldn't ignite), or why the supersonic Concorde was designed with small windows (to slow the rate of decompression at high altitudes in case of window failure)?

In these days of gene therapy and molecular medicine, it is frightening how little many in the current generation of medical students and residents understand about basic principles of respiratory physiology. This perhaps should not be surprising, considering that many of their teachers, who are often more concerned with ion channels or clinical practice, do not understand them either. For this reason, this wonderful book is more important than ever. Every anesthesia resident should read it, and every anesthesiologist should have a copy nearby.

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**The Patient's Guide to Anesthesia: Making the Right Choices.** By A. J. Hill. New York, Kensington Publishing Corporation, 1999. Pages: 270. Price: \$13.00.

**Under the Mask: A Guide to Feeling Secure and Comfortable during Anesthesia and Surgery.** By James E. Cottrell (with Stephanie Golden). New Brunswick, Rutgers University Press, 2001. Pages: 256. Price: \$39.00.

An increasing number of patients are arriving in our prep and holding areas as well-informed "medical care consumers." Much of this is attributable to the plethora of data available in the mass media and on the Internet. Recently, a couple of our colleagues supplemented this phenomenon with the publication of guidebooks aimed at the lay person about to undergo surgery.

The easier-to-read, more digestible, and more compact paperback is by A. J. Hill, a Virginia anesthesiologist. In his book entitled *The Patient's Guide to Anesthesia: Making the Right Choices*, Hill approaches the subject from a subjective and empathetic viewpoint, as a patient himself who has undergone neck surgery. The writing style is lively and direct, laced with witty anecdotes from his own practice. The book is organized into sections, beginning with an overview of the surgical experience, followed by several chapters on the types of anesthetics, and concluding with select topics as pain control, obstetrics, and pediatric anesthesia. He cleverly intersperses a few illustrations throughout the text to maintain the reader's attention; the pen-and-ink sketch of "Who's Who" in the operating room was particularly entertaining. He also has timely sidetracks every few pages into historical (e.g., the discovery of ether as an anesthetic) or technical (i.e., our machinery, the drugs we use) "interludes" (his term). The chapter headings alone are good examples of his friendly, nonintimidating prose ("Feel No Evil," "The Gentle Touch," "Mother Nature").

For a more comprehensive and detailed introduction to our specialty, though, there is *Under the Mask: A Guide to Feeling Secure and Comfortable during Anesthesia and Surgery* by James E. Cottrell and Stephanie Golden. Dr. Cottrell's treatise is so wide-ranging and all-inclusive that I would recommend it as an introduction to anesthesia not just for our prospective clients, but also for junior medical students and other paramedical personnel. With the able assistance of Ms. Golden, a professional medical writer, Dr. Cottrell shares with his readers the wisdom of his 30 yr as a practicing anesthesiologist at the SUNY Health Science Center in Brooklyn.

The book is similarly divided into two parts, the first containing basic information about the development and current scope of anesthesiology, and the second going into the nuts and bolts of the procedures we all perform. Pertinent to this era of managed care, he devotes many paragraphs to patient rights, a whole how-to section on working within the system to protect the consumer's well-being. His insistence on a thorough preoperative consultation is a good case in point. Here, he admonishes the reader to prepare for the meeting by being upfront about previous medical problems, and to not be shy about asking the physician questions, such as about their continuous operating room presence (a opportune topic in the light of the adverse media spotlight our specialty has been recently subjected to). He also very matter-of-factly narrates some vignettes from his own and his contemporaries' experiences, not all of which have had satisfying results. He reminds the reviewer that the physician is human and that anesthesiology is still as much an art as a science.

A nice touch at the end of every chapter is his recap of important questions and points to remember, considering some of the information can get a bit overwhelming (for instance, thoracic and cardiovas-

cular surgery, chronic pain management). The graphics are somewhat crisper, *vis-à-vis* Dr. Hill's, and are reflective of the skills of Tay McClellan, a professional medical illustrator. The book concludes with an encouraging chapter on the future of our field and some caveats to the reader: Do not place implicit trust in your physician; take an active role in your treatment; be a committed member of the medical team.

Both books would make refreshing additions to our patient education libraries, particularly in this age of more knowledgeable and

well-informed patients. I would recommend Dr. Hill's book to the casual reader and Dr. Cottrell's to the more erudite patron desiring a more in-depth experience.

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