bleeding are all dealt with in depth throughout the book. Special challenges such as patients with pacemakers, epilepsy, bipolar disorders, obesity, thyroid disease, and bleeding disorders are each considered separately.

This book explains the pathophysiology and pharmacology underlying perioperative cardiovascular, respiratory, and renal problems, which makes it also suitable for trainee anaesthetists and surgeons. For instance, the Henderson–Hasselbalch equation is explained in detail, as is gas transfer in the lungs. The latest edition has a new section on risk management, administration, and quality control; updated sections on anaesthetic practice and infection prevention; and it briefly incorporates recent developments in the postoperative care of children, pregnant patients, and cardiac patients.

The authors have interspersed the text with useful information boxes, for example, 10 steps in extubation. Attractive tables and illustrations highlight classifications of, for instance, chronic kidney disease or scoring systems for the behavioural assessment of pain such as CALMS (comfort, activity, looks, moves, speaks). Aphorisms are repeated throughout the book to reinforce important information and refresh the reader’s memory, for example, CARER, PQRST, and HELP, which are useful memorizing aids. Jargon and technical words are italicized and explained later in either the Appendices, Glossary, Abbreviations, or Useful Data section at the end of the book. Surprisingly, there is no algorithm for basic cardiopulmonary resuscitation; it is only described in the text.

The inclusion of physiology and pharmacology in this text transforms it from a recovery room aid to a reference book. However, this could make it more difficult to find relevant information rapidly in an emergency. Some of the practices mentioned in the book such as extubation of the trachea in the post-anaesthesia care unit (PACU), differ from standard practice in the UK, and positioning all patients in the same recovery position may not be relevant to all hospitals. Also, with the increasing number of day care procedures being carried out worldwide, more detail on the discharge criteria for these patients would be helpful.

In summary, this book covers all aspects of recovery room management and explains the relevant physiology and pharmacology for the better understanding of specific problems. The style and language is easy and consistent, as all the chapters are written by two experienced authors. It provides a breadth of information for beginners and helps experienced healthcare personnel to manage day-to-day problems in PACU, and to occasionally make difficult decisions. I would recommend it as a reference text for recovery rooms.

This addition to the Core Topics series is edited and written by authors from the UK, and predominantly from a single department. Previous publications from the UK have had a strange affinity with red rubber tubes, and an aversion to fibreoptic bronchoscopy in thoracic anaesthesia. I was therefore pleasantly surprised to see the authors have avoided a parochial approach and this book reflects accepted international practice in many of the contentious areas of thoracic anaesthesia.

The chapters comprehensively cover all areas of thoracic anaesthesia, including more specialized areas such as lung transplantation and pulmonary endarterectomy. They are laid out in a reasonably logical sequence. However, there are probably too many, causing a degree of repetition. There seems little need for a specific chapter on either ECMO or the morbidly obese patient, which are fairly generic subjects. However, all the key areas are covered, including the use of left-sided double-lumen tubes wherever possible and the endorsement of fibreoptic bronchoscopy for tube placement.

Some chapters are inevitably better than others. The management of one-lung ventilation is well covered, with acceptance of permissive hypercapnoea if necessary to protect the dependent lung. The chapter on postoperative analgesia is fairly light. Patients presenting for thoracic surgery increasingly have had coronary stents and are receiving dual anti-platelet therapy. Some guidance on the use of thoracic epidurals in this context would have been useful for the trainee. The chapter on lung resection does not mention post-pneumonectomy pulmonary oedema, but this is covered in other chapters on fluid management and postoperative management. The chapters have a ‘Further reading’ list rather than the standard reference system. This can be a little frustrating when looking for source information. However, this may be predicated by the format of the core topic series rather than by author choice.

This is the best book on thoracic anaesthesia I have seen from the UK. The book is probably a little light on detail for the established consultant. However, it is aimed primarily at the trainee and it would fulfil their requirements admirably. I congratulate the authors on successfully filling this niche—and it is good value.

A. Srivastava
Liverpool, UK
E-mail: alok.srivastava@nhs.net
doi:10.1093/bja/aep182


This addition to the Core Topics series is edited and written by authors from the UK, and predominantly from a single department. Previous publications from the UK have had a strange affinity with red rubber tubes, and an aversion to fibreoptic bronchoscopy in thoracic anaesthesia. I was therefore pleasantly surprised to see the authors have avoided a parochial approach and this book reflects accepted international practice in many of the contentious areas of thoracic anaesthesia.

The chapters comprehensively cover all areas of thoracic anaesthesia, including more specialized areas such as lung transplantation and pulmonary endarterectomy. They are laid out in a reasonably logical sequence. However, there are probably too many, causing a degree of repetition. There seems little need for a specific chapter on either ECMO or the morbidly obese patient, which are fairly generic subjects. However, all the key areas are covered, including the use of left-sided double-lumen tubes wherever possible and the endorsement of fibreoptic bronchoscopy for tube placement.

Some chapters are inevitably better than others. The management of one-lung ventilation is well covered, with acceptance of permissive hypercapnoea if necessary to protect the dependent lung. The chapter on postoperative analgesia is fairly light. Patients presenting for thoracic surgery increasingly have had coronary stents and are receiving dual anti-platelet therapy. Some guidance on the use of thoracic epidurals in this context would have been useful for the trainee. The chapter on lung resection does not mention post-pneumonectomy pulmonary oedema, but this is covered in other chapters on fluid management and postoperative management. The chapters have a ‘Further reading’ list rather than the standard reference system. This can be a little frustrating when looking for source information. However, this may be predicated by the format of the core topic series rather than by author choice.

This is the best book on thoracic anaesthesia I have seen from the UK. The book is probably a little light on detail for the established consultant. However, it is aimed primarily at the trainee and it would fulfil their requirements admirably. I congratulate the authors on successfully filling this niche—and it is good value.

G. N. Russell
Liverpool, UK
E-mail: glennrussell@doctors.org.uk
doi:10.1093/bja/aep183