Regarding management of acute pain, I feel this chapter could have been broadened to include other regional anaesthetic options such as upper limb blocks or the local infiltration techniques which are being increasingly used, whilst in the discussion of intrathecal morphine, for example, there needs to be a more specific approach to dosage and monitoring if the book is to present itself as a practical guide. Similarly, in the chapter on regional anaesthesia for joint replacement, the specific benefits of regional anaesthesia are sidetracked into the regions of thoracotomy and upper gastrointestinal surgery rather than specifically orthopaedic surgery and again, little discussion of local infiltration techniques and their use with or without accompanying nerve block. I am also surprised that enhanced recovery regimes and their applicability or limitations in this patient group, are not mentioned. Other specialist surgical areas include spinal surgery, G.U. surgery, electroconvulsive therapy, ophthalmic surgery (including the management of diabetes) and a particularly useful chapter on the management of the patient with hip fracture. This emphasizes the importance of a coordinated multidisciplinary approach to patient selection, timing, and optimization in order to achieve good functional outcomes, and also attempting to reduce the high perioperative mortality. The final chapters examine the areas of polypharmacy, a useful practical guide around medicines to avoid and discussions of dementia and associated neurological syndromes. The book ends with an excellent chapter, dealing with many of the complex issues of psychiatric disease and psychotropic medication in the older patient and a description of the indications and choices of medication; the chapter also examines the issues of anxiety, insomnia, and depression and factors influencing treatment options and ongoing management.

It, therefore, follows that there can be few anaesthetists that would not benefit from absorbing the information presented within this text. With a multiple authorship, based largely in the northeastern USA, it is inevitable that there is considerable overlap in some areas, particularly between the general chapters and the more specific surgery related ones, this is not however necessarily a bad thing as a number of the later chapters can be read in isolation, but is there really any need to have five authors compiling a short chapter on regional anaesthesia for joint replacement?

In summary, a good attempt to present a practical overview to the perioperative management of our aging population which I would recommend to a general, broad anaesthetic readership. There is still time to improve the perioperative management before we all inevitably join them.

**Declaration of interest**

None declared.

D. M. Coventry
Dundee, UK
E-mail: david.coventry@nhs.net
doi:10.1093/bja/aet190

This book is a new addition to the Oxford specialist handbook series in anaesthesia, which has some useful features (e.g. coloured page edges that correspond to the colour-coding of the chapters in the contents list). It is edited by recognized experts in the field. There are ~400 pages containing 16 chapters and subsections written by different authors but it is a slim book, which would easily fit in a pocket.

The chapters are well organized with clearly laid out sections. The book starts with some general considerations followed by emergency anaesthesia for all specialties (including paediatrics and cardiac surgery) in a logical and systematic manner. The book concludes with a chapter on the management of anaesthetic emergencies. Each chapter starts with a text box of key points and ends with selected references. The key points are most useful (e.g. those for the management of a patient with a fractured neck of femur clearly convey the high-risk nature with poor outcomes and the importance of early surgery); the priorities for anaesthetic management are clearly delineated. In some sections, such as the management of traumatic brain injury the authors try to explain the relevant physiology to support the rationale for the clinical management. In general, the book provides rapid access to useful knowledge based on contemporary literature. The frequent use of non-standard abbreviations does, however, detract from the readability of the text.

We were not sure who this book is aimed at. Coverage is too superficial for an exam text although it would make a portable revision aid. It would also be a good source of information for consultants who cover, when on-call, specialties that are not part of their regular practice. However, there are other books in the series which provide information for specialist areas such as paediatrics, cardiac, and thoracic anaesthesia. There is also overlap with the *Oxford Handbook of Anaesthesia*; indeed the chapters on thoracic injury in the two books bear a remarkable resemblance to each other. While a short chapter on pre-hospital care may provide a brief insight into this area, its usefulness in this book is perhaps limited. The authors claim that the book covers many items across all three levels of the Royal College of Anaesthetists’ continuing professional development (CPD) matrix but how this could be used for collecting evidence of CPD for the purpose of revalidation was not clarified.

As with most books there are some omissions and we noticed that the management of amniotic fluid embolism was not included, while the preoperative assessment section omitted eliciting a family history for possible adverse reaction to anaesthetics. The chapter covering limb re-implantation surgery did not consider regional anaesthesia catheter techniques. Description of any one technique of awake fibre-optic intubation could provide a readily accessible reference when on call out of hours. Local
anaesthetic toxicity might have been better included under anaesthetic emergencies.

In summary, this book is a good companion for an on-call anaesthetist but colleagues may find that other texts are more suited to their own practice. There is indeed a wide range of anaesthesia and intensive care handbooks that provide a lot of overlapping information for emergency care. It may be possible to carry more than one handbook in ‘app’ form if they become available in portable digital format: on the other hand, availability of substantive texts on hand-held electronic devices may mark the end for the handbook!

A. Vats
P. M. Hopkins*
Leeds, UK
*E-mail: p.m.hopkins@leeds.ac.uk
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