David O. Warner, M.D., Editor

Principles of Airway Management, Third Edition. By Brendan T. Finucane, M.D., and Albert H. Santora, M.D. New York, Springer-Verlag, 2003. Pages: 503. Price: $59.95.

Effective airway management is essential for safe administration of anesthesia and successful resuscitation of cardiac arrest patients. A new interest in the safety of airway management has emerged in the past 15 yr, signified by the introduction of new airway devices, the emergence of guidelines for managing the difficult airway, the large number of publications on the subject, and the formation of the Society for Airway Management. These strides are unmatched in any other period of 15 yr since the birth of general anesthesia in 1846. The introduction of the *LMA-Classic™* in 1988, followed by the *LMA-Fastrach™* and the *LMA-ProSeal™* (The Laryngeal Mask Company (UK) Limited, Bucks, United Kingdom), has generated more than 2000 publications alone.

The third edition of *Principles of Airway Management* is a timely publication reflecting the changes and improvements in airway management. In this new edition, Drs. Finucane and Santora present 13 chapters of clinically useful, technically oriented information. With the exception of Chapter 1, "Airway Anatomy," all of the chapters are extensively revised and expanded. The high quality of the drawings and pictures from the second edition is preserved, and many new ones are added. The third edition is expanded, with 160 more pages than the second edition.

Several chapters are worthy of special mention. A well-deserved new chapter is devoted to laryngeal mask airways. The new chapter discusses the various applications of laryngeal mask airways in airway management, their role in management of a difficult airway, and their application in specific procedures such as fiberoptic bronchoscopy during general anesthesia. I was also impressed with the chapter discussing airway evaluation. Considering space limitations, there is thorough consideration of tests thought to predict difficult direct laryngoscopy, including the significant limitations of all these techniques. The chapter addressing the difficult airway benefits from the consideration of both difficult mask ventilation and difficult intubation. Appreciation of both is critical because each presents a different scenario and requires a different route in the difficult airway algorithm of the American Society of Anesthesiologists' Practice Guidelines for Management of the Difficult Airway. Failure of both facemask ventilation and tracheal intubation presents an extremely dangerous situation, calling for good judgment, correct selection, and skillful application of the method to avoid brain damage or death. This chapter is also enhanced by a supplemental nine-page appendix that summarizes syndromes associated with a difficult airway. Another highlight includes the chapter dealing with fiberoptic intubation, specific techniques for intubation, and preparation of a patient for awake intubation. Several tables and drawings add to the value and clarity of this chapter.

One criticism I have of this text is the arrangement of some of the materials. The chapter entitled "Fiberoptic Airway Management Techniques" would be better positioned after the chapter describing "The Difficult Airway." The discussion of the complications of tracheal intubation would more logically follow the chapter describing techniques of tracheal intubation. The *LMA-Classic™* and *LMA-ProSeal™* should be presented early in the chapters describing basic airway management and basic airway management equipment, reflecting their fundamental importance in current practice. The *LMA-Fastrach™* and flexible bronchoscope should also be briefly mentioned in the intubation chapter, because their use is now routine in intubation techniques and must be mastered in nonemergency situations. The longest chapter, "Surgical Approach to Airway Management," includes transtracheal jet ventilation and retrograde intubation, which do not seem to belong in this chapter.

One of the unique strengths of this text is the emphasis on teaching of airway skills, especially that of rigid and fiberoptic intubation. Airway-related deaths, hypoxic brain damage, unnecessary tracheostomies, other major complications, and thousands of case cancellations after failed intubation each year are unacceptably high. We need better and more serious training of individuals engaged in airway management, and this text represents an important contribution to this effort.

In summary, the authors should be commended for their contribution to the understanding of the basics and the importance of airway management. This text is well written and richly illustrated, with numerous excellent references. Reading this book is strongly recommended for all those engaged in airway management, from medical students to experienced practitioners. It offers practical clinical information that is critical for safe airway management and should be a readily available reference in all acute care settings.

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Barrell of Lunatics: Places Associated with the First Public Demonstration of Ether Anesthesia. By David C. Lai, M.D. Park Ridge, Illinois, Wood Library-Museum of Anesthesiology, 2003. Pages: 30. Price: $20.00.

No event in the history of anesthesia is of greater importance than the discovery and first use of diethyl ether for anesthesia. Although opiates and plant derivatives have been used as analgesics for thousands of years, the first truly effective anesthetic agent, ether, was put to surgical use in the Northeastern United States in October 1846. In 1972, the Wood Library-Museum of Anesthesiology (Park Ridge, Illinois) published *An Historical Guide to New England Pertaining to the Discovery of Anesthesia* to recognize the historic landmarks and activities of key figures associated with the first demonstration of ether anesthesia. This guide, complete with walking and driving directions to relevant New England landmarks, was published primarily as a tour guide for attendees of the annual meeting of the American Society of Anesthesiologists held in Boston that year. The guide was then republished in 1996 to mark the 150th anniversary of William T. G. Morton's first public demonstration at the Massachusetts General Hospital (Boston, Massachusetts).

Now, a third pamphlet, *Barrell of Lunatics: Places Associated with the First Public Demonstration of Ether Anesthesia* by David Lai, M.D. (Department of Anesthesia and Critical Care, Beth Israel Deaconess Medical Center, Harvard Medical School, Boston, Massachusetts), introduces a complementary and additional perspective to its two predecessors. This companion explores the shared history of anesthesia, surgery, and psychiatry, revealed through an interesting collection of photographs, poems, illustrations, and watercolors of key historical sites in New England. The title, *Barrell of Lunatics*, derives from the Joseph Barrell House (Somerville, Massachusetts), which later became the McLean Asylum and home of Dr. Charles T. Jackson after his failed claims to gain credit for the discovery supposedly drove him insane. The historic connection featured in this new work is the influence of Charles Bulfinch (American architect, 1763–1844), designer of not only the Joseph Barrell House but also the Massachusetts General Hospital, which included the famous "ether dome" where surgeon John Collins Warren (1778–1856) completed the first surgery with inhalational anesthesia. Of interest, Dr. Leroy D. Vandam (Professor of Anesthesia Emeritus, Harvard Medical School, Boston, Massachusetts), a central contributor to the original historic guide published in 1972,

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has painted the watercolors of William T. G. Morton's homes included in this new work.

In addition to the architectural montage of William T. G. Morton's professional and personal dwellings, Lai includes a series of fascinating photographs and epitaphs from the Mt. Auburn Cemetery, where several monuments commemorate Morton. Epitaphs such as "BEFORE WHOM in all time Surgery was Agony" and "SINCE WHOM Science has Control of Pain" lend cultural commentary on Morton's contribution to medicine.

Although *Barrell of Lunatics* draws on a thematically related collection of photos, facts, and verse, it lacks a clear historical sketch of the first demonstration of ether and will be most appreciated by those already intimately familiar with the events, primarily historians and serious students of anesthesia's past. Nevertheless, this work successfully underscores the impact anesthesia has made on the practice of medicine and is a portal to a unique component of New England's architectural and medical history.

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