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Obstetric Anesthesia: Principles and Practice, 3rd Edition. By David H. Chestnut, M.D., Ph.D. Philadelphia, Elsevier Mosby, 2004. Pages: 1,096. Price: \$165.00.

Obstetric anesthesia has been recognized as a subspecialty for a relatively brief period of time, but its importance has steadily increased in recent years. In most Western countries, the majority of laboring women are cared for by a multidisciplinary team, which involves an anesthesiologist as the professional able to provide both adequate pain relief and efficient treatment of emergent conditions. From its first edition, the textbook *Obstetric Anesthesia*, edited by David H. Chestnut, has been one of the preferred references in the field. A new edition has been released every 5 yr, allowing practitioners to get timely information. All chapters have been thoroughly reviewed and updated, including references published as recently as 2004. This third edition is less heavy than the preceding one but contains more information. This has been made possible through editorial and presentation changes.

The book is divided into 10 parts and 53 chapters. For an encyclopedic textbook, it is surprisingly easy to use. Each chapter begins with a description of its contents, allowing the reader to rapidly know whether he or she will find what he or she is looking for. Each chapter ends with a gray box reminding the reader of the main information to "take home." Several chapters may seem difficult to read at first glance because of the enormous amount of information contained. However, the paragraphs are short and well separated, and the writing style is clear. All of these editorial considerations make the book easy to read overall.

The first chapters, which are very well illustrated, are a reappraisal of maternal, fetal, and placental physiology. They also provide an overview of labor physiology and obstetric techniques, anatomy of the pregnant woman, and techniques used for regional anesthesia.

The next part of the book is dedicated to fetal complications and care of the newborn. As might be expected, a major part of the book details techniques used for anesthesia and analgesia in pregnant women. One chapter describes anesthetic techniques that are to be used in pregnant patients undergoing nonobstetric surgery, a chapter that nonobstetric anesthesiologists will find invaluable. Each chapter provides adequate and detailed information on pharmacologic and pharmacokinetic aspects of the drugs used, with special consideration to changes related to pregnancy. Despite the generous amount of information contained in these chapters, a few of the ideas presented are debatable. For example, the "prophedrine" position defended in the chapter related to spinal anesthesia for cesarean delivery does not reflect the current practice of many.

The largest section of the text describes symptoms and management of obstetric complications as well as considerations regarding patients presenting with a medical history unrelated to pregnancy that might be influenced by pregnancy. The need for better understanding the relations between pregnancy and preexisting medical conditions is highlighted by the increased number of women who now present with conditions that formerly were thought to be incompatible with pregnancy. Although incomplete (because it is impossible to describe all interactions), the chapters well describe a large number of these diseases. Regarding some controversial conditions, the editor (David H. Chestnut) has added in the text some personal notes based on his own experience. Of note, one chapter describes medicolegal features of anesthesiology and will be useful for most readers, given the litigious climate in which we currently live.

In summary, the third edition of *Obstetric Anesthesia* is no doubt the most complete and up-to-date textbook in the field. One should take the time to read each chapter. It is recommended not only to nonobstetric anesthesiologists who will find in a single book all the

necessary recent information, but also to subspecialty experts, who can find additional information they probably had missed in some areas. This third edition should be found in every anesthesia department library.

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Anatomy for Anaesthetists, 8th Edition. By Harold Ellis, C.B.E., M.A., D.M., F.R.C.S., F.A.C.S. (Hon.), Stanley Feldman, B.Sc., M.B., F.R.C.A., William Harrop-Griffiths, M.A., M.B., B.S., F.R.C.A., Andrew Lawson, F.F.A.R.C.S.I., F.A.N.Z.C.A., F.R.C.A., M.Sc. Williston, VT, Blackwell Publishing, 2004. Pages: 358. Price: \$137.00.

The first edition of this book was published 41 yr ago. Such longevity speaks well for the contributions it has made to the specialty of anesthesiology and indicates that the seven previous editions have been revised carefully and thoughtfully, or else the book would not now still be in use. With each revision, most books tend to grow in length as new information is added. Deciding what to delete is not easy. This edition is 18 pages shorter than the previous one but has 14 more figures than the fifth edition. It also has a new 11-page, four-figure concise chapter on anatomy of pain written by Andrew Lawson, F.F.A.R.C.S.I., F.A.N.Z.C.A., F.R.C.A., M.Sc. (Consultant in Anesthesia and Pain Management, Royal Berkshire Hospital, Reading, United Kingdom). No doubt this reflects the care and thoughtfulness with which the revision has been done. The new chapter is an important addition in that pain management is an area that has undergone substantial expansion in knowledge since the previous revision was done.

Importantly, the illustrations, almost all of which were newly drawn or redrafted for the sixth edition, have been further revised for the current edition. This process has resulted in high-quality black-and-white line drawings with all nerves shown in bright yellow, as is traditionally done in gross anatomy books. Figure 140 is an exception to the typical high-quality figures in this revised book. It indicates surface landmarks that can be used to define the course of the sciatic nerve in the buttocks and upper thigh. It suggests that a line be drawn between the posterior superior iliac spine and the greater trochanter of the femur. From the midpoint of this line, a perpendicular line is drawn, and a point 4–5 cm down this line is said to lie over the sciatic nerve. What is different about the figure is that it shows the line terminating on the greater trochanter just above the shaft of the femur rather than on the highest point. This new location of termination is at variance with most other reports. A trip by this reviewer to the gross anatomy laboratory indicated that this small change in the termination of the posterior superior iliac spine to greater trochanter line moved the point of insertion of the needle away from the location of the sciatic nerve.

This new edition, like previous ones, is not organized by chapters, but rather by parts (eight in all). These units perhaps more closely fit a system of regional organization of the body but typically include only those parts of the body or system that have special significance to the practice of anesthesiology.

Finally, what is the purpose of this book, and who will it serve? In the Introduction, the authors indicate that the book is not intended to be a textbook for regional anesthetic techniques. Rather, it is an anatomy book written for anesthetists, keeping in mind the special

requirements of their daily practice, one of which is a shortage of time. I find the book an excellent match for that goal. The book is organized to present anatomy that is of specific interest and needed for the practice of anesthesiology. Its organization and indexing allow a busy practitioner to quickly review areas of interest. The breadth and depth of the material covered and its concise presentation will allow the

book to be a useful resource to those preparing for certification examinations in the specialty as well as for the difficult case coming to surgery in an hour.

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