

Mark A. Warner, M.D., Editor

**Atlas of Common Pain Syndromes, 2nd Edition.** By Steven D. Waldman, M.D., J.D. Philadelphia, Saunders (Elsevier), 2008. Pages: 384. Price: \$119.00.

This is a great book! It is an expanded, new edition of a well-received atlas of pain syndromes. The book is organized into 16 sections by anatomy, beginning with the head and ending with the foot. Each section has multiple chapters dedicated to different pain syndromes. The chapters are subdivided into sections that give a description of the syndrome, signs and symptoms, testing, differential diagnosis, treatment, and complications and pitfalls. The last item of each chapter is a short, highlighted section on clinical pearls. Even the *International Classification of Diseases*, 9th Revision, code is provided for each diagnosis. The book is liberally illustrated with high-quality color drawings that demonstrate important clinical features and anatomy. There are also large numbers of high-resolution radiographs and magnetic resonance images. An accompanying CD-ROM provides all the illustrations in a file format suitable for downloading to PowerPoint (Microsoft Corporation, Redmond, WA).

The author's preface clearly states that the focus of the book is on diagnosis of pain syndromes. I must commend Dr. Waldman for providing superb information on the diagnosis of each pain syndrome and emphasizing the importance of diagnostic accuracy. Treatment is not ignored, however, and each syndrome has a concise discussion of appropriate medical, interventional, and surgical therapies.

What educational niche does this book fill? This is a wonderful book for those of us who are not pain specialists and require up-to-date information regarding chronic pain management. I learned a great deal from this book, and I am glad to have it in my personal library. It is now my initial pain reference textbook. Residents beginning their study of chronic pain management will find this book very helpful. The book also provides a very organized structure for board preparation. Pain management specialists will find this book to be a valuable quick reference for infrequently encountered pain syndromes. Interestingly, there are no references in the book. The pain specialist seeking an in-depth analysis of different treatment modalities may find the lack of references a disappointment. The rich supply of images on the CD-ROM provides educators with a ready source of didactic material.

Dr. Waldman's writing style is crisp and concise, and the information is organized in a logical sequence. I recommend this book to any anesthesiologist who desires to expand his or her knowledge of chronic pain syndromes.

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### **Perioperative Diagnostic and Interventional Ultrasound.**

Edited by Dominic Harmon, M.B., M.Sc., M.D., F.C.A.R.C.S.I., Henry P. Frizelle, M.B., M.D., F.F.A.R.C.S.I., NavParkash S. Sandhu, M.D., Frances Colreavy, M.B., F.F.A.R.C.S.I., and Michael Griffin, M.B., B.Sc., M.D., F.F.A.R.C.S.I. Philadelphia, Saunders Elsevier, 2008. Pages: 212. Price: \$149.00.

Ultrasound technology is becoming more common in anesthesia practice. Transesophageal echocardiography in cardiac surgery and ultrasound-guided regional anesthesia are two of the more common uses of ultrasound technology in our practice today. Most textbooks on ultrasound use in anesthesia practice are limited to transesophageal echocardiography. *Perioperative Diagnostic and Interventional Ultrasound* comprehensively illustrates the wide uses of ultrasound technology in our specialty.

Structurally, the book is well organized. It essentially covers all aspects of ultrasound technology as it applies to the practice of anesthesiology. There are four main sections to the book. It begins with the basic physical principles of ultrasound that are important to the anesthesiologist. Subsequent sections discuss the use of ultrasound for vascular access, ultrasound in the perioperative and critical care setting, and finally ultrasound use in regional anesthesia.

The section on vascular access is sound. It addresses central venous access as well as arterial cannulation and difficult peripheral venous access. It introduces the reader to novel techniques in vascular access not possible without ultrasound, e.g., transpectoral axillary vein cannulation for central venous access and mid-forearm radial artery cannulation.

Ultrasound-guided regional anesthesia is by far the largest section of the book. For each ultrasound-guided nerve block, there is a brief introduction addressing its indications, followed by ultrasound anatomy and block technique. The authors discuss the current evidence supporting the use of ultrasound for each block. They also provide a small but comprehensive bibliography allowing readers to expand their knowledge.

The text is accompanied by a DVD that contains more than 150 video clips. Useful aspects of the DVD include demonstrations of vascular cannulation and nerve block techniques. The authors attempt to provide practical aspects of performing ultrasound-guided techniques. However, both the DVD and the text lack emphasis on how to obtain optimal ultrasound images. Those who routinely use ultrasound for peripheral nerve blocks know that simply placing the probe on a body surface is not enough to obtain an optimal image. Pressure, rotation, alignment, and tilting of the probe are frequently used to provide optimal images. These maneuvers allow the ultrasound beam to contact the desired structures in a manner that minimizes scatter. Frequently, small maneuvers such as tilting the transducer in one direction *versus* another converts a poor image into a great one and *vice versa*. Readers would be well served by commentary on this issue. As an example, the description of the ultrasound-guided infraclavicular nerve block does not provide a close-up illustration depicting the orientation of the transducer in the infraclavicular region, nor does it provide direction of the next move if the operator does not acquire the desired image.

A strength of this text lies in the breadth of illustrations covering ultrasound equipment, patient positioning, and the abundance of ultrasound images. There is, however, a paucity of human gross anatomy. The ultrasound images, although adequate, are not high quality. In addition, most of the patients in the illustrations are covered with blue drapes from head to toe. This hinders appreciation of the orientation of the ultrasound transducer relative to the patient. For example, in the ultrasound-guided femoral nerve block, it is unclear how the transducer is oriented in the groin.

One can obviously not provide detailed information on such a vast area of ultrasound practice in anesthesiology in 212 pages. Major textbooks have been written in transesophageal and transthoracic echocardiography. Therefore, a weakness of the text lies in its strength. By covering all aspects of ultrasound technology in anesthesia practice, it lacks depth. The sections on ultrasound physics are brief, lack examples, and are difficult for the novice to grasp.

The authors have succeeded in covering most of the common uses of ultrasound in clinical anesthesia practice. They have provided one of the first texts to comprehensively illustrate the wide number of peripheral nerve blocks that can be performed using ultrasound. Despite some of the limitations of the text, given the expanding uses of ultrasound in our practice, *Perioperative Diagnostic and Interventional Ultrasound* is a textbook that has been overdue.

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