

Michael J. Avram, Ph.D., Editor

Handbook of Neuroanesthesia, Fifth Edition.
Edited by Philippa Newfield, James E. Cottrell.
Philadelphia, Lippincott Williams & Wilkins, 2012.
Pages: 480. Price: \$60.84.

A “handbook” in medicine is almost like the “middle child” in a family: never taken too seriously but still expected to abide by the rules, never gets the spotlight but still ends up being the most successful and useful of the bunch, always by your side at times of crisis but does not get the respect it truly deserves. The fifth edition of *Handbook of Neuroanesthesia*, edited by Newfield and Cottrell, almost fits that bill. This book is a perfect example of what you can do right with a difficult and super-specialized subject, limited available real estate, and economy on your mind. I am not an author by any stretch of the imagination, but I can almost feel the pain of the authors while they were planning, editing, and executing this book: what to include and what to leave out!

This book is structured like a typical handbook in medicine. Smaller in dimensions than a regular textbook, it has 28 chapters and approximately 500 pages. The chapters are neatly divided into logical sections dealing with general considerations, anesthetic management, and postanesthesia and intensive care. The section on general considerations deals with basic topics, such as physiology, metabolism, effects of anesthesia, improving neurologic recovery from cerebral ischemia, and pain management in neurosurgical patients. There is also a nicely written chapter by a neurosurgeon on the team approach to patient management and the importance of interdisciplinary communication. The second section deals with wide-ranging topics on modern neuroanesthetic management, including head trauma, tumors, aneurysms, strokes, pediatric cases, awake craniotomies, interventional neuroradiological diagnostic and therapeutic procedures, pregnant patients with neurosurgical conditions, positron emission tomography scan, deep brain stimulators, gamma knife, and stereotactic procedures, and many more. The third section has chapters dedicated to traditional postoperative and intensive care topics such as systemic supportive care, fluids and electrolytes, nutrition, and brain death. At the end, there are two additional chapters under the appendices section dedicated to accessing and exchanging information technology and American Society of Anesthesiologists practice guidelines on preventing postoperative visual loss and neuropathies.

A unique feature of this book is that all the chapters have an illustrative clinical case description highlighting the relevant clinical points right at the beginning. This is followed by chapter highlights in all (and a summary in

many) of the chapters. This early summary really helps to keep focus on the intended topic from the beginning and makes for an easy review later. At the end of every chapter, there is a list of suggested readings. Interestingly enough, many of the chapters actually have a list of suggested Internet references as well, which is sure to satisfy many of us who are hungry for more!

The contents of the chapters are logical, up to date, practical, informative, and very easy to read. The authors have taken a comprehensive approach to clinical information presentation and managed to include a wide range of relevant multidisciplinary scientific information about a particular topic without losing sight of the overall goal of perioperative patient care. Almost every topic has not only discussion of perioperative issues and concerns, such as monitoring, medications, induction and maintenance, outcome, and many more but also useful information on pathophysiology, anatomy, pharmacology, diagnostic modalities, treatment and management options, and outcome and preventative data. All of this makes for a very satisfying read and makes this book feel really comprehensive yet convenient, a rare combination indeed. There is also a treasure trove of useful tables in the book, and several easy-to-understand diagrams and figures have been thrown in for good measure. In keeping up with the times, the authors have paid special attention to issues such as interdisciplinary teamwork, communication, and information technology. The chapter on online medical resources and search modalities available for clinical scientists made for an interesting read.

Any shortcomings in this book? Nah!! In my humble opinion, considering the target audience and the set objectives of this text, the authors have achieved in this book what many authors hope to achieve and what most prospective authors should aspire to achieve....simplicity, balance, and objectivity. One could nitpick about lack of glossy pages and a paucity of color plates, but in today's day and age, keeping overhead costs low is a key ingredient to success. Color, especially if zealously overdone, can be a distraction in scientific texts. Does the small print bother me? Not yet, but my days are probably numbered and hey, remember this is a handbook. Neuroanesthesiology was probably never a superstar subspecialty, but if this wonderful handbook manages to make a few converts and motivate a few uninitiated to pursue the specialty, that would be its biggest achievement. This book has that capability and then some.

Indranil Chakraborty, M.B.B.S., M.D., D.N.B., C.M.Q.,
University of Arkansas for Medical Sciences, Little Rock,
Arkansas. chakrabortyindranil@uams.edu

Copyright © 2013, the American Society of Anesthesiologists, Inc. Lippincott Williams & Wilkins. Anesthesiology 2014; 120:248

(Accepted for publication September 13, 2013.)