

Waking Up Safer? An Anesthesiologist's Record

By Berend Mets, M.B., C.H.B. Bristol, SilverWood Books, 2018. Pages: 267. Price: \$14.99.

This author travelogue through modern anesthesia describes the arduous training of anesthesiologists and some momentous events in the development of the specialty, both of which have led to the sophistication of current practices and promises of an even safer future. The book contains historic vignettes, biopic stories, and science commentaries. Reading it is educational and entertaining.

The author is an accomplished anesthesiologist, who trained in both South Africa and the United Kingdom and who currently serves as the Anesthesiology Department Chairman at Pennsylvania State University. His observations on the specialty and his personal reflections provide an international perspective that will particularly interest U.S. anesthesiologists. Passages on anesthesia care in the 1980s at Groote Schuur Hospital in Cape Town, South Africa, and a lengthy report on the first heart transplant by Christian Barnard there in 1967 will fascinate most readers. Dr. Mets moves back and forth between anesthesia and anaesthesia, resident and registrar, operating rooms and theaters, and other parallels of the U.S. and international healthcare systems that he intimately understands.

Themes of this book include the steady progression of anesthesia safety over two centuries, the personality quirks of many surgery and anesthesia innovators, and important lessons that clinicians can learn from anesthesia mishaps. Numerous case descriptions prove interesting and elucidating. Practicing anesthesiologists will recognize similar occurrences in their own careers.

Dr. Mets summarizes his philosophy as, “Inherently dangerous, anesthesia has matured into an essentially safe practice. It was not always so. Nor in every instance—things can still go terribly wrong.” His stories explain and support this view.

Anesthesiologists will applaud many dramatic and positive statements: “The balance between life and death . . . is the practicing anesthesiologist's daily concern.” “Anesthesiologists are the only true clinical pharmacologists in medical practice.” “We call delivering an anesthetic: flying the anesthesia machine.” The book portrays a dynamic specialty with skilled clinicians who protect patients during surgical operations.

A chapter on the history of anesthesia is easier to read than most introductory textbooks. A wide-ranging chapter on drugs, equipment, and monitors is linked together by the concepts of balanced anesthesia and the need for patient safety. The final chapters on a day

in a large academic surgical suite and future directions for anesthesiology are positive and in sync with the practices and thoughts of most specialty leaders. The author concludes: “The future of anesthesia lies in the developing field of perioperative medicine,” and “Expect a much safer surgical experience in the future.”

Overworked in this book, as in anesthesia literature generally, are the similarities of anesthesia administration and flying an airplane, and anesthesia safety and parachutes. Nonanesthesiologist readers may find them novel and helpful, while many anesthesiologists will roll their eyes and wish for fresher metaphors.

This book is a quick and recommended read for anesthesiologists. Many will jump among sections as they spot items of interest. Nonanesthesiologist readers with science backgrounds may prefer to read it from beginning to end, because chapters logically follow previous ones. Numerous footnotes and some technical terms may annoy readers without science backgrounds, the large group whom the author hopes to attract. These readers may skip pages, or put the book down entirely, when they read, “a packet of acetylcholine mediators is released into the synaptic cleft, and moves across to bind to a nicotinic acetylcholine receptor on the skeletal muscle fiber.” Although lay readers have choices among publications with either a history focus or anesthesiologist tales, this one stands out as broader and more entertaining.

The writing style is generally quick, unadorned, and easy to read. Sometimes it excites: “My training progressed by leaps and bounds, trial and error, complications occurring regularly.” A few subject–verb mismatches interrupt the flow, and errors catch the eye. For instance, the American Board of Anesthesiology defines “OSCE” as Objective Structured Clinical Examination, not Observed Standardized Clinical Evaluation as the book reports.

Readers who know the author will particularly enjoy the clever book cover, an adaptation of the painting “Ether Day 1846” hanging in the Ether Dome at the Massachusetts General Hospital, site of the first public demonstration of anesthesia. Those who do not know him can guess which person depicted represents the author. This cover art showing observers of an anesthesia milestone captures the essence of the book.

Waking Up Safer? An Anesthesiologist's Record meets the authors desire to do “the rich history of anesthesia justice” and to “wake you up to the magic and mystery

of anesthesia and its consequences.” The notation that it was “specifically written for the lay person to explain the much misunderstood practice of anesthesiology” will await marketplace judgment.

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