

# The Oxford Specialist Handbook of Global Anaesthesia

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The coronavirus disease 2019 (COVID-19) pandemic has taught us that the world is interconnected. From your Italian villa in Northern Italy you might have thought the events in Wuhan, China, in early January 2021 would not affect your life. Weeks later, your friends and perhaps family were facing life-or-death scenarios in your local hospital. You might have thought that you and your friends working in a meat processing plant had little to worry about when a virus swept through Northern Italy. A few months later, many would be dead. What happens anywhere in the world affects everyone in the world.

This applies to anesthesia as well. The rise in interconnectedness means that global anesthesia is more essential than ever. The sharing of medical knowledge and improvements in public health systems is essential for both the current practice and the future of health care. *The Oxford Specialist Handbook of Global Anaesthesia* brings together experts from around the world to create a quick reference guide for “best practice” anesthesia methods while abroad and at home.

This book is intended for anesthesiologists interested in practicing and teaching anesthesia in low- and middle-income countries. The book offers excellent practice guidance. For example, the authors provide guidance on topics as diverse as setting up for routine anesthesia and creating a drug formulary. Although much of the book focuses on the delivery of care, it does have a brief section on teaching anesthesia, ethics, and being a good visitor.

The book is organized thoughtfully into succinct topics: anesthesia set-up, perioperative care, postoperative care, and anesthesia subspecialties. It ends with a section on tropical medicine. Each chapter serves as a quick reference. The chapters are crisp and concise, with additional resources for further reading for those interested in more detail. The regional anesthesia section includes photos of what is seen on ultrasound when performing the most common blocks.

Chapters often include specific details that pertain to global diseases. For example, the pediatric chapter includes a description of typhoid perforation, something rarely seen

in highly developed countries. The obstetrical anesthesia section talks extensively about mitral stenosis, a complication of rheumatic heart disease. There is an entire chapter on infectious diseases common in low- and middle-income countries, which is good reading for anyone planning such a trip. The drug formulary in the appendix will likely prove to be an indispensable resource: There is no point asking for drugs that don't exist in the country where you are practicing.

It is rare to find such specific and useful information for providing anesthesia globally in one compact source. You can literally stash it in your pocket. The user should be familiar with the layout should one need to reference it in an emergency, such as a difficult airway. Some content is particularly deeply hidden in the book. An example is information about pediatric advanced life support, which is hidden in the appendices. The book is a great resource but should be read cover to cover before the planned trip.

Although much of the information in this book may be found online, in remote hospitals cell phones may not operate as intended and “online” may be as inaccessible in a low- and middle-income country as in a highly shielded U.S. operating room.

Overall, this book provides extensive details on how to practice anesthesia in a low- and middle-income country. The future of global anesthesia depends on equitable access to safe and effective perioperative care worldwide. If you are planning a trip to a low- and middle-income country to provide anesthesia care and training, and can only bring one book with you, this is the one to pick.

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