

yond the narrow limits of the pharmacology of his drugs and the cardio-pulmonary physiology which immediately bound his manipulations.

In this age of multiple authorship of textbooks, this volume stands as eloquent evidence of the advantages of single authorship—cohesive development of the subject, even style, concise summaries of essentials, and a clearness of expression obtainable only from a proud and talented author.

DUNCAN A. HOLADAY, M.D.

**Lehrbuch der Chirurgie.** By S. STICH, Professor of Surgery (Ret.) University of Göttingen, AND DR. K. H. BAUER, Professor of Surgery, University of Heidelberg. Pp. 934, with 670 illustrations. Cloth 78 DM (about \$20.00) Springer-Verlag, Berlin-Göttingen-Heidelberg, 1958.

This book, previous editions of which have served many generations of medical students in German-speaking universities, fulfills its purpose as a textbook. The author of the 43-page chapter on anesthesia is Dr. R. Frey, Associate Professor and Director of the Department of Anesthesiology at the University of Heidelberg. This chapter is quite complete and is adequate for the graduating medical student. It may also serve as a teaching guide for lecturing to personnel capable of understanding some German. The style is easy to read and understand. The author's statements are accurate. This book, like previous editions, will undoubtedly be the outstanding textbook of surgery in many German universities.

FRANZ SCHUBERT, M.D.

**Narkose-Fibel. Primer of Anesthesia.** By DR. H. J. THUM (Bochum). Paper DM 13.50 (\$3.20). Pp. 103, with 10 illustrations. Georg Thieme Verlag, Stuttgart, 1958.

The author is the anesthetist in charge of the surgical clinic of the German Workers Health Insurance System. This monograph is an outline of anesthesiology intended primarily for the part-time anesthesiologist and those training for the specialty. Simplicity of presentation and practical applicability have been emphasized throughout. After a brief introduc-

tion, the various forms of anesthesia are discussed in individual chapters. While a separate chapter deals with the use of ataractic drugs in "potentiated anesthesia," regional, epidural or subarachnoid blocks are hardly mentioned. Subsequent chapters deal with the stages of anesthesia; respiratory and circulatory physiology related to anesthesia; preparation of the patient for anesthesia; pharmacology of anesthetic agents and other drugs used in anesthesiology; the management of shock; the influence of pathological changes of the various organs on the choice and management of anesthesia; anesthesia for brain, thoracic, abdominal, traumatic, gynecological, oral, ear, nose and throat, ophthalmological surgery and obstetrics. Pediatric and geriatric anesthesia, as well as the anesthetic management of various diagnostic procedures, are also discussed in separate sections. For the American anesthesiologist, this little book gives an interesting insight into what are considered to be the most important aspects of modern anesthesiology by one of its outstanding German representatives. Drugs are not mentioned by their generic names, but by their proprietary names, which are meaningless to the American reader.

FRANCIS F. FOLDES, M.D.

**Introduction to the Interpretation of the Electrocardiogram.** By LOUIS N. KATZ, A.M., M.D., RICHARD LANGENDORF, M.D., AND ALFRED PICK, M.D. Paper \$2.50. Pp. 78, with 61 plates and 6 figures. The University of Chicago Press, Chicago 37, Ill., 1952.

A knowledge of certain subjects, intimately concerned with a patient's condition, before, during and after anesthesia, is vital to any consultant in anesthesiology. One of these subjects is electrocardiography. It is unreasonable to expect the anesthesiologist's knowledge on this subject to equal that of the cardiologist; however, he should be capable of operating an electrocardiograph and diagnosing the changes in the electrocardiogram which may occur during anesthesia.

This booklet begins with four short chapters on the genesis, principles and techniques, procedure in reading, and table of characteristics of the normal electrocardiogram. The re-