THE ANESTHESIOLOGIST'S BOOKSHELF

HUBERTA M. LIVINGSTONE, M.D., Editor

Standard Nomenclature of Diseases and Operations. FIFTH EDITION. EDWARD T. THOMPSON, M.D., F.A.C.H.A., EDITOR, AND ADALINE C. HAYDEN, C.R.L., ASSOCIATE EDITOR. Cloth. \$10.50. Pp. 964. Published for the American Medical Association by the Blakiston Division of McGraw-Hill Book Company, Inc., New York, 1961.

Standard Nomenclature of Diseases and Operations deserves more recognition. Nowhere is there a more complete listing of diseases in a rational fashion. The only other Standard available today for such purposes is the International Nomenclature, which is so incomplete and sketchy as to lack significant value.

Every physician who has administrative responsibility should become familiar with the organization and contents of the new edition; indeed every anesthesiologist should acquaint himself with this book and its method of designating diseases and classifying causes of death.

A remarkable job has been performed in bringing various features related to anesthetic drugs and techniques up-to-date. Deaths related to anesthetic factors can be easily classified by these Standard Nomenclatures. example, a death due to an overdose of a gaseous anesthetic has a numerical classification (010-334). A further numeral may be added to specify the exact hydrocarbon. Death due to asphyxia may be classified under the numerical system as (010-21), anoxia classified as (010-7xx), cardiocirculatory collapse comes under the "400" series. Thus, all the turmoil and chaos regarding such a nonentity as "cardiac arrest" can be eliminated by a system which has been in existence many years. Death due to hemorrhage may be classified numerically as (010-400.7), or operative trauma may be designated as (010-415).

It is high time that a system that has gradually evolved over several decades (first printing 1932) should be recognized for its true worth and practical value in any statistical sys-

tem. It would be a shame not to take advantage of the work of many outstanding authorities in American Medicine who have compiled a complete and satisfactory code. Efforts to reproduce this material from scratch seem senseless. It is worthwhile to quote from Santayana, "that those who cannot remember the past are condemned to repeat it."

VINCENT J. COLLINS, M.D.

Principles of Surgical Practice. By Emanuel Marcus, M.D., Ph.D., Professor of Surgery, The Chicago Medical School; Surgeon, Michael Reese Hospital (Chicago) and St. Margaret Hospital (Hammond, Indiana): in collaboration with Leo M. Zimmerman, M.D., Professor and Chairman, Department of Surgery, The Chicago Medical School; Senior Attending Surgeon, Michael Reese Hospital; Attending Surgeon, Cook County Hospital. Cloth. \$12.50. Pp. 430, with 58 figures. The Blakiston Division, McGraw-Hill Book Co., Inc., 333 W. 42nd St., New York 36, New York, 1960.

This volume, devoted to the principles involved in the management of surgical patients, was compiled by two outstanding authorities, eminently qualified for the task on the basis of extensive personal clinical experience and laboratory research. The basic sciences related to surgery are discussed in a lucid, comprehensive, and concise manner. The principles of anatomy, physiology, biochemistry, pharmacology, microbiology and pathology are applied logically to the diagnostic and therapeutic problems of the surgical patient. text is short enough to be read as a monograph, and contains enough practical information to be used as a reference book. It is well prepared, easy to read, and the illustrations are excellent. The authors modestly state that this book is intended primarily for the undergraduate. Actually, it has a much wider field of usefulness as a source of reliable information on almost any problem related to the