ginning of the Symposium and at the joint meeting is to be found in this article. It is preceded by a Curriculum Vitae and a full bibliography of L. S. Haldane. There follow the tributes to the work of J. S. Haldane in various fields of physiology, read at the joint meeting of the Symposium and the Physiological Society. The papers read at the Symposium are presented in groups, after each of which appears an edited version of the discussion of the papers. The next section of the book contains the abstracts of the special communications on original work on subjects related to J. S. Haldane's other interests. The volume is well indexed, and a list of commonly used symbols and abbreviations related to respiratory physiology, with some examples, is given.

This book is of both historic and scientific value to those interested in the pioneer work of J. S. Haldane and in current concepts regarding respiratory physiology. Although it is neither a textbook nor an historic novel, it does provide authoritative scientific reference material concerning the regulation of human respiration and also fascinating accounts of the personal experiences and accomplishments of J. S. Haldane and others who have made significant contributions to our progress of knowledge in this field. Anesthesiologists and others whose interests are associated with respiratory physiology in pure research or in practice would find this book a valuable and enjoyable addition to their libraries.

Charles M. Landmesser, M.D.

Vade-Mecum de Réanimation Respiratoire. By J. Francois Monsallier-Medecia, Assistant des Hopitaux de Paris. With a preface by Professor P. Millaret of the Neurorespiratory Réanimation Centre of the Claude-Bernard Hospital. Paper. Pp. 98, with illustrations and 13 tables. Masson et Cie, Editors, Libraires de L'Académie de Médecine, Paris, 1962.

This book was written for persons interested in all types of resuscitation which are necessary after cardiac arrest and respiratory insufficiency from any cause. It is divided into three parts, the first dealing with physiology and pathology of respiration, presented in schematic form. The second part is concerned with the symptomatic and emergency treatment of cardiac decompensation and respiratory insufficiency. In this section various respirators and assistors are described somewhat in detail. Unfortunately, none of the assistors commonly used in the United States are described. The third part deals with recognition and treatment of circulatory and respiratory problems seen in cases of coma, tetanus and chronic lung conditions.

This manual is written in short synopsis form with many illustrations and outlines. No bibliography or references are included because no new or controversial material is presented, and the book sticks to the outline form which it intends to be.

It is a paper-backed publication and the binding breaks down easily.

This French book could serve as a quick reference and/or refresher for persons concerned with resuscitation, be they anesthesiologists, nurse anesthetists, emergency room residents, intensive care nurses, etc., provided they can read French.

Germain L. Houle, M.D. Paul R. Rumke, M.D.

Essentials of Artificial Ventilation of the Lungs. By A. R. HUNTER, M.D., F.R.F.P.S.G., F.F.A.R.C.S. Fabricoid. \$3.75. Pp. 70, with 31 illustrations. J & A Churchill Ltd., London, England, and Little, Brown & Co., Boston, 1962

The author, consultant anaesthetist to the Royal Infirmary and Baguley Hospital, Manchester, England, states in the preface that the book has been written to provide a handy and elementary reference for junior resident anesthesiologists called upon to provide emergency long-term artificial ventilation of the lungs. The first two chapters are devoted to the problem of the airway, descriptions of the cuirass and Drinker type respirators, and simple intermittent positive pressure methods with bag and mask or bellows. One chapter is devoted to characteristics of intermittent positive pressure respirators. It is regrettable that this valuable contribution comprising the author's method of classification consists of only five pages. Next follows a description of respirators in common use, but these are all of British manufacture. The factors of resistance to inflation are discussed very briefly, and a short but helpful chapter is devoted to current methods of biochemical control of ventilation. There follows useful information on fluid balance, feeding the patient in long term respirator therapy, prevention of infection, the use of sedatives, care of the eyes, and care of the bladder and bowels. A final chapter is devoted to brief discussions of the various disease states where long term intermittent positive pressure therapy is commonly employed. Each chapter has a short list of recent pertinent references. There is also an index. This book, written by a distinguished clinician, contains information useful to any anesthesiologist desiring to expand service to patients needing long-term respiratory therapy.

RICHARD FOREGGER, M.D.

Fluids and Electrolytes in Practice. Third Edition. By Harry Statland, M.D., Associate Clinical Professor of Medicine, University of Kansas School of Medicine, with four contributors. Cloth. \$8.50. Pp. 329, with 38 figures and 16 tables. J. B. Lippincott Co., Philadelphia and Montreal, 1963.

The continuing trend toward participation of anesthesiologists in total care of surgical patients and the complexity of modern surgical procedures make it necessary for anesthesiologists to be cogni-