

gining 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 J. 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-MEDECLA, 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 assistants are described somewhat in detail. Unfortunately, none of the assistants 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. 83.75. 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-

zant of management of deviations in electrolyte balance. This text is concerned with identification and treatment of such deviations resulting from a variety of medical and surgical disorders.

The opening chapters define terms of expression and establish a frame of reference for ensuing discussion of movement of fluids and electrolytes. A small section deals specifically with preoperative and postoperative problems, and a later section concerns acid-base balance and abnormalities. The remainder covers the multitude of deviations in fluid and electrolyte balance associated with commonly encountered illnesses of adults and children. The author writes clearly and effectively. Liberal use of figures and tables adds to the value of the text for students and clinicians. The composition and use of fluids for replacement is given in detail.

There are a few minor points of criticism. The author refers repeatedly to the term "carbon dioxide combining power" as an important parameter in identification of acid-base abnormalities. He fails to make clear, however, the difference in meaning of this term from that of serum bicarbonate, implying that these expressions are identical. Moreover, no attention is given to use of measurements of buffer base and standard bicarbonate for detection of acid-base abnormalities. Increased attention appears to be given these terms by individuals interested in this subject.

Nevertheless, any physician desiring to add to his library a reference text or manual of treatment concerned with fluids and electrolytes should be pleased with this book.

ROBERT T. PATRICK, M.D.

International Anesthesiology Clinics. Vol. 1, No. 2, February 1963. TREATMENT OF RESPIRATORY INSUFFICIENCY. ANESTHESIA FOR THORACIC SURGERY. EDITED BY R. A. GORDON, M.D. Pp. 333 to 532. (Published quarterly. Rate: domestic \$22.00 per year, foreign \$25.00 per year.) Little, Brown & Company, Boston.

This book contains two major sections, one on the "Treatment of Respiratory Insufficiency" and the

other on "Anesthesia for Thoracic Surgery." The first section is in turn divided into two chapters, one written by J. C. Robson, M.D., of Montreal entitled "Physiology of Respiration" and the other written by J. B. Fairlie, M.D., of Toronto, entitled "Respiratory Insufficiency." The second section is likewise divided into two parts, one entitled "Anesthesia for Thoracic Surgery" by R. C. Gilbert, M.D., and G. F. Brindley, M.D., both of Montreal. The final article is entitled "Special Problems in Anesthesia for Pulmonary Resection" and is written by the Editor, R. A. Gordon, M.D., Professor of Anaesthesia, University of Toronto.

These well-known and competent Canadian authors, well versed in their respective topics, have succeeded admirably in fulfilling their objective "to share with the reader something of the experience of two major Canadian medical centers in the fields of anesthesia for thoracic surgery and the treatment of respiratory insufficiency." Each author thoroughly knows his topic and each has presented a lucid dissertation well worth reading by anesthesiologists, physicians and scientists interested in pulmonary problems.

Figures 12 through 16 are a bit puzzling because the descriptive legend appears under figure 12 and it is not too revealing. With the exception of this relatively minor criticism one can with easy justification commend the authors for the time and effort they put into preparation of their manuscripts. The publisher likewise can be praised for selecting paper with a glossy finish and a type face that makes reading an easy and comfortable exercise, thus fostering a concentration that is necessary for the reader to appreciate the erudite approach to each topic presented. Libraries will be enhanced if they contain a copy of this truly educational issue of International Anesthesiology Clinics even though the noun Anesthesiology in the title is used as an adjective—poetic license that is barely forgivable when it emanates as it does from a group of purists in the use of the English language.

RALPH M. TOVELL, M.D.

