

this region are discussed. There are separate chapters on preoperative assessment of respiratory and circulatory functions. One chapter describes the principles of automatic ventilators, and another is devoted to smaller instruments used in thoracic anesthesia. Special problems are considered such as pediatric operations, oral endoscopy, open heart surgery, using extracorporeal circulation, hypothermia, and such unusual cases as tracheobronchial reconstruction, sleeve resections, thymectomies, and retrosternal thyroids, among others.

The chapter devoted to postoperative care is generally excellent. It might have been desirable, in a book otherwise so complete, to have included indications for and care of tracheostomies. Five separate contributors mention tracheostomies, but none consider principles of tracheostomy care.

Dr. Rendell-Baker condensed the book he and Dr. Mushin found in 1953 to produce an interesting chapter on history of thoracic anesthesia. There are nicely written, concise chapters on the EEG and ECG, which are just as valuable for any other type of anesthetic procedure as for thoracic surgery.

The esophageal stethoscope is evidently not widely used in these authors' hospitals. This statement appears in the chapter on Instruments: "However, the patient's condition may be so critical that the anesthetist will wish to listen to the heartbeat throughout the operation." Would it not be desirable to listen to the heartbeat of every patient throughout his operation?

The book is well bound, the type is easily legible, and the style makes easy and delightful reading. Illustrations are abundant and appropriate. It is recommended to all anesthesiologists interested in thoracic work, and contains abundant information for anyone caring for an unconscious patient.

ROBERT W. VIRTUE, M.D.

Anesthesia in Clinical Ophthalmology. By DERYCK DUNCALF, M.D., Ch.B., F.F.A.R.C.S., D.A., Associate Attending Anesthesiologist, Montefiore Hospital, New York City, and DAVID H. RHODES, JR., M.D., Associate Staff, Mercy Hospital, Pittsburgh, Assistant Clinical Instructor Ophthalmology, University of Pittsburgh. Cloth. \$8.50. Pp. 168 with 36 illustrations. The Williams & Wilkins Co., Baltimore, 1963.

Written in joint effort by anesthesiologist and clinical ophthalmologist, this 168 page monograph explores the mutual problems of anesthesia and eye surgery with exceptional emphasis on intra-ocular tension. It is difficult for this reviewer to determine whether the contents of this book represent a condensation of all that is known of the subject, or an expansion of the small segment of information available. One has to read at considerable length to glean a true pearl from this well-organized review of a very selective area of surgical endeavor. I suspect that the eye-oriented

physician may be more enlightened by the exhibition of anesthetic data and experience than will the experienced anesthesiologist by the basic ophthalmologic presentation. An exception to this may be found in the final chapter which deals with heretofore seldom considered "ocular complications of general, spinal and epidural anesthesia."

The monograph is well indexed and has listed 184 well-selected references, which, uniquely, list in italics the number of the page in the text where the reference appears. This monograph is well-suited for practitioners of ophthalmology, and should be of interest and help to residents in training in both ophthalmology and anesthesiology.

J. GERARD CONVERSE, M.D.

Clinical Anesthesia. JOSEPH F. ARTUSIO, M.D., EDITOR-IN-CHIEF. Vol. 3. *Anesthesia for Patients with Endocrine Disease.* M. T. Jenkins, M.D., Editor, with many contributors. Cloth. \$7.50. Pp. 234, with illustrations. F. A. Davis Co., Philadelphia, 1963.

Portions of this third volume in the *Clinical Anesthesia* series are excellent. Particularly good is the chapter devoted to anesthetic management of the diabetic patient. The chapter on pheochromocytoma also deserves favorable comment. Both sections are filled with factual and useful information, most of which appears to be based upon personal experience of the contributors.

The practitioner who has purchased the book as a guide to clinical anesthesia for endocrine disease may be disappointed in that slightly more than half of the work is clinically directed. The remainder pertains to physiology of components of the endocrine and sympathetic nervous system. The validity of the latter portions would have been strengthened had they been written by physiologists or endocrinologists.

ROBERT T. PATRICK, M.D.

Small Animal Anesthesia. By WILLIAM V. LUMB, D.V.M., M.S., Ph.D., Professor of Veterinary Medicine, Colorado State University, Fort Collins, Colo. Cloth. \$11.50. Pp. 420 with 125 illustrations. Lea & Febiger, Philadelphia, 1963.

Although largely concerned with the dog, this book deals with anesthesia of all animals ranging from pigs and goats to hamsters, birds and fish. As a consequence of such a wide scope, laboratory workers will find the book useful for reference as a guide to the techniques used in different species. A large section of the contents deals with drugs used during anesthetic procedures with, in most cases, a guide to the dosage required by different species, so that from this point of view also it is valuable for reference.

Veterinary students and anesthetists will also find it useful as a textbook on veterinary anesthesia, although it suffers from the fact that such a wide coverage precludes detailed description of many important points. In particular, the recognition of