

author in either clinical psychiatry or psychopharmacology, that the reviewer cannot recommend this volume except to those who have an extraordinary tolerance for excessive, flowery rhetoric and do not mind the repeated discussion of the same point, in the same way, with perhaps a new detail being added as a pretext for retelling the same story. Had there been good editorial assistance, what is central to this book could have been cited in less than 30 pages.

As an example of the strange ideas and literary style: on page 5 we are told that Cpz is a drug "psychoanalysts were ready to give up their dreams for." At the least, most psychoanalysts I know are indifferent to chemotherapy; many are, in fact, hostile to it. An interesting story would be the careful investigation of their attitudes. That is not the style of this book. On page 40, a reference is cited which the author says tells us

"why the efficacy of Cpz is spectacular in some psychoses but considerably less so in certain atypical forms." There is no accepted explanation, on a biochemical or neurophysiologic level, for the efficacy of Cpz in any type of mental illness. Beginning on page 100, there is a five-page analogy between drug testing and evaluating string instruments which truly tells us nothing about either activity. Throughout, there is evidence of a lack of authoritative mastery of the key issues in the changes that occurred in the psychiatric world, at macro and micro levels, in the chemotherapeutic revolution which Cpz heralded.

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## Surgery

**HEART TRANSPLANT** As the surgical techniques associated with cardiac transplantation are relatively straightforward, virtually any hospital equipped to perform open-heart surgery is a potential cardiac transplant facility. Before committing the hospital to entering the transplant field, administration and the governing board must give careful attention to the availability of specialty support for the particular area of transplant activity being considered. In addition to the surgeon's skills, the need for expertise in immunology, cardiology, electroencephalography, neurology, neurosurgery, nephrology, infectious disease, pulmonary medicine, radiology, psychiatry, psychology, pathology, and tissue typing must be evaluated. The bills for transplantation have ranged from a low of \$3,302 for a pediatric patient who lived only hours after surgery to a high of \$111,975 for a patient who lived 497 days and was hospitalized continuously after undergoing the heart transplant. The average bill was about \$25,000. A transplant program requires the ultimate in team effort dedicated to providing the best care possible for the donor and recipient while simultaneously providing an uninterrupted flow of services to the other patients in the hospital. (Reinhard, Henry C., Jr.: *Heart Transplant: The Whole World Watches*, *Mod. Hosp.* 115: 72 (July) 1970.) ABSTRACTER'S COMMENT: Anesthesiology should be added to the list of areas of expertise required for successful transplant surgery.

**PERCUTANEOUS CORDOTOMY** Two deaths directly attributable to cordotomy occurred when the procedure was performed in 93 patients. One patient died after bilateral lesions had been made three weeks apart; the other died after midcervical analgesia had been produced as a treatment for carcinoma of the breast with metastases to the brachial plexus. Both patients died "quietly" during the fourth postoperative night, obviously because of loss of central respiratory function. The manner of death of the patient who had bilateral lesions fitted the classic high-bilateral-lesion sleep of Ondine ("Ondine's curse"). The woman who had the unilateral lesion had had an infarction of the brainstem on the contralateral side 13 years before, from which she seemingly had recovered. When the respiratory center is compromised bilaterally, as has been reported many times in cases in which high bilateral cervical levels of analgesia have been produced, sleep-induced apnea is frequently encountered. (Onofrio, B. M.: *Recent Results with Percutaneous Cordotomy*, *Mayo Clin. Proc.* 45: 589 (Oct.) 1970.)