The Anesthesiologist's Bookshelf

Edited by Merel H. Harmel

Regional Anesthesia—Recent Advances and Current Status. A volume of the Clinical Anesthesia Series. First edition, Volume 2, 1969. Philadelphia, Davis, 1971. EDITED BY JOHN J. BONICA. Pp. 258 with 8 tables and 40 figures. Cloth, 88.00.

Chapters are contributed by 11 outstanding anesthesiologists, each of whom is well known for his contributions to regional or local anesthesia. The book is well organized, and for the first time the recent advances and current status of regional anesthesia are presented in a concise, lucid manner in a single volume. Of particular significance are the sections on the mechanism of action of local anesthetic agents, the present-day indications for regional anesthesia in surgery, and the therapy and diagnosis of various pain syndromes. Numerous references to the current literature are also included. This book, although it contains little information that has not been presented before in articles in journals or textbooks by the same authors, is a very worthwhile addition to the anesthesiology literature. It is recommended reading for all who perform regional anesthesia procedures and is of particular value to all residents in Anesthesiology. This well written book is certainly well worth the \$8.00 which it costs.

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General Anaesthesia for Dental Surgery. EDITED BY A. R. HUNTER AND G. H. BUSH. Springfield, Ill., Charles C Thomas, 1971. Pp. 145. \$4.75.

The authors state in the foreword of their text that a symposium on "Anaesthesia for Dental Surgery" in March 1968, British Journal of Anaesthesia, demonstrated a great interest in and need for up-to-date information on work in this field. As a result, many articles appearing in the British Journal were revised to provide a "modern approach to techniques, drugs or concepts in this field."

Aside from the obvious problems resulting from contributions by different authors, many statements which might be applicable to the authors experience and hospital surroundings but which might be hazardous to apply to others are made. Only a few will be noted. A patient with massive soft tissue damage with the central portion of his mandible blown off by a shot-gun blast is used as one example. It is stated that preliminary tracheostomy "is probably the safest technique for

the inexperienced anesthetist to employ." Where no emergency tracheostomy has been performed; the authors favor a "crash induction with or with out cricoid pressure." The implication to the reader that an experienced anesthetist need no recommend a tracheostomy prior to induction in this situation is dangerous.

It is suggested in a section on "The Complication tions of Dental Anaesthesia" that if mouth breath ing is a persistent problem and anesthesia is bear coming light, "a small amount of a volatile anaes= thetic agent may be placed on the mouth packs As the patient mouth breathes, he will inhale and anesthetic-laden mixture which will restore nasale respiration." Even though this statement is qualified by discussing the possible hazards of this technique, it would seem unwise even to suggest this to a diverse audience. This same author also states that "there is probably no place in the dence tal surgery for more elaborate methods of overcoming laryngeal spasm, such as the intravenous injection of a muscle relaxant, cricothyroid puncture or emergency tracheostomy." hardly consider this a modern approach.

In a section devoted to problems of the hemographilae patient, a detailed regimen for administers ing epsilon-aminocaproic acid and cryoglobulin is suggested. Even though a reference is supplied the use of the former is more commonly reserved only for patients exhibiting fibrinolysis and the more characteristic substances administered are cryoprecipitate or Factor 8 concentrate.

Although there are excellent chapters in this text describing techniques, equipment, and comorplications of dental anesthesia, and in spite of the fact that it is not intended as a comprehensive survey of the field, there are too many debatable points, errors, and oversimplifications. It is more a matter of how the authors do it than how the readers should.

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Ion Homeostasis of the Brain. EDITED BY B. Kon Sirsigi and S. C. Sørensen. New York, Acac demic Press, 1971. Pp. 479.

This volume incorporates the papers and discussions presented at an international symposium sponsored by the Alfred Benzon Foundation in Copenhagen, Denmark, and Lund, Sweden, in May 1970. During the past decade, it has become generally recognized that control of both respiration and the cerebral circulation is mediated.

through changes in brain extracellular fluid pH. Furthermore, changes in cerebral extracellular fluid concentrations of potassium, calcium, or magnesium profoundly influence the state of consciousness, muscle tone, reflex excitability, and blood pressure. Realization of the importance of brain fluid composition has stimulated considerable research, and there has been a rapid increase in knowledge of the mechanisms controlling the ionic concentration of brain fluids during the past few years.

The aim of the conference organizers was to bring together the major investigators in the field and thereby achieve an integration of this newer knowledge, since this had not been done previ-The volume indicates that the goal was attained, since virtually every major investigator in this rapidly advancing field was present and the book, which records the material presented, accurately summarizes current information about many facets of this important subject, in addition to identifying areas of controversy and pointing up future areas of investigation. Primarily written for physiologists and clinicians with a strong interest in basic science, it is an important reference book for those who wish to know more about the

There are chapters of more general interest, particularly the following: 1) "The Relation of Blood, Brain and Cerebrospinal Fluid," by Hugh Davson and Keasly Welch; 2) "The Blood-brain Barrier—Facts and Questions," by Christian Crone; 3) "Whole Body Buffer Capacity," by E. B. Brown, Jr.; 4) "The Effect of Epileptic Scizures and Comatose States on the Oxidative Metabolism of the Brain," by Fred Plum.

This book represents the most comprehensive current of the physiology of intracerebral fluids and should therefore be a valuable addition to many reference libraries, as well as the collections of those individuals with special interest in central nervous physiology.

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Anesthesia for Outpatient Surgery. EDITED BY DAVID D. COHEN, M.D., AND JOHN B. DILLON, M.D. Springfield, Ill., Charles C Thomas, 1970. Pp. 67. \$5.75.

This monograph, intended as a guide rather than a "how-to-do-it" book, describes the philosophy of the authors and the need for the establishment of an outpatient surgical facility in a general hospital. Each hospital may have to modify the application of these principles according to its own special conditions. The authors emphasize safety and, in any program, the anesthesiologist and surgeon should adhere to these principles rigidly. They establish the need for

outpatient surgery, and the monograph provides an easily read general background to the subject.

The discussion of the pharmacology of premedication and local and general anesthetic drugs may ☐ not interest the qualified anesthesiologist, but was included, perhaps, for those administering anesthetics who are less qualified. There are differences of opinion concerning the acceptance of a history and physical examination performed 10 days prior to surgery and the use of hypnotic and narcotic drugs for premedication unless specifically indicated. The current use of halothane and methoxyflurane for ambulatory surgery is ques- $^{\Omega}_{\sim}$ tioned, but it would have been acceptable prior on to 1970. The desirability of the use of ketamine for ambulatory patients is debatable, due to un-3 pleasant dreams and prolonged recovery time. with more experience with this drug. Some fa-S cilities are performing other procedures, including tonsillectomies, adenoidectomies, and therapeutic abortion, as ambulatory procedures without any preported complications. These differences of opinion depend on local requirements and qualifications of personnel. This indicates a need for more information about the details of anesthetic man agement of patients in this expanding field.

The evaluation of the patient's recovery is and interesting review of the literature and researched in objective and standardized methods of determining ponstoperative recovery. There is a need for this, especially in ambulatory surgery, and the Trieger psychomotor test may prove to be an important contribution.

Although there may be differences of opinion, 6 this monograph will create interest in ambulatory anesthesia and fulfill the objective of the authors of establishing the proper principles for an outpatient surgical unit.

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Principles and Practice of Spinal Anesthesia. Sol By Perme C. Lund. Springfield, Ill., Charleso C. Thomas, 1971. \$37.75.

A number of limited treatises of excellent quality have been written on various aspects of spinal anesthesia during recent years, but this is the firsty
comprehensive work on the subject to appear
since Maxson's textbook of "Spinal Anesthesia"
was published in 1938.

This large book, successor to the author's previous volume, Peridural Anexthesia, presents a perspective of subarachnoid anesthesia in a contemporary setting. It is a massive work, representingly
a tremendous labor of collation, based on a personally supervised series of more than 25,000 spinally
anesthetics. Approximately 2,000 authors are
quoted in the references. All aspects of spinally
anesthesia are considered and many viewpoints⁴
presented.