

BOOK REVIEWS

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Clinical Neurosurgery: Volume 35. Proceedings of the Congress of Neurological Surgeons, 1987. BY PETER MCL. BLACK, M.D., PH.D. Baltimore, Williams & Wilkins.

This volume records the proceedings of the Congress of Neurological Surgeons meeting in October 1987, and is dedicated to the honor of Dr. Thomas W. Langfitt. For many years Dr. Langfitt was Professor and Chairman of Neurosurgery at the University of Pennsylvania and made many significant contributions to neuroanesthesia. He was a major supporter of the founding of the Society of Neurological Anesthesia and Neurologic Supportive Care. At present, Dr. Langfitt is President and Chief Executive Officer of the Glenmeade Trust Company.

This volume offers a summation of the state of the art in neurosurgery as of 1987. Dr. Langfitt gives three presentations as honored guest speaker. The first of these is an expansion on the decision matrix of Siegler as one element in the process of deciding when care should be stripped of technologic complexity and focused upon terminal support for patient and family. The second presentation is a fascinating overview of the present position of problem solving in the neurosciences, and is interesting reading for those who may wish to obtain research funding. Finally, Dr. Langfitt reviews the many complex issues that may or may not have compromised the randomized clinical trial of superficial temporal artery to middle cerebral artery anastomoses.

The remainder of the book is divided into segments dealing with elements of the Art and Science of Neurosurgical Care. A series of presentations on Intensive Care indicate that the neurosurgeons feel capable of dealing with that area without outside expert help, certified or not. The presentation on management of brain tumors also describes technologic advances in operating room equipment. The neurosurgical approach to pain management is detailed in seven chapters. Particularly interesting is a chapter on the Use and Abuse of Drug Pumps in Cancer Pain. A final section presents arguments in controversial areas, including alternatives to surgical treatment of herniated lumbar disks, management of asymptomatic carotid stenosis, and management of incidental intracranial aneurysms.

All in all, the book is an excellent review of current neurosurgical practice. It provides strong testimony to the neurosurgeons' exceptional ability to carry out critical self examination. Certainly the book is informative and entertaining reading for anyone especially interested in neurosurgical anesthesia.

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Introduction to Critical Care. BY J. M. CIVETTA, R. W. TAYLOR, R. R. KIRBY. Philadelphia, J. B. Lippincott Company, 1989. Pages: 311. Price \$29.95.

This introductory book on critical care is a valuable adjunct to the larger texts on critical care. It contains 17 chapters that are excerpted from the textbook *Critical Care* recently published by the same authors. This book brings together thoughts of physicians, nurses, psychotherapists, ethicists, judges, and lawyers on intensive care unit issues regarding patient care and role of health care personnel with the goal of decreasing the stress so commonly associated with intensive care unit practice. It gives an excellent overview of the organization of the critical care unit and touches on key topics unique to critical care. The sections on "Important Legal Decisions in Critical Care" and "Pre-

diction and Definition of Outcome in a Cost-Sensitive Era" are particularly strong.

The soft-bound text consists of two parts: "Concepts" which contains nine chapters, and "People" which contains eight chapters. "Concepts" addresses the historical development of intensive care units, criteria for admission, ethical, legal and cost considerations, and medical determinants of outcome. "People" addresses the importance of interrelationships of the intensive care unit team, and carefully describes the role of each member of the team, especially the intensive care unit fellow and nurse. It also addresses the importance of interactions with the patient and family. Excellent up-to-date bibliographies accompany each chapter.

In the first part, "Concepts," the initial chapters set out goals for intensive care including selection of appropriate patients who will benefit from treatment in the intensive care unit, and the multiple purposes of the intensive care unit including intensive monitoring and observation, extensive nursing care and/or extensive physician care. Clinical decision making is discussed. The conflict in the intensive care unit between the ethical principles of "preserving life" and "alleviating suffering" is discussed and resolved via Cynthia Cohen's "potential for salvageability" as a necessary condition for admission. Although this condition will not apply to all patients, it does give physicians a framework on which to base their decisions.

Chapter 6, "Important Legal Decisions in Critical Care," is comprehensive, practical, and readable, summarizing landmark legal decisions including those of Quinlan and Saikewicz, and the President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research. It also defines the advance directives for patient care that are available: e.g., living wills and durable powers of attorney. Chapter 8 continues with common-sense guidelines for avoiding legal suit.

Chapter 9, "Prediction and Definition of Outcome in a Cost-Sensitive Era," is particularly useful in defining several of the commonly used severity of illness scoring systems: Therapeutic Intervention Scoring System (TISS) which some of these authors developed, Acute Physiology and Chronic Health Evaluation (APACHE II), and the Multiple Logistic Regression (MLR) model. The authors are also careful to point out some of the limitations of these methods and difficulties in validating them. This chapter is an excellent reference source, with 20 tables.

The second part, "People," describes the ICU team members: medical director, ICU fellow, nurse, and ancillary personnel. It stresses the importance of communicated expectations of the specific role of each member. Chapter 13 focuses on the psychological dynamics of the interactions between health care personnel, patient, and family. It appropriately stresses the presence of denial, fear, and lack of control experienced by many patients and their families, and how physicians can effectively deal with these powerful feelings.

Chapter 16 on "Preventive Care: Poorly Appreciated and Undervalued" had clinical information on several important topics including management of wounds, decubitus ulcers, compartment syndromes, and complications associated with ICU devices.

In summary, this introductory book is a superb excerpt of the full textbook on critical care that these authors have written. It covers essential topics in critical care and will be particularly useful to someone who does not wish to purchase the full text. Although it is targeted principally at ICU fellows and nurses, it is also a handy reference source for physicians who have limited exposure to critical care, yet want a quick, up-to-date review of the issues. It teaches medical and organizational skills needed to direct an intensive care unit. It does not address medical therapeutics; rather, it stresses the multidisciplinary approach

to critical care medicine and defines the roles of all the health care personnel, including an Appendix outlining categories of nursing care. This book should be welcomed by critical care fellows and other critical care health personnel.

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Textbook of Paediatric Anaesthetic Practice. EDITED BY E. SUMNER AND D. J. HATCH. Philadelphia, W. B. Saunders, 1989. Pages: 616. Price: \$79.00.

Complexities in surgery and anesthesia have led to numerous specialty books within the field of anesthesiology. **Textbook of Paediatric Anaesthetic Practice** is one of several books published in the last few years devoted solely to pediatric anesthesia. The stated purpose of this multiauthored textbook is to provide a practical reference for anesthesiologists who do not practice pediatric anesthesia exclusively, and for higher-level trainees in this subspecialty.

This book serves as a rich and contemporary resource for anyone practicing pediatric anesthesia, full or part time. Its scope is broad, covering nearly everything in pediatric anesthesia from basic considerations to liver, heart, and heart-lung transplantation. This is also exemplified by a chapter devoted to anesthetic practice in developing countries. While these more-specialized chapters extend beyond the expressed intent of the book, they do provide the interested reader with an overview and references for further study. In general the book is a reference text as opposed to a technical or how-to-do-it manual, so it may disappoint those who prefer descriptions of procedures or algorithms for problem management. References are not extensive but are carefully chosen and refreshingly current (to 1988).

The style is pragmatic rather than exhaustive. I found the book easy to read, rarely becoming mired in technical detail, although more liberal use of subheadings would enhance its value as a quick reference. Despite the few inconsistencies that exist, the editors are to be commended for minimizing redundancy, which is often difficult to achieve in a multiauthored text.

Most chapters are excellent, well written, authoritative discussions. The chapters on airway obstruction, neonatal anesthesia, pediatric emergencies, and inhalation agents are particularly noteworthy for their ability to highlight essential concepts in a concise fashion. The chapters on intravenous anesthetics and muscle relaxants focus on the newest and most frequently used agents. A few chapters lack optimal organization or provide insufficient material to warrant a separate heading.

The editors have coordinated an international effort, with most contributions hailing from the United Kingdom or the United States. Several authors, including the editors, bring their many years of experience from the Great Ormond Street Hospital for Sick Children, London, to this textbook. This is reflected in the frequent reference to drugs rarely used in the United States (*e.g.*, cyclopropane) or available only in the United Kingdom (*e.g.*, papaveretum) and the strict adherence to SI (système international) units. While some United States trained anesthesiologists may find this an inconvenience, I felt it to be enlightening. There are categorical statements, and some discussions rely more on the author's experience and usual practice rather than a review of the literature. Because they are founded upon decades of clinical experience, these suggestions appear to offer the reader examples of prudent anesthetic plans.

Some common clinical problems which have been subject to controversy received little attention. These include situations such as the

child with an upper respiratory tract infection, runny nose or fever who presents for elective surgery; masseter spasm following succinylcholine; and, duration of preoperative fasting for different age groups. These subjects are touched on in different places but guidelines or references for management are not clearly presented. The occasional pediatric anesthesiologist and trainee would have been better served if these topics were given more importance.

Photos, illustrations, tables and graphs are used sparingly through much of the book. In the section on unusual conditions in pediatric anesthesia, pictures compliment the descriptions and tables help organize hundreds of syndromes by the systems effected. The chapter on basic techniques of pediatric anesthesia uses photos and illustrations primarily in the discussion of airway equipment. Where regional anesthesia is discussed, more liberal use of illustrations would be appropriate. With the exception of the chapter on inhalation agents, graphs are rarely used to present or reproduce data. Roentgenographs are effectively reproduced to demonstrate airway pathology. Appendices include a full list of drug doses for a variety of situations and a less complete table of normal physiologic parameters. An additional appendix converting SI to commonly used units would be of value. The index is useful and thorough. Finally, the print is moderate in size on high quality, nonglossy paper and the book is attractively hardbound with a traditional cloth cover.

In summary, the first edition of **Textbook of Pediatric Anesthetic Practice** is comprehensive with current references. This moderately priced textbook is a welcome addition to pediatric texts currently available and I can recommend it without reservation to all who provide anesthesia services to infants and children.

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Textbook of Pain. EDITED BY PATRICK D. WALL AND RONALD MELZACK. London, Churchill Livingstone, 1989. Pages: 1064. Price: \$169.00.

This second edition of the **Textbook of Pain** is a worthy addition to the growing number of books dealing with pain. It is edited by two capable individuals who themselves have contributed greatly to our appreciation of pain as a complex biophysical and psychosocial experience. They have assembled an outstanding group of international authors, most of well-known reputation. Though there is a risk of disparity with multiauthored texts, the writing style in this one is consistently of high quality and anesthesiologists will find that the chapters are highly informational. The authors do not try to overdramatize nor undervalue their topics. The text is comprehensive and up to date. The reader is consistently presented with fundamental information plus that which reflects the basic science and/or clinical progress being made in our understanding of pain and its management. A realistic emphasis of the editors appears to be that of acknowledging new information but also urging the more effective use of our existing knowledge. The reader will encounter practical guidelines for evaluating and managing patients with acute and chronic pain in this textbook.

The 78 chapters are logically grouped into three sections—basic aspects, clinical aspects of diseases in which pain predominates, and therapeutic aspects. Many chapters have summary or conclusion statements that crystallize the major points discussed and then project their import for future developments. There is liberal use made of tables, figures, and illustrations that effectively supplement the text. Many of the bibliographies have references from 1988 that support the contemporary bearing of the material. The interactional nature of physical and non-physical components of pain is a critical theme throughout the book. Anesthesiologists will do well to heed the warning to avoid