BOOK REVIEWS

Carol A. Hirshman, M.D., Editor

Day-Case Anaesthesia and Sedation. Edited by J. G. Whitwam. Oxford, Blackwell Scientific Publications, 1994. Pages: 424. Price: \$85.00.

This first-edition British text is designed to provide a general perspective of the current principles of ambulatory anesthesia and sedation. The rapid changes occurring in outpatient medicine with advancement in technology (e.g., laparoscopic cholecystectomy) and cost containment have fostered the development of this book. Day-Case Anaesthesia and Sedation offers a comprehensive approach to ambulatory practice and provides a framework for ambulatory anesthesia as a designated subspecialty.

The book is divided into four sections: general principles of ambulatory anesthesia, pediatric and adult anesthesia, procedural safety, and legal issues. In Part 1, there is an instructive review of the history and evolving status of ambulatory anesthesia. Several chapters review pharmacologic principles in the adult and pediatric outpatient. As a foundation for effective ambulatory anesthesia practice, these chapters provide a targeted discussion of basic anesthetic agents and considerations for their use in the pediatric population. Other chapters in this section deal with topics that are integral to the practice of anesthesiology but do not pertain to ambulatory practice per se (anaphylactic and anaphylactoid reactions and cardiopulmonary resuscitation). Although these topics have been covered in more detail elsewhere, both chapters provide useful synopses. There may be some variance among countries with respect to ethics (appropriateness of complying with "do not resuscitate" mandates for patients undergoing outpatient surgery) and resuscitation guidelines (according to new American Heart Association standards). The inclusion of this material, addressed by the editor's comments in the preface, is based on the book's projected audience, which includes all clinicians (in addition to anesthesiologists) who are responsible for administering sedation. There also is a chapter dealing with pain treatment that provides a necessarily brief overview.

Part 2 focuses on common areas of practice, including laparoscopy, ophthalmic surgery, and dental surgery. Otolaryngology and, specifically, endoscopic sinus surgery are not discussed, although these areas comprise a large percentage of our outpatients and would be fertile soil for review. The important role of local or regional anesthesia in the ambulatory surgery patient is highlighted in this section. This chapter reviews applications of local anesthetics in the context of ambulatory management with respect to technique as well as risk and benefit. The chapter on sedation and sedoanalgesia is useful but does not present the full breadth of the literature of a major aspect of ambulatory anesthesia practice. Although some of these subjects are covered in the chapter on pharmacology and day-case anesthesia, it would be beneficial to have had an in-depth discussion of sedation principles for the various agents, modes of administration, potential drug interactions, and recovery characteristics. The chapter on patient-controlled sedation presents an interesting concept that may have broad future applications. Another chapter (curious from an American perspective for its inclusion) deals with anesthesia circuits and ventilation systems. Although our British colleagues obviously employ a wider range of circuit options in their practices, the discussion of the Cuirass ventilator raises questions regarding its potential applications in an outpatient setting. The pediatric subsection covers general principles of pediatric anesthesia and provides a useful

Part 3 highlights issues of critical importance to safe practice as well as nursing and unit organization. These chapters present information for the sage and efficient management of an ambulatory facility. Part 4 reviews the important legal aspects of caring for the ambulatory patient. The final section, Appendices, succinctly reviews a series of selected topics ranging from malignant hyperthermia to semantics.

The text is very pleasant to read and presents a wide range of topics in a thoughtful manner. While it succeeds in providing a contemporary overview of the rapidly expanding field of ambulatory procedural medicine, it occasionally lacks details and fails to delineate controversies in ambulatory anesthesia. This approach offers the distinct advantage of presenting "take-home" messages that could be otherwise obscured in a text that painstakingly reviews the most recent findings but does not offer qualification. For these reasons, the book is effective as a text introducing new residents or long-time practitioners of anesthesia to the new field of ambulatory anesthesia. An additional strength undoubtedly lies in its use as a summary text for practitioners without anesthesia training who are responsible for administering sedation in their own practices. Several statements highlight differences in practice across the Atlantic, but these often are matters of opinion and should be apparent to the reader.

Douglas S. Snyder, M.D.
Assistant Professor
Department of Anesthesiology and Critical Care Medicine Johns Hopkins University School of Medicine 601 North Caroline Street
Baltimore, Maryland 21287-0712

Anaesthesia, Two Volumes. Second Edition. By W. S. Nimmo, D. J. Rowbotham, and G. Smith. Oxford, Blackwell Scientific Publications, 1994. Pages: 1,937. Price: \$250.00. An additional strength undoubtedly lies in its use as a summary text

The preface to this second edition of Anaesthesia harbors a highly pertinent comment: "It may not be possible to provide within a single text all the knowledge for the anaesthetist but we see a clear need for modern anaesthetic practice to be summarized in one text.

." With this concept, your reviewer agrees, and indeed, the authors have assembled a large, predominately British cast of coauthors with wide knowledge and experience. The two-volume set is divided into five sections totalling 92 chapters spreading over 1,937 pages. The first section undertakes a review of the pharmacology, physiology, physics, and statistics pertaining to anesthesia. Section 2 covers the complete gamut of subspecialty anesthesia. Section 3 embraces local anesthetic pharmacology, then local and regional anesthesia. Section 4 offers a spectrum of topics on acute and chronic pain. Section 5 deals with those few specific topics of intensive care that have significant bearing upon anesthesiologists' concerns in that realm.

Common to all attempts to compose texts of anesthesia to cover all aspects of the practice, there is always a quandary as to where to end. Nimmo et al. clearly designate the target audience as those individuals sitting for Board or Fellowship examinations, and I commend their choice. However, they also offer the book as a "current readable and authoritative work for anaesthetists." In both regards, I believe they have succeeded. The obvious current transatlantic competition is *Anesthesia*, edited by Professor Ronald D. Miller. I believe they are comparable texts.

The authors have collected a fine coherent amalgam of topics in anesthesia, pain, and intensive care that have been well edited. There is considerable breadth in subject matter, and few instances of omission exist. For the most part, chapter quality is very high, yet some chapters disappoint, usually because of superficial coverage of rather complex problems. I sensed that the descriptions of the physiology and pathophysiology of the coronary and cerebral circulation were too superficial even for such a general text. Despite the inclusion of a chapter "Crystalloid Fluid Therapy," the complex and frequently debated crystalloid-colloid controversy that plagues anesthetic practice was dealt with in only two pages. A singular disappointment is the absence of a cogent discussion of right ventricular failure and pulmonary hypertension along with its therapy. Concomitantly, pulmonary vasodilators are poorly dealt with. The chapter on artificial ventilation disappointingly fails to discuss permissive hypercapnia or ventilation with helium/oxygen mixtures. The chapter on breathing circuits and vaporizers still includes low-resistance in-circuit vaporizers, which should be, by now, no longer a facet of practice. Other chapters that suffer from superficiality are those on liver disease and plastic surgery. Inevitably, there is the occasion for repetition when many authors collaborate in one text, yet with a few exceptions there is little redundancy in this text, the only notable examples being assessment of myocardial risk and preoperative assessment. I would like to commend the editors for including a brief supplemental reading list for each chapter in addition to the extensive reference

Despite this seemingly lengthy discussion of individual criticisms, the text is a highly sound compendium of knowledge with a justifiable strong, didactic clinical emphasis. Moreover, some specific chapters impressed. I mention them, not to denigrate the other chapters in an excellent text, but because they impressed greatly. These included chapters on anesthesia and cardiac disease, ventilatory failure, monitoring, and opioids. I was gratified by the inclusion of chapters about operating room/postanesthesia care unit management and design, as well as a comprehensive chapter on audit of anesthetic practice. These reflect sound, modern progress in the development of our specialty beyond the hackneyed phrase "passing gas" sometimes invoked by our detractors.

Often, the topics poorly dealt with in anesthesia texts are those on statistics and epidemiology. These are superbly discussed here in a sound, concise chapter. Additionally, so often sections on intensive care and pain are poorly thought-out addendums to texts. This is not the case in this reference work. They are well collated topics applicable to the general practice of anesthesia.

In summary, this is a fine text and a solid, well thought-out compendium of the practice of anesthesia as envisioned on both sides of the Atlantic. It befits its stated target audience well and should prove to be a sound preparatory text for anesthesiologists-in-training as well as a reference for graduates.

Simon Body, M.B., Ch.B. Instructor in Anesthesia Harvard Medical School Brigham and Women's Hospital 75 Francis Street Boston, Massachusetts 02115