

Much of the chapter on conscious sedation is a primary text discussing the general subject and is not well designed as a discussion of sedation specifically for fiberoptic endoscopy. For example, although the use of propofol, midazolam, and fentanyl are well discussed, some other pharmacologic agents that clinicians may find helpful are not (*e.g.*, ketamine, droperidol). Following are chapters dealing with various aspects of the topic such as the adult, obstetric, and pediatric airways, bronchial endoscopic techniques, and critical care endoscopy. Important clinical teaching gems that are often overlooked by practitioners (*e.g.*, "this [jaw thrust] maneuver is vital, constituting the most important step in fiberoptic intubation under anesthesia.") are included throughout these chapters. Subsequent chapters deal with the difficult airway, with updated areas such as endoscopy using the laryngeal mask airway (LMA) and esophageal airways. Although the LMA is given a specific chapter (which is good), the previous chapter dealing with management of the difficult airway mentions the LMA sparingly, and because the textbook was published in 1996, the older (1993) ASA algorithm, which does not incorporate the LMA, is displayed.

In addition, extubation of the difficult airway, an area relatively unexamined by other writers, is given careful and detailed commentary. Dr. Ovassapian concludes his book by demonstrating his competency as a teacher with the chapter "Learning Fiberoptic Intubation Techniques." Even the most inexperienced practitioner, after reading this chapter and using some guided instruction, should be able to perform airway endoscopy with greater confidence.

In summary, Dr. Ovassapian's new textbook is a valuable addition worth its price to any operating room or intensive care unit bookshelf because of its unique and well-constructed content. It is not without significance that the "A" in ABC (airway, breathing, circulation) comes first. When confronted by the rare difficult or compromised airway, it is of critical importance that the clinicians be as well educated as possible in the evaluation and management of this subject.

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Image Guided Pain Management. Edited by P. S. Thomas. Philadelphia, Lippincott-Raven, 1996. Pages: 160. Price: \$75.00.

The author had the right idea by attempting to produce a guide for interpreting the position of catheters and needles when using radiologic instrumentation for nerve blocks. The final product, however, falls short of its goal to some extent for a series of reasons.

First, the copy editing of the chapters failed to detect many significant typographic and syntax errors throughout the textbook. Second, the quality of many radiographs is so poor that it is difficult to identify the anatomy. Other pictures show trivial aspects of the block and should have been omitted or replaced with more images of needles or contrast near target structures. Most problems in image clarity are a result of overexposure of the picture compounded by further

copying for publication. Third, the title is somewhat misleading as it implies that pain management is the topic. In actuality, the book deals with nerve blocks. Fourth, I believe that a cost of \$75.00 is too high for the amount of information presented (almost 50¢ per page of text compared with Bonica's textbook at about 11¢ per page).

The book is divided into 21 chapters—19 of which deal with a particular type of block. The first two chapters describe the principles of radiologic technology and contrast media and are basic but useful as a synopsis. Most chapters are about six pages long (the book is only 6" × 9"). Thus the informational content is sketchy. I did not find many of the photos to be as helpful as I anticipated, and the same photo is used in consecutive chapters separated by only four pages. Other pictures such as a woman lying in the prone position with a pillow under her abdomen seems trivial and a waste of page space.

The strong chapters in the book deal with celiac plexus, hypogastric plexus, lumbar sympathetic, and glossopharyngeal nerve blocks. On the other hand, one chapter dealing with intraarticular face blocks shows no images but pen and ink drawings of skeletal structures similar to a Labat text on regional anesthesia.

Overall, the book is somewhat disappointing and relatively expensive to recommend purchase. However, for those who spend the majority of their pain practice in a radiology suite, a perusal of this text may provide specific information on esoteric blocks that may improve their outcome success. Hopefully, the author and publisher will endeavor to use this critique to improve on a second edition because the concept of the book is a useful topic for interventional pain practitioners.

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Critical Care Management Case Studies: Tricks and Traps. By G. R. Park and M. R. Pinsky. London, W.B. Saunders Company, Ltd., 1997. Pages: 304. Price: \$29.95.

This book, although modest in cost and size, provides a nice overview of the field of critical care medicine using a case study format. The authors have positioned this textbook nicely between encyclopedic references and brief "clinical pearls"-type monographs. The main body of the textbook is approximately 275 pages. It is divided into 11 main sections, in which 3–6 case-oriented topics related to each section are presented. The case histories illustrate key principles related to the main section topic. Each clinical case history is followed by one or more clinical "traps," which are designed to indicate potential pitfalls that can occur in the management of the specific case under discussion. The traps are then followed by "tricks," which explore the conceptual framework that is used to correctly manage the clinical scenario presented in the case discussion. Each section concludes with a clinical follow-up evaluation of the case that was originally presented, highlighting the importance of both initial steps

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that were undertaken in the treatment of the patient and the results of the therapies that were initiated.

Although this textbook is clearly not designed to give complete coverage of the entire field of critical care medicine, it nevertheless succeeds in providing an extremely interesting overview of many of the important topics in this diverse area of clinical practice. The case-oriented format offers an interesting conceptual framework for integrating the clinical principles that are illustrated by the "traps" and "tricks." Because each of the cases presented within a given section is only three to six pages in length, residents, fellows, or medical students on a critical care rotation would be able to use the textbook for reading during even brief periods of time. The 51 typical cases presented in this book could easily be read during the course of a clinical rotation. In addition, the book could also prove useful to clinicians preparing for subspecialty examinations in critical care. The case format provides a ready framework for identifying areas of weakness that require further review in more detailed reference works.

A shortcoming of the book is its focus primarily on medical intensive care topics. There is little if any coverage of topics specifically

related to surgical critical care. Also, the cases focus mainly on issues related to the initial treatment of patients when they arrive in the intensive care unit, thus avoiding any discussion of problems associated with prolonged intensive care unit admissions. It should be noted that these are relatively minor deficiencies. More complete coverage of the field of critical care medicine or a more exhaustive examination of issues related to problems associated with long-term intensive care management would have made the book overly long and thus potentially less useful to the audiences targeted by the authors. As it is, this text should fill an important niche in the medical literature. Students of critical care medicine, regardless of their level of training, should find it useful whether it represents their initial introduction to the field or serves as a handy refresher when preparing for subspecialty examinations.

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