

■ REVIEWS OF EDUCATIONAL MATERIAL

James C. Eisenach, M.D., Editor

Anesthesia and Transplantation. Edited by Michael D. Sharpe, Adrian W. Gelb. London, Ontario, Butterworth-Heinemann, 1999. Pages: 560. Cost: \$125.00.

As an anesthesiologist who is involved in liver transplantation during my on-call time, it is with pleasure that I review this interesting and particularly well-written textbook. The publication is multiauthored and contains 22 chapters that are 15 to 30 pages in length. Contributors are respected experts in the field of transplantation. These authors are not solely anesthesiologists, but are also surgeons, intensive care physicians, immunologists, nephrologists, infectious disease physicians, endocrinologists, ophthalmologists, psychiatrists, pharmacologists, pathologists, and transplant coordinators. This multidisciplinary approach largely contributes to the strength of this book. Moreover, all of these experts point out what is really relevant to the clinical practice of transplantation within their particular field of interest. Each chapter begins with an outline, which provides the reader with an opportunity to scan the content for a desired topic. All of these elements make this book a particularly useful and pleasant tool for physicians who are interested in transplantation medicine.

The early chapters discuss the history of organ transplantation, organ resources, the determination of brain death, and the management of organ donors. The first chapter is very interesting and deserves particular comment. This chapter considers both the North American and European perspective regarding organ resources. The two following chapters are well structured and essential information is summarized in tables. The next chapter is dedicated to mechanical devices—a bridge to transplantation. Although very well illustrated, this chapter considers only heart transplantation. A note considering the artificial liver could have been an interesting addition.

In the core of the book, some seven chapters review the specific organs used in transplantation: the heart, lung, lung, liver, small bowel, pancreas, kidney, and cornea. These chapters are well organized, clear, informative, and easy to read. They follow approximately the same architecture: history, reason to perform organ transplantation, pathophysiology of the recipient, surgical technique, and anesthetic management. I have only a few regrets. First, there is no chapter that discusses bone marrow transplantation, a procedure that frequently involves anesthesiologists. In the anesthetic-technique section, there is no mention of the recent developments (e.g., the use of new volatile agents or opioids), but this omission is not a major problem. In the chapter regarding liver transplantation, there is no section dedicated to the particular problem of fulminant hepatitis and cerebral protection.

The final chapters span important topics related to transplantation, including intensive care unit management, anesthesia in the patient undergoing transplantation, nutritional support, hematologic and psychosocial considerations, immunosuppression, infectious diseases, pharmacokinetic, and ethical issues. These topics are well presented and are full of useful information. The degree of overlap in this book is surprisingly low.

In conclusion, despite a price that is relatively high, this book is worth the investment. *Anesthesia and Transplantation* contains a lot of information that is directly related to clinical practice and, therefore, should be available in the library of any department of anesthesiology in which transplantation procedures are performed.

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Neurologic and Neurosurgical Emergencies. Edited by Julio Cruz. Philadelphia, WB Saunders, 1998. Pages: 569. Cost: \$145.00.

This multiauthored, first-edition text is published under the auspices of the International Society for Neuroemergencies. According to the editor, a neurosurgeon, the goal was to integrate into a single volume the current basic and clinical sciences that guide the treatment of patients with neurologic or neurosurgical emergencies. The book is generally successful in this regard. The publication's single greatest strength is that it is a multidisciplinary treatment of the topic and, as such, it reflects the different but complementary perspectives of various specialists. The book's 20 chapters are written by 54 authors from specialties such as neurology, neurosurgery, radiology, anesthesiology, internal medicine, critical care, emergency medicine, pediatrics, rehabilitation medicine, and nursing. The chapters are generally well illustrated with useful tables, charts, and radiographs, and successfully place clinical management in the context of the available basic science. All of the chapters have a practical orientation, and whereas most are directed toward neurologists or neurosurgeons, anyone with an interest in neurologic emergencies will find an abundance of useful information.

The first few chapters regarding the evaluation of the patient with neurologic injuries and the cardiac and respiratory complications that are associated with acute neurologic diseases are thorough and well referenced. These are followed by 15 chapters that are devoted to specific acute neurologic disorders, nursing care, predictors of long term prognosis, and rehabilitation. The chapters about the pediatric patient, neuroemergencies during pregnancy, subarachnoid and intracranial hemorrhage, intracranial and pituitary tumors, neuromuscular diseases, brain trauma, and acute spinal cord disorders are well written and will be of particular interest to anesthesiologists. As with any multiauthored text, there is some inevitable variation in writing style between chapters; however, the editor does a good job of minimizing redundancy and maintaining consistency. The majority of the references are current, and many references of historical importance are included. Chapter 14, which does not contain a single reference published within the last 10 years, is an exception to this generalization.

A problem encountered when attempting to systematize the clinical management of patients who are severely ill is that the science, basic or clinical, that supports certain practices is often incomplete, conflicting, or is rapidly changing. This is certainly the case here. Statements about clinical management based on extrapolation of nonhuman data and clinical experience are common. To the book's credit, however, these statements are frequently accompanied by the admonition that such extrapolations are suspect and that proper studies are lacking. This is exemplified in Chapter 9, in which the authors discuss and