

James C. Eisenach, M.D., Editor

Manual of Pain Management, 2nd edition. Edited by Carol A. Warfield, Hilary J. Fausett. Philadelphia, Lippincott Williams and Wilkins, 2002. Pages: 407. Price: \$59.95.

With the continued growth and interest in the field of pain medicine, there has been a significant increase in the number of available texts on the subject. These written texts have ranged from those focusing on discrete circumscribed areas within the field to large, comprehensive reference textbooks. Furthermore, there is a varying degree of emphasis on research compared to the clinical practice of pain medicine. The text edited by Warfield and Fausett, *Manual of Pain Management: Second Edition*, attempts to provide a fairly concise review of the clinical practice of pain management geared in a "manual" or "handbook" approach. This new edition joins several other texts currently available that are written in a similar style.

In this second edition, the editors have organized chapter contributions from a multidisciplinary group of authors. Though a few chapters touch on the physiologic basis of pain learned from basic research, the primary emphasis of the chapters is on the clinical practice of pain medicine. The organization of the text is divided into the following sections: 1) Understanding Pain, 2) Pain by Anatomic Location, 3) Common Painful Syndromes, and 4) Pain Management, with this fourth section being the major emphasis. Interestingly, there are separate sections on "Pain by Anatomic Location" and "Common Painful Syndromes." This organization may be helpful in generating differential diagnoses based on location, such as the arm or leg, as one may see in the clinic or hospital setting. However, it becomes difficult to avoid some overlap with the chapters in the section of Common Painful Syndromes. As expected from the title, the largest section of the text is devoted on Pain Management. This major section is divided into the full spectrum of analgesic therapeutic approaches, including Medications, Injection Therapies, Physical Measures, Behavioral Therapies, Surgery, and Considerations in Pain Management. There are some minor contributions on more widely accepted complementary and alternative medicine-based techniques, though not extensive. In applicable chapters, there are often one or several case reports highlighting either the pain assessment process or analgesic treatment utilized. Also, a brief list of references and recommended readings are provided at the end of each chapter.

Expectedly, in a multiauthored pain medicine text, there are chapter biases that at times seem to reflect the specialty base of the author of that particular chapter. Some minor instances might include not mentioning a possible diagnosis on the list of differential diagnoses of an anatomic location or the use of an injection therapy approach that may not be commonly used by other pain specialists in the field. However, this multidisciplinary authorship approach does provide a wider spectrum of perspective, which is essential for today's modern practice of pain medicine.

In summary, this new edition would most likely serve the needs of resident and fellow trainees engaging in a pain medicine rotation, those preparing for a pain board examination, and clinicians seeking a primer on basic concepts of the clinical practice of pain medicine. This book is not meant to be a comprehensive reference text on pain, and should not be purchased for that purpose. When compared to other books of the same type, I think it is one of the better ones. For those at the training level, the material presented in this text will serve as a useful tool, in conjunction with excellent teaching by attending staff, to cultivate the education and interest of the next generation of pain medicine specialists.

Gilbert Y. Wong, M.D., Mayo Clinic, Rochester, Minnesota. wong.gilbert@mayo.edu

(Accepted for publication October 1, 2002.)

Textbook of Cardiothoracic Anesthesiology. Edited by Daniel Thys, Zaharia Hillel, Alan Jay Schwartz. New York, McGraw Hill, 2001. Pages: 1180. Price: \$195.00.

The *Textbook of Cardiothoracic Anesthesiology* is a well-written volume that should be included as an authoritative text on the subject. With all of the changes in our field, the task of editing a comprehensive, up-to-date text on cardiothoracic anesthesia is a daunting one; however, Dr. Thys and his colleagues have done a good job. The book is logically organized into preoperative, intraoperative, and postoperative concerns. Within this framework, the authors are able to describe not only the things that are common in cardiac anesthesia, but also some of the more complicated aspects of patient care. The chapters are clearly written and are easily understood by everyone from the first-year resident in anesthesiology to the practicing physician looking for a review of a particular topic.

Although the book is too long to be read by a resident during a one-month cardiac rotation, it is the appropriate length to be used as a text for a cardiac anesthesia fellow, or a practicing physician. The chapter entitled "Learning Cardiothoracic Anesthesiology" is extremely useful and provides the beginner with a framework upon which to build further learning in this area. The appropriate amount of emphasis was given to relevant topics, including preoperative testing. Topics less commonly discussed in the anesthesia literature, such as myocardial perfusion imaging, stress testing, and pulmonary function testing, are also included.

The chapter on the conduct of cardiopulmonary bypass could have been extended to include more information "from the perfusionist's perspective." Although the anesthesiologist is not the one operating the pump, a thorough knowledge of the perfusion apparatus is essential to the conduct of a successful cardiac anesthetic.

With more cases being done with "alternative techniques" (off pump, normothermia, transmyocardial revascularization, etc.) it would have been helpful to have had these areas covered more thoroughly. With problems such as heparin-induced thrombocytopenia and heparin resistance becoming more prevalent, these topics, as well as heparin alternatives and treatment options, should have received more attention.

The text makes extensive use of transesophageal echocardiography (TEE) images and has an extensive chapter devoted to the subject. Nevertheless, a cardiac anesthesia fellow needing a reference text to prepare for the certification in intraoperative echocardiography will probably want to purchase an additional book devoted solely to TEE.

With those few exceptions, I found the volume to be very helpful. It compares well to other "standard" texts on the subject (i.e., *Cardiac Anesthesia*, 4th edition. Edited by Joel Kaplan. Philadelphia, WB Saunders Company, 1999) and gives a different perspective in certain areas. It fills a niche for someone who needs a thorough review of cardiac anesthesiology and an overview of TEE, and should be helpful to everyone who reads it.

Bryant A. Murphy, M.D., University of Virginia Health System, Charlottesville, Virginia. bam9t@virginia.edu

(Accepted for publication October 1, 2002.)