Book Reviews

The Doctor and the Law, 2nd Edition

H.E. Emson. Butterworths Publishers 1989. pp. 240.
\$54.95
ISBN 0-409-88875-3

In the preface, Doctor Emson states that the objective of the book is "to be a guide to the non-specialist Canadian Medical Practitioner in Medicolegal relations." The book attains this objective by dealing with practically the full range of medicolegal issues that are of importance to Canadian physicians.

The book is subdivided into 13 chapters and includes notes and references. The first chapter concerns medicine and the law in general. It serves as an excellent introduction to the intricacies of the second chapter which deals with the specifics of licensing and the provincial colleges of physicians and surgeons as well as the federal and provincial laws that impact on the physicians and patients. Chapters 3 to 5 describe the courts and the types of evidence disclosed during court proceedings, and the functions of coroners. In Chapter 4, the subsection on presentation of evidence could be very helpful to physicians having to go to court. Chapters 6 and 7 deal with malpractice and negligence and consent. These two chapters serve as excellent references on the definition of malpractice and nature of consent. They should be required reading by all physicians. The remaining chapters are not useful to anaesthetists as they do not have immediate bearing on anaesthesia practice. The last chapter covers the field of bioethics, a topic that is coming to the forefront of Medicine.

The book succeeds partly in meeting its objective. Since health care is a provincial matter, some chapters can be skipped as they describe the law in "other" provinces. Consequently one has to pick and choose areas that pertain to one's specific situation. In this second edition "Hot" topics in the medicolegal area are discussed, e.g., do not resuscitate, AIDS, etc. These could be chapters by themselves but, at least there is enough to start a discussion. Who needs this book? Unless one has a "passion" for medicolegal matters, it belongs in the departmental library as a reference text.

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Anesthesia for Ophthalmic and Otolaryngologic Surgery

Kathryn E. McGoldrick, W.B. Saunders Company, Philadelphia, 1992. pp. 318. \$69.50. ISBN 0-7216-2837-0

Dr. McGoldrick and her contributors have produced a reference text that is lucid and provides adequate information to integrate concepts of basic science with clinical practice. The aim is to enable the practitioner to design a rational strategy (one that reconciles "how-to-do" with "why-we-do"). The new technology that is shared by our respective specialities is emphasized when preparing for and anticipating given clinical situations.

The chapter on intraocular pressure fails to speculate on important causes of increased intraocular pressure during regional blockade of the eye. The consequence of placing 10 ml of injectate, as advocated by Dr. Zahl in his excellent chapter, into the 30 ml semi-closed space of the orbit is considerable. Further, orbital decompressive devices can result in marked elevations in intraocular pressure (work in progress).

It is unfortunate that the chosen illustration of retrobulbar injection (Figure 18-6) shows the needle entering the lateral rectus muscle when basic principles suggest that the course of the needle should avoid contact with the muscles when entering the intraconal space. The path of the needle from the more commonly used inferotemporal approach should avoid this potential problem.

This is a very readable and clinically relevant textbook. I would recommend it for all anaesthetists and residents in training. It belongs in every department library.

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Baillière's Clinical Anaesthesiology: International Practice and Research; Infection and the Anaesthetist

C.P. Stoutenbeek & H.K.F. van Saene (Guest Editors). Baillière Tindall, London, 1991. pp. 266. £27.50/\$44.00. ISBN 0-7020-1524-5.

This book is a collection of 12 chapters reviewing various aspects of the pathogenesis, pathophysiology and management of perioperative infection. Although traditionally the realm of the surgeon and ICU physician, infection is becoming an increasingly important field for the anaesthetist,

as a growing number of patients presenting for surgery are immunosuppressed and/or have documented infections.

The first four chapters provide an introduction to basic concepts of clinical microbiology, and the effects of anaesthesia on the defense mechanisms of the gastrointestinal (GI), respiratory and immune systems. Chapter 5 discusses the importance of the GI tract in shock and multi-organ failure, emphasizing the susceptibility of this organ to ischaemia, the role of the "leaky gut" in allowing bacterial endotoxin absorption, and the usefulness of measuring the intramucosal pH of the stomach as an early indicator of GI tract ischaemia. Along similar lines, Chapter 8 reviews the role of selective decontamination of the GI tract in preventing the carriage of potentially pathogenic bacteria in this organ system. Other chapters discuss procedure-related infections, perioperative systemic antibiotic prophylaxis, anaesthetic management of the septic patient, postoperative pneumonia, aspiration pneumonia and AIDS.

This book is generally well written and interesting although there are a few disappointing chapters. The discussion of the effects of anaesthesia on the immune system is complicated and tedious to read, and the chapter regarding postoperative pneumonia fails to differentiate between postoperative pneumonia and postoperative pulmonary complications in general, and lacks clarity in several sections. Overall the book does not adequately correlate the basic information available regarding perioperative infections with aspects of anaesthetic management. In addition, the few sections which do discuss anaesthetic management fail to elaborate sufficiently on several controversial areas. This book cannot be recommended for the average anaesthetist, but would be useful for those working in an ICU environment.

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