Book Reviews

A Practice of Anesthesia for Infants and Children (2nd Edition)

Coté CJ, Ryan JF, Todres ED, Goudsouzian NG (Eds.), WB Saunders Co., Philadelphia, 1992. pp 544. (Hard-back cover). \$75.00 (US). ISBN 0-7216-3198-3

Seven years separate the first and second editions of this textbook. It has grown in size: from 24 chapters in 314 pages to 29 chapters in 544 pages. The 22 contributors are all from the paediatric anaesthetic group of the Massachusetts General Hospital, Boston and the contents reflect their experiences in that setting. The same format has been retained, so that basic physiology, pharmacology and clinical management of paediatric patients remain the essence of the book. All chapters have been updated (e.g., comments on transmucosal delivery of drugs in Chapter 6 now include the frequently used transnasal, oral and pulmonary routes of administration). Clinical problems such as blood conservation and fluid management, anaesthesia for children with congenital heart disease and neonatal emergencies are highlighted.

Quite new chapters on otorhinolaryngological and ophthalmological surgery discuss endoscopic laser surgery and its fire risks, as well as the troublesome problem of emesis after strabismus surgery in the ambulatory population. Emerging areas of organ transplantation and magnetic resonance imaging are also addressed. Drs. Polaner and Berde provide a particularly clear insight into postoperative pain management. They explain methods of pain assessment and outline their strategies for postoperative analgesia in children; as the trend towards continuous opioid infusions, patient-controlled analgesia and regional techniques gains momentum. The standing order sheets (reproduced on pages 458 and 462) used to document their patients' progress, identify the close physician involvement in providing a pain service.

There can be little criticism of such a comprehensive text. Few inconsistencies were found, but the dose of dantrolene of $2.5 \text{ mg} \cdot \text{kg}^{-1}$ *iv* currently recommended by Dr. Ryan (p. 423) is not the same as that given inside the front cover. Perhaps, more precise directives would be welcome on whether there is a need for oxygen during transport to the recovery room, how ancillary anaesthetic assistance should be organized and when "street-fitness" is achieved after ambulatory surgery. Once again, the four editors have produced a most welcome addition to the paediatric anaesthetic literature. There is every reason to expect that this second edition of "A Practice of Anes-

thesia for Infants and Children" will be as popular as the earlier version.

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Pain in Infants, Children, and Adolescents

Neil L. Schechter, Charles B. Berde, Myron Yaster (Eds.), Williams and Wilkins, Baltimore, 1992. pp. 691. \$90.00 (US) ISBN 0-683-075889

This is a multidisciplinary text of 691 pages with 72 contributors from 12 different specialties including ten authors affiliated with Canadian institutions. Two of the editors have combined qualifications in paediatrics and anaesthesia and all three are directors of the pain treatment services at their institutions.

The text is divided into three sections; theoretical background, interventions, and special pain problems in children. The theoretical background section deals very well with the developmental aspects of pain assessment and treatment and is also sensitive to the research that remains to be done. The intervention section provides an adequate review of current pharmacological interventions and delivery techniques including patient-controlled analgesia and continuous regional analgesia. In addition, "non-conventional" techniques such as hypnosis, TENS and acupuncture are also presented. The special problems section includes topics such as procedural pain, pain management in the emergency room, considerations of the burn patient, cancer pain and chronic pain syndromes such as headache and abdominal pain. While this is not a "block book," the editorial style has resulted in a text which is very readable and also a useful index which is appropriate for the rapid checking of doses and facts.

This book would be appropriate reading for any clinicians involved in managing paediatric patients with pain, in particular paediatricians, neonatologists, surgeons, emergency room physicians, and anaesthetists. It is a welcome addition to my personal library and should be added to any teaching hospital collection.

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Allergic Reactions to Anaesthetics: Clinical and Basic Aspects

E.-S.K. Assem (Ed.), S. Karger Publishers Inc. Connecticut 1992. \$236.00 (US) ISBN 3-8055-5489-3

This 15 chapter monograph is a collaborative work by a group of international investigators and clinicians. The objective of the text is to "give insight into the efforts ... devoted ... to a better understanding of the mechanisms of anaesthesia-associated allergic reactions and liver disease." The first chapter discusses some currently controversial issues in anaesthetic-related allergic drug reactions. The following chapters address mechanisms of anaphylactic/anaphylactoid drug reactions, laboratory and clinical methods to study and diagnose these reactions, prospective screening and its economic and medicolegal implications. A single chapter is devoted to anaesthesia-related liver disease. The editor states that "different approaches were pursued by different contributors and hence the differences in interpretation and views." In fact, terminology often varies from chapter to chapter and chapters overlap and contradict each other. The result is an inconsistent text which at times is confusing and difficult to read.

Well-written chapters include the introduction which highlights controversial issues, Chapter 6 which discusses biological tests for diagnosis of IgE-mediated allergy to anaesthetic drugs, and Chapter 8 on the diagnosis and treatment of anaphylactic/anaphylactoid reactions. The chapter devoted to anaesthesia-related liver disease is detailed, well-referenced and gives a complete overview of this rare problem.

Chapter 9 deals with skin tests in diagnosis of allergy to muscle relaxants and other anaesthetic drugs. The methods of skin testing described in some detail in this chapter are not considered advisable by North American standards. In any case, these tests should be performed by qualified allergists, not anaesthetists.

Do the authors succeed in their original objectives? This is not a basic textbook, but assumes a broad-based knowledge of immunologic vocabulary and investigative techniques. As a reference source, it is up-to-date and informs the reader of current controversies and areas of investigation. With these provisos, it may be recommended to the allergist involved with anaesthetic-associated allergic reactions or the anaesthetist with a special interest in allergy and immunology.

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