Book Reviews

Atlas of the Difficult Airway, 2nd ed.

Martin L. Norton (Ed.). Mosby-Year Book, Inc., 1996. 290 pages. \$145.00. ISBN 0-8151-6433-5

Dr. Norton devoted most of his career to the management of patients with difficult airways. In fact, he was the founder of the first and probably the only Difficult Airway Clinic in North America at the University of Michigan in 1987. The objectives of the clinic include the presurgical evaluation of potential or known tracheal intubation and to make recommendation for airway management for this group of patients. This book essentially is a synopsis of the experience and knowledge of the author in the management of patients with difficult airways.

The book covers many areas of airway problems with many contributors across the United States. The atlas is divided into three sections: (1) an introduction of the problem; (2) management of the difficult airway with different techniques; (3) applied clinical practice and case material.

This book is distinctively different from other airway management textbooks. It presents the authors' extensive experience with 300 high quality illustrations. Visual presentations are emphasised, and the chapters are brief and concise. Most of the techniques of intubations and airway adjuncts are briefly described. These include rigid laryngoscopies, stylets and guides, lightwands, rigid bronchoscopy, fiberoptic endoscopy, LMA, retrograde intubation, transcricothyroid jet ventilation, cricothyrotomy devices, and Combitube. The highlights of the atlas are the presentations and discussions of the clinical cases from the archives of Difficult Airway Clinic and other trauma centres.

In my opinion, this is a valuable library reference for both anaesthetists and trainees. The well illustrated case presentations will be particularly useful for preparation for oral or board examinations.

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Ambulatory Anesthesia & Surgery

Paul F. White (Ed.). WB Saunders, 1997. 918 pages. \$239.00. ISBN 0-7020-1799-X

Written by leaders in the field, Ambulatory Anesthesia and Surgery is a textbook devoted to the care of outpatients. The importance of this book is emphasised in

the foreword by the well publicised fact that "well over 50% of all elective surgery in the United States is performed on an ambulatory basis" – in many Canadian centres this figure has been exceeded comfortably.

The book is organised into eight sections with a total of 55 chapters and 119 contributors from countries ranging from Australia to Thailand with a majority from the USA. All the section editors have a broad-based knowledge of their fields. The book has a very nice non-glare crisp finish with clear text and well displayed figures and tables making it easy to read.

The book starts with "Organisational and Management Issues" with chapters on history, organisation, facility design, staffing and quality issues. The next three sections deal with "Preoperative Assessment and Preparation," "Surgical Considerations and Concerns" and "Pharmacologic Principles and Applications." There are separate sections devoted to "Assessing Recovery and Outcome," "Pediatrics," and "Medical Economics and Legal Issues." The last two sections make for some interesting reading. One section deals with "International Perspectives" and provides valuable insight into the practice of Ambulatory Anaesthesia in various parts of the world. It is interesting to note that a decrease in hospital beds is a problem faced in many countries and that ketamine is a widely used anaesthetic agent for paediatric anaesthesia in China. The last section deals with "Problem Oriented Case Studies."

A nice feature of this book is the alphabetical organisation of references at the end of the book rather than at the end of each chapter. This makes the book easy to read and minimises duplication. All the references are up to date and relevant.

Overall, Dr. Paul F. White has succeeded in making Ambulatory Anesthesia & Surgery a broad-based comprehensive textbook that is well written, succinct, well organised and makes for enjoyable reading.

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Chronic Pain Management: The Essentials

Paul A.J. Hardy. Oxford University Press, 1997. 87 pages. \$23.95. ISBN 1-900-151-855

When I first began to work in the Pain Clinic, I kept a copy of Abram's "Pain Clinic Manual" in my brief-

case for ready reference. Paul A.J. Hardy's "Chronic Pain Management: The Essentials" is small enough to fit easily into my white coat or even into a shirt pocket. According to the notes on the back cover, it is directed towards all medical specialties.

The book starts with a discussion of the anatomy, physiology and pharmacology of pain which is well written and as up to date as one can be in this rapidly evolving area. This includes a discussion of neuroplasticity. Pain measurement and classification of pain are also covered in this chapter.

The remainder of the book is devoted to treatment. This includes an overview and chapters on pharmacology, hyperstimulation techniques, anatomical techniques, psychology and physiotherapy. The chapter on pharmacology is very well-written and complete. The overview which describes the treatment of various conditions is too brief and, in my opinion, is poorly organised.

My major disappointment with this book lies in its failure to describe diagnostic criteria for any of the pain conditions (with the exception of back pain and headache). Complex Regional Pain Syndrome is mentioned but not described although causalgia is described briefly. It is hard to see how the non-pain physician can be expected to initiate a treatment or appropriate referral without being able to make a diagnosis. Conditions such as peripheral neuropathies are not mentioned at all in the book. There is no mention of diagnostic techniques such as CT or EMG.

There are areas in the book where the author makes statements that are clearly his opinion. For example on page 10 he states that the placebo effect "may occur in up to 100% of cases treated." On page 60 he discounts the use of guanethidine in *in vivo* regional blocks for sympathetically mediated pain (granted, a controversial topic). If these are his opinions or based on his experience, he should state so; if they are on the basis of published research, he should cite it. The book has no references and no bibliography, another weakness.

While this book has some positive aspects, unfortunately these are outweighed by many negative factors and this book will not find a place in my white coat.

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**Proceedings of the 7th World Congress on Pain.
Progress in Pain Research & Management Vol 2.**
Gerald F. Gebhart, Donna L. Hammond, Troels S. Jensen (Eds.). IASP Press, 1994. US\$65.00 (IASP Members \$48.75). 905 pages. ISBN 0-931092-07-8

The proceedings of the 7th World Congress on Pain (Paris, France) represent the key presentations & spe-

cial lectures. The overall central theme; the plasticity of the nervous system in response to tissue injury, is well reflected in the proceedings.

The Proceedings are comprised of 12 parts and range from psychological aspects of chronic pain to CNS plasticity and the nociceptor as a dynamic entity. The latter key sections clearly review the scientific aspects and clinical implications of sensitisation. This is a paradigm shift away from mediators and receptors associated with the inhibitory (i.e., opioid) pathways and towards understanding the excitatory nociceptive pathways.

A further section is on Neuropathic pain, an entity that is under diagnosed and sub optimally managed. However, it falls short in not addressing the important differences in management from nociceptive pain. The section on opioids does well to address the overlap of opioid pharmacodynamics and the excitatory nociceptive pathways, i.e., opioid tolerance. Even in the main focus of the section on pharmacology of pain control is the dissociation of analgesia and anaesthesia with low dose ketamine.

The major key issues are brought together well in McQuay's incisive discussion of "Do preemptive treatments provide better pain control?"

Overall, this volume reviews important developments of the neurobiology and pharmacology of pain, which await widespread clinical application. This is not found anywhere else under one cover. With the newly evolving rubric of the "perioperative physician" anaesthetists have become the perioperative pain experts. Closing this gap, between contemporary knowledge and clinical application may enhance patient care and our role in the perioperative system considerably. This volume would be a valuable reference for all practising anaesthetists especially those involved in postoperative pain management and deserves presence in the personal library of the full time pain clinician.

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