Book Reviews

Lippincott-Raven Interactive Anesthesia Library on CDROM (Version 2.0)

\$395.00 (US). ISBN 0-7817-1407-9

A full, detailed anaesthesia library on CD-ROM that contains practically any information you might wish for ordinary clinical practice would be nice to keep for ready reference purposes, at least if reasonably priced. The latest effort in this realm, Lippincott-Raven's bountiful Interactive Anesthesia Library on CD-ROM is a great product, although at \$395.00 (US), clearly not yet so inexpensive to buy on impulse.

Clinicians with limited book space (or who need electronic searching capability or electronic annotation capability) will find in this CD-ROM a limitless spout of anaesthesia information that includes seven textbooks as well as compact video clips of procedures (arterial line placement etc.) and even a "Lite" version of the rather fun Anesoft interactive anaesthesia simulator.

The centerpiece of the CD-ROM is Barash and Cullen's now quite popular *Clinical Anesthesia*, both in its full new (3rd) edition as well as in handbook synopsis format. Silverman and Connelly's *Review of Clinical Anesthesia* (2nd ed.) provides over 1500 interactive questions and answers. We are also offered Cousins and Bridenbaugh's *Neural Blockade* (2nd ed.) and Stoelting's *Pharmacology and Physiology in Anesthetic Practice* (2nd ed.). Practical anaesthetic management is further covered in the 3rd edition of Yao and Artusio's *Anesthesiology: Problem-Oriented Patient Management*. The assortment finishes off with *Textbook of Internal Medicine*, 3rd ed. edited by Kelley.

The textbooks are all formatted using Folio Bound Views and run in Windows and Macintosh systems. I tested the CD-ROM on a 90MHz Pentium without trouble, although I experienced a slight font rendering problem with the anaesthesia simulator. The CD-ROM should install on almost any 486 or Pentium.

Lippincott-Raven is to be congratulated for positioning itself at the top end of the anaesthesia, CD-ROM spectrum with this offering.

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Textbook of Neuroanesthesia with Neurosurgical and Neuroscience Perspectives

M.S. Albin (Ed.). The McGraw-Hill Companies Health Professions Division, 1997. 1,433 pages. ISBN 0-07-000966-X

This is a comprehensive text of 38 chapters written by more than 70 authors drawn from the fields of anaesthesia, neurosurgery, neurology, neurophysiology, radiology and psychiatry. The text begins with a chapter on the history of neuroanaesthesia, followed by eight chapters dealing with the basic neurophysiology which forms the underpinning for clinical practice. Clinical and neurophysiological aspects of neuropathological conditions (coma, cerebral ischaemia, neuromuscular diseases to name a few) are the focus of the next 10 chapters. The remaining 19 chapters discuss clinical management of the full range of neurosurgical diseases. Figures and diagrams are numerous and very well presented, adding greatly to a sometimes complicated text.

The authors are prominent experts who have prepared exhaustive and current reviews of their selected topics. This textbook can be likened to a collection of monographs, each of which is focused upon a subject relevant to anaesthetists treating patients with neurological and psychiatric diseases. This makes some chapters extremely strong and self-sufficient but, overall, leads to repetition and a lack of continuity common to many multiauthor texts. Thus, I found the textbook most useful when my clinical question coincided with a chapter written specifically on that topic (e.g., ECT, seizure surgery). For some other clinical questions (e.g., normal pressure breakthrough bleeding after AVM resection and hyperaemia following carotid endarterectomy) the text was less helpful.

The book is quite long and sequential reading would be a daunting task. It serves best as a reference text, although weaknesses in certain chapters make it insufficient to stand alone in this role. The strongest chapters would be very helpful summaries for senior residents preparing for their examinations. This textbook is a useful addition to a departmental or university library and will be very helpful to those of us who treat patients with neurosurgical diseases.

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Drugs in Anaesthesia & Intensive Care, 2nd ed.

Martin Sasada, Susan Smith. Oxford University Press, 1997. 402 pages. \$47.50. ISBN 0-19-2628720

This handbook of pharmacology has been written to provide concise information pertaining to the main pharmacodynamic and pharmacokinetic properties of the drugs most commonly used in anaesthetic and intensive care medicine practice.

One hundred and eighty drugs are listed in alphabetical order and by generic name. Each drug is presented in an identical format under the following headings: Uses, Chemical Description, Presentation (available preparation), Main Action, Mode of Action, Routes of Administration and Dosage, Effects, Toxicity and Side Effects, Kinetics, Absorption, Distribution, Metabolism, Excretion and Special Points. The use of these headings provides the reader with an organizational scheme which the authors believe would be helpful to candidates preparing for their written or oral examinations.

Although the information is presented in a user friendly manner, there are a number of glaring errors in the content – specifically with regards to information concerning antimicrobials e.g., Cefazidime was listed as useful against *gram negative Staphylococcus and Streptococcus*. The overall focus of the book is not directed towards surgical or critically ill patients. Much of the information is at a very basic level and there are a number of important drugs omitted from the text.

This book would be of value to an anaesthesia resident early in their training. The level of presentation requires very little prior knowledge or experience utilizing these drugs. It is doubtful this book would be deemed appropriate to a senior resident or qualified practitioner. It lists enough pertinent information to begin to use the described drugs, but not enough to use some of them safely or in the most effective manner.

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The ICU Book, 2nd ed.

Paul L. Marino. Williams & Wilkins, 1998. 928 pages. ISBN 0-683-05565-8.

The second edition of the ICU Book is a completely rewritten version of the original text (1991). The purpose of this edition is the same as that of the first: "to create a generic text for all adult intensive care units." The approach is predominantly problem-oriented, not disease-oriented, with a focus on the fundamental

principles of critical illness rather than individual subspecialty issues. The author addresses common day-to-day ICU problems; should you believe the BP cuff or the arterial line? It is not a detailed comprehensive multidisciplinary text, nor is it a pocket sized "cook-book."

This is a single authored paperback text, divided into 15 sections, which are subdivided into 53 chapters, each between 10 and 20 pages in length. At 928 pages it is somewhat bulkier than its predecessor (713 pages). There is little repetition and the individual chapters compliment each other. Each chapter briefly summarizes important basic principles in each particular field. Chapters from the previous edition have been rewritten and updated, and are grouped together in appropriate sections. For example, the section on Disorders of Circulatory Flow includes chapters on: Hemorrhage and Hypovolemia, Colloid and Crystalloid Resuscitation, Acute Heart Failures, Cardiac Arrest, and Hemodynamic Drugs. However, an overview chapter on Clinical Shock Syndromes would have been beneficial. New chapters in this edition include: The Threat of Oxidant Injury (nice *summary* but not clinically helpful), Analgesia and Sedation (good), The Immunocompromised Patient (too brief), Neurologic Disorders (too brief, adds little), Pharmaceutical Toxins and Antidotes (good), Drug Dosing Adjustments in the ICU (including drug interactions) (good). The style of writing is engaging and easy to follow. Each chapter has an up-to-date list of references, grouped according to subject, including recommended reference texts, reviews, and current literature. There is a complete index.

There are criticisms, some of which have been mentioned above. The author makes clear, decisive statements, backed by references, occasionally (rarely) these are contentious, i.e., patients should be removed from PEEP in order to measure wedge pressures!

Overall, criticisms aside, the fundamental principles discussed in this text are easily transferred to day-to-day ICU care. I feel this would be a useful book for junior house staff or those exposed to the ICU for the first time. A brief poll of residents on their first rotation in our ICU indicated that this book is a popular choice.

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Non-Standard Medical Electives in the U.S. and Canada

Kenneth V. Iserson. Galen Press Ltd, 1997. 150 pages. \$15.95 (US). ISBN 1-883620-12-0

This book, which might be better described as a catalogue, is a compilation of medical electives in a variety of institutions throughout North America. The author

has gathered the information by circulating a questionnaire to all Universities and Medical Colleges. Each entry has a concise summary of the pertinent points of the elective including fees, duration, availability of accommodation and contact persons.

The first chapter is a useful introduction particularly for medical students as to what to look for in an elective experience and how to find and apply for such an elective. The advice is practical and straightforward. This is followed by all the electives listed in alphabetical order by specialty. The index is cross referenced for students, residents or both. There are approximately 300 electives listed in all.

Most of the electives are for four-to-six weeks, and are offered primarily for medical students rather than for residents. The only anaesthesia entries are for Pain Management at schools in the US.

This book might be a useful addition to the Undergraduate or Postgraduate Office of the Faculty of Medicine as a reference for medical students and programme directors. I suspect it would be of little interest to anyone else, particularly in Anaesthesia. With the current constraints on elective time for undergraduate students many of these electives would not be feasible. With residency training programmes the elective time available would be more than adequate to cover most of the offerings in this book, but the usefulness of the electives towards completing a specialty training programme would be in doubt. The last issue about books such as this is to remember how rapidly they can become out of date. Availability of non-standard programmes tends to be a year-by-year thing. Many will disappear as quickly as they appeared.

In summary, this publication would be of limited use to an anaesthesia resident or staff members. It would be of interest to some medical students but, unfortunately, the curriculum in most medical schools has little available time for non-standard electives.

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