Book Reviews

Cardiogenic Shock. Diagnosis and Treatment

David Hasdai, Peter B. Berger, Alexander Battler, David R. Holmes. The Humana Press, 2002. 381 pages. \$135.00 (US). ISBN 1-58829-025-5

The book is one of a series called "Contemporary Cardiology". It was written by 41 authors, mainly cardiologists, from seven different countries. Only one anesthesiologist and six cardiac surgeons contributed to the book. This explains the dominant cardiologists' perspective throughout the text. The book is divided in seven parts of two to four chapters, with a total of 21 chapters. The first part reviews the various definitions of cardiogenic shock, the early studies on inotropes and vasopressors for its treatment and the prognostic markers of survival in patients with this condition. The next five parts discuss the various clinical presentations and therapeutic options of cardiogenic shock whether it is due to acute coronary syndromes (non-ST and ST-segment elevation syndromes), valvular disease or other cardiac conditions (myocarditis, pericardial diseases and congenital anomalies). The final part gives an overview of assist devices, artificial hearts and future approaches (cardiomyocyte transplantation, therapeutic cloning and tissue engineering) for treatment of shock and advanced heart failure. Overall, the book is well presented. It is a good review of the diagnostic and therapeutic approaches available in hospitals with full tertiary cardiac services. It summarizes many interesting results from important multicentre cardiology trials of the last decade: global use of strategies to open occluded coronary arteries (GUSTO-I, -II and -III) trials, should we emergently revascularize occluded coronary arteries for cardiogenic shock (SHOCK) trial and platelet glycoprotein IIb/IIIa in unstable angina (PURSUIT) trial. That information helps to understand how intervention cardiology and cardiac surgery have progressively increased their role in the treatment of cardiogenic shock, particularly when due to acute coronary syndromes. Unfortunately, the book has a few significant weaknesses. First, there is a lot of redundant information from one chapter to the other. Second, the specific treatments of shock are often covered superficially, with little details about risks and benefits associated with one treatment *vs* another. Finally, the book contains a few disturbing mistakes which raise doubts about the peer-review process: for

example, a dose of 100–150 $\mu\text{g}\cdot\text{kg}^{-1}\cdot\text{min}^{-1}$ (instead of $\mu\text{g}\cdot\text{kg}^{-1}$) of fentanyl is suggested for the anesthesia management of cardiac surgical patients. For those reasons, many anesthesiologists interested by the topic may have more intellectual satisfaction by reading major cardiac anesthesia or critical care textbooks.

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Oxford Handbook of Anaesthesia

Keith G. Allman, Iain H. Wilson. Oxford University Press, 2001. 1,139 pages. \$52.95 (CAN). ISBN 0-19-263273-6

This is the most comprehensive handbook I have encountered. It is packed with information on every one of its over 1,100 pages of small print. The pages are 10 × 18 cm and the book is over 5 cm thick. As such it is a heavy load for a lab coat pocket.

The book is designed to provide concise, practical information and advice. It does this admirably throughout its eight sections and 50 chapters. References are sparse but well selected. Protocols and guidelines are those of British and European origin. As well, British terminology (e.g., suxamethonium; group and save) will have some effect on the utility of the book for non-European readers.

Advice regarding management is generally clear and direct. It tends to reflect the opinions of the authors rather than reviewing differing perspectives from the literature.

There is a great deal of information and advice that is not commonly found, even in major anesthesia text books. There is a full page on perioperative guidelines for body piercing jewellery. Chapter 12, entitled "Rare Syndromes", lists the characteristics and key points for a very extensive list of congenital and other disease syndromes.

A large portion of the book is devoted to providing discussions of the issues related to the vast majority of available surgical procedures. Each individual description begins with a small table summarizing the procedure, the usual duration of surgery, anticipated amount of postoperative pain, patient position for the surgery, usual blood loss and practical techniques utilized for that procedure. The book is quite well indexed, making it quick and easy to find individual

topics and review the essentials with one to two pages of reading.

This is a book with strong applicability for trainees and experienced clinicians. I expect to continue to use it frequently.

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