Book & New Media Reviews

Pharmacology for Anaesthesiologists

J. P. Howard Fee, James G. Bovill (Eds). Taylor & Francis, London, 2005. 309 pages. \$119.95 CDN. ISBN 1-84184-236-2

This new compact pharmacology book, together with a companion text on physiology, is mainly aimed at anesthesiology trainees preparing for professional examinations. It is divided into 21 chapters, written by 14 contributors mostly from Belfast and The Netherlands. Chapters 1 and 2 cover pharmacologic principles, chapters 3 to 17 are dedicated to the major drug classes, and chapters 18 to 21 feature discussions on adverse reactions & drug interactions, drugs in special circumstances (such as pregnancy/lactation and organ dysfunction), volume expanders/artificial blood substitutes, and statistics/clinical trials. Overall, the text is presented in an attractive format, easy to read, and provides good coverage of current topics in anesthetic pharmacology, including nitric oxide, xenon, *in* anesthetic steroids, Org 25969 for rocuronium reversal, and toxicity of COX-2 inhibitors.

Conversely, perhaps due to the concise nature of the book, a number of other recent pharmacological developments of clinical interest are not covered. For example, opioids and non-steroidal anti-inflammatory drugs (NSAIDs) are combined in one chapter, and other analgesics such as α_2 adrenoceptor agonists, dextrometorphan, or gabapentin receive little discussion, as is the case for opioid-induced hyperalgesia or low-dose opioid receptor antagonists for enhancement of opioid analgesia. The chapter also highlights the European perspective of the book, as it does not include North American generic drug names such as meperidine ("pethidine") or acetaminophen ("paracetamol"); neither hydromorphone nor oxycodone are mentioned, in contrast to diamorphine (heroin). The NSAIDs section provides no discussion of pre-emptive analgesia, perioperative bleeding, or COX-3. In the antiemetic section, there is no reference to the Food and Drug Administration's recent "black box" warning for droperidol and associated implications. Whereas the chapter on adverse drug reactions contains a section on herbal medicines, it does not discuss the related issues of bleeding or cardiovascular depression.

In summary, this is a useful, albeit not inexpensive volume for any anesthesiology student or practitioner looking for a relatively short (and hence portable), highly readable pharmacology text. For more in-depth information and/or as reference for specialty examination preparation, however, readers may wish to examine more detailed texts, for example, those by Evers & Maze ("Anesthetic Pharmacology – Physiologic Principles and Clinical Practice – A Companion to Miller's Anesthesia", Churchill Livingstone, Philadelphia 2004; 700 pages; \$145.00 CDN; ISBN 0-443-06579-9) or Stoelting ("Pharmacology and Physiology in Anesthetic Practice", Lippincott Williams & Wilkins, Philadelphia; Fourth Edition due in October 2005; 850 pages; \$166.50 CDN; ISBN 0-7817-5469-0).

Stephan K. W. Schwarz MD PhD FRCPC
University of British Columbia, Vancouver, Canada

The Year in Anaesthesia and Critical Care Volume 1

J.M. Hunter, T.M. Cook, H.J. Priebe, M.M.R.F. Struys (Eds). Atlas Medical Publishing Ltd, 2005. 447 pages. \$119.95 (US). ISBN 1 904392 47 4

As pointed out by P.J. Simpson in the forward, the volume and range of medical information published daily precludes all but the pathologically obsessed from tackling the systematic analysis of this information necessary as a prelude to synthesis with clinical practice. Nonetheless, the need remains, and indeed grows; consequently also grows our collective reliance on such well-phrased appraisals as published by Hunter *et al.*

Originating in the United Kingdom with primarily European contributions, Anaesthesia and Critical Care 1 incisively reflects upon key issues of importance to anesthesiologists and intensivists in academic and community practice. Sections included in this issue are perioperative care, clinical pharmacology, monitoring and equipment, and critical care. Each section is preceded by a narrative synthesis of data published in this clinical year that is balanced and circumspect. Each is

followed by efficiently-parsed article summaries and insightfully-selected graphics, and concluded with summary recommendations.

The content of the text is internally consistent and coherent with the source literature. The editors are to be commended for these latter accomplishments. This text sets a standard for subsequent issues, is the beginning of a key reference series, and is recommended for anyone struggling to remain current and conversant (i.e., most of us in practice!).

Michael J. Jacka MD MSc FRCPC
University of Alberta Hospital, Edmonton, Canada