

## Book reviews

### **Hypertension essentials. Current concepts of cause and control**

*Theodore L. Goodfriend, MD.* Grune & Stratton (Academic Press, Toronto) \$33.25

This book lives up to its title. The presentation is arresting and although it is quite often colloquial (e.g., "critical brain areas are zapped. ..." p. 13) it is not offensively so. It is, in fact, a sprightly and refreshing approach to the concise and up-to-date presentation of an interesting and important topic. The chapters are short and succinct, the general pathophysiology of hypertension is intelligently treated and this forms a good framework for the rationale of treatment which is discussed under the headings of the various pharmacological agents which are employed. The occasional statement which may raise anaesthesiological eyebrows does not detract from the overall merit of the book. An example is the assertion that hypokalaemia potentiates the effects of muscle relaxants such as succinylcholine (p. 126). There are no specific references. However, a bibliography is provided for each chapter and, generally speaking, this seems comprehensive and acceptable.

This is a useful book for all anaesthetists in view of the increasing number of patients who are presented for anaesthesia and surgery during long-term treatment of hypertension. In addition, it is a handy reference for the management of acute hypertensive states in the perioperative period. It is also a good read, fascinating, annoying at times but always interesting. It is well worth the price.

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### **Anesthesiology, Continuing Education Review**

*Steven J. Slack MD, Thomas J. Dekornfeld MD.* Second Edition (1983), Medical Examination Publishing Co. Garden City, New York. \$25.00 US

The preface to this book states that it is intended for the student preparing for examinations and the title suggests it is intended for continuing education of the practitioner. It is most useful for the student,

allowing in a short time to check whether he has acceptable answers to at least 400 questions in the discipline of study.

The range of questions covers a wide spectrum with no omissions of major topics. Some minor topics are absent, e.g., no questions relating to the use of circuit systems other than a circle system.

Generally the answers are well written and organized. A number of answers omitted major points that should have been included. Examples of these are:

(1) p 181 – the management of bronchospastic disease omitted mention of the irritative effect of tracheal intubation or the sudden introduction of high concentrations of inhalation agents.

(2) p 232 – the hazards of carotid artery surgery omitted the possibility of air or plaque embolism or the common occurrence of hypotension or hypertension after induction and intubation.

For Canadian students, some of the legal questions would not be applicable.

A reference is cited for most answers and the majority of these refer to ASA Refresher Course Lecture notes of 1981, 1982, and 1983. These are no doubt the most up to date sources of information but there is some danger of the uncritical acceptance of these answers. Use of this book bypasses the concept of anesthesiology as a scientific discipline. In spite of this, it is a good book to check one's own reviewing process to make sure that no major omissions have occurred.

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### **An Integrated Approach to Monitoring**

Edited by: *J.S. Gravenstein, R.S. Newbower, A.K. Ream, N.T. Smith.* Butterworth Publishers, Woburn, MA. \$29.95 US

This book is a collection of essays about patient monitoring by the editors and 24 contributing authors. The subject-matter is divided into four sections. The first two discuss monitoring of the cardiovascular and respiratory systems. The next section reviews the mathematical modelling and

statistical techniques which can be used to integrate a large number of monitored variables into a coherent picture, and the last section examines monitoring from the point of view of the impact of complex monitoring systems on the people and the environment where they are used.

As this brief summary shows the range of topics discussed in this book is extremely wide, reflecting the diversity of authors; all the way from measuring alveolar pressure during high frequency ventilation, to the psychological factors affecting the vigilance of OR personnel.

The discussion is oriented towards questions like what to monitor and why, rather than the hardware or how, and is very much in the forefront of monitoring approaches up to and including artificial intelligence systems.

I enjoyed sampling this book and I think that others will too. It is a thought-provoking collection which should stimulate discussion among colleagues. Essentially, the book is the work of a group of physicians and invited experts discussing the current philosophies of monitoring and attempting to feel their way into the future, and as such will appeal to all those who must make decisions in the field of monitoring as well as those who will suffer the consequences of those decisions.

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**Management of epidural analgesia in childbirth**  
*B.A. Waldron*. Second Edition, Churchill Livingstone, 1983. (Academic Press, Canada) \$6.70

This concise, well illustrated and inexpensive text was written primarily for the use of midwives and obstetricians in Great Britain. Facts are presented very simply and clearly with emphasis on patient safety. Generally speaking the text is accurate but one can quarrel with several details, e.g., failure to mention the prophylactic value of a rapid infusion of crystalloid prior to epidural block. The lack of any references places a severe limitation on the usefulness of this book to physicians. There are minor difficulties with British terminology and an appendix on U.K. Midwives' Board Recommendations is irrelevant to Canadian practice.

This book was not intended for anaesthetists and it cannot be recommended to them. The anaesthetist needs to know far more about epidural anaesthesia than is contained in such a brief guide. The interested

obstetrician would do better to read a standard North American obstetric anaesthesia textbook. However, the Obstetric Nurse would find this book a useful introduction to epidural anaesthesia.

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#### **Bromure de vécuronium ou "Norcuron"**

*Viars, P. et Lienhart, A.* Librairie Arnette, Paris, 1983

Cette petite brochure de 148 pages contient une sélection de 11 conférences données lors des XVes réunions internationales d'Anesthésie-Réanimation au C.H.U. Pitié-Salpêtrière (Paris - Mars 1983). Ceci explique, en partie, pourquoi les éditeurs n'ont pas réussi à éviter certaines répétitions inutiles: par exemple, *les interférences médicamenteuses du vécuronium* sont abordées dans cinq chapitres différents, alors qu'il y a un chapitre (écrit par B. Eurin et S. P. Chin) qui porte sur ce même sujet.

L'aspect graphique est agréable, malgré le fait que l'on se sert de caractères dactylographiques. Les erreurs orthographiques sont peu nombreuses et plutôt reliées à des "erreurs de frappe": prépondérente (p. 9); trois (p. 139); à la page 51, alinéa 5, il faut supprimer 80 à.

Il est dommage que l'excellent chapitre de S. Agoston et A. Bencini (en anglais) contienne des figures non numérotées et, trop souvent, sans légende. Il est tout aussi regrettable que dans une œuvre d'emblée disparate et hétérogène, on n'ait pas songé à introduire un index alphabétique.

Le chapitre concernant le vécuronium chez l'enfant s'est entre-temps enrichi d'un article par Goudsouzian *et al.* (*Anesth Analg* 1983; 62: 1083-8). Aucune mention n'est faite à la pharmacocinétique du vécuronium chez les nouveaux-nés.

Malgré toutes les remarques sus-mentionnées, ce petit livre peut s'avérer très utile aux anesthésistes cliniciens qui veulent se familiariser avec ce nouveau curarisant... Il vient à propos de souligner que quelques-uns de nos amis français emploient le mot "curare" de manière plutôt vaste ou générique.

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**Guide pratique de la médecine d'urgence**

*Pr. Christian Virenque.* Edité chez Privat, Toulouse, 98 Frs

Ce guide est un recueil de textes qui "n'ont la prétention que d'aider les étudiants, les médecins praticiens ... les infirmières, secouristes, ambulanciers, à découvrir ou à mieux connaître la médication des secours".

En dehors de cette prétention d'aide dans les soins préhospitaliers, il nous semble bien difficile de trouver, dans notre contexte nord-américain, un groupe d'intervenants à qui cet ouvrage puisse s'adresser de façon convenable.

En plus de faiblesses évidentes dans l'orchestration de ce guide, nous avons décelé des lacunes profondes dans le fond, surtout en ce qui a trait à la réanimation cardio-respiratoire, le contrôle des voies aériennes et la ventilation artificielle, les priorités à l'examen primaire de la victime et sa réanimation.

Le chapitre 5, "conduite pratique à tenir", présente un intérêt certain mais la façon hâtive avec laquelle les sujets sont expédiés ne permet pas au lecteur d'en tirer un grand profit.

Le chapitre 6, "Pour en savoir plus", est certainement la partie la mieux constituée et la plus utile de cet ouvrage; cependant on ne peut, par ce seul chapitre, considérer cet ouvrage comme un apport notable à la littérature médicale.

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**Pharmacological basis of anesthesiology**

*Clinical Pharmacology of New Analgesics and Anesthetics. M. Tiengo and M.J. Cousins (Editors).* Raven Press, New York. \$39.50 us

This book is a collection of papers presented at the International Advanced Course on the Pharmacological Basis of Anesthesiology in Milan, Italy in November, 1982. It has been set in a variety of typefaces and the individual submissions have not been edited. Typographical and syntactical errors abound.

The title is somewhat misleading. Much of the information is not really new, or is basic rather than clinical pharmacology. Some papers present original research. Unfortunately, the methods are rarely presented in sufficient detail to permit critical appraisal of the results. Other papers are short

review articles. However, more comprehensive and authoritative reviews are readily available.

A few papers deserve special mention. There is a very lucid discussion of low flow anaesthesia. Preliminary human studies on the analgesic effects of systemically administered calcitonin and benzodiazepines given by the epidural route are presented. The data from these two studies indicate potential for development of new therapeutic modalities. A pharmacokinetically-based rationale for the use of intravenous drugs is excellent, although one must be familiar with basic pharmacokinetic principles to understand it.

In summary, this book has little to be recommended. Those with specific interests in one or more of the topics presented may find those papers of value.

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