
Book Reviews

Care of the postoperative surgical patient

John A.R. Smith, John Watkins. Butterworths & Co. Publishers, 1985. \$59.95 (us)

The authors of this book set out to provide "all clinicians interested in postoperative care with the specialist information necessary" to optimize management. This is a very ambitious task which the text largely fails to accomplish.

To some extent, information in chapter 2 (the case for patient-controlled analgesia), and chapter 4 (effects of anaesthesia and surgery on drug kinetics and action) may be considered specialist information. However, many of the other topics, particularly the section on fluid requirements are treated too superficially to be considered specialist information.

The section on cardiovascular and pulmonary complications fails to emphasize significant alterations in the mechanics of breathing in the postoperative patient.

The major strength of this book is that it is reasonably well referenced. It may therefore prove useful to clinicians who wish to have a brief overview of selected topics in postoperative care and it may also serve as a source of reference to other pertinent literature for physicians requiring more information on these topics.

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Textbook of anaesthesia

G. Smith, A.R. Aitkenhead (Eds.) Churchill Livingstone, 1985, \$50.50 (Academic Press Canada, Don Mills)

This book is a comprehensive textbook of anaesthesia with 42 contributors, the majority from the United Kingdom. It is intended to provide a study format and practical guide for anaesthesia residents in their early training.

The text begins with 14 chapters reviewing anatomy, physiology and pharmacology relevant to anaesthetic practice. It then discusses, in eight chapters, management of general anaesthesia including preoperative and postoperative considerations and one chapter is spent on regional anaesthetic techniques. The last 18 chapters discuss subspecialty areas of anaesthesia including the

intensive care unit and pain clinic. The book ends with twenty pages of appendices and a thorough index.

The chapters are well written and the printed text is crisp and easy to read. Figures and diagrams are frequently used and are well illustrated. References for further reading are included at the end of each chapter. The book is a total of 586 pages and bound in a single volume and soft cover.

Although one might be tempted to compare this book with "Anesthesia" edited by Miller, the objectives of the two books are different. Dr. Miller's book is intended as a current reference work for readers already familiar with aspects of basic anaesthetic practice. "Textbook of Anaesthesia" is offered as an initial reference book that lays the foundation for more advanced reading. Its length and detail are aimed at those spending several months in anaesthetic training. Written with British training programmes in mind, the book's information and approach to anaesthesia is equally applicable to North American training with the exception that partial pressures of gases are expressed only in kPa rather than the still common (in North America) mmHg.

The editors are to be congratulated on their book. It should be considered a library reference and suggested reading for new anaesthetic residents.

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Gas mixing and distribution in the lung

L.A. Engel, M. Paiva (Eds.) Marcel Dekker, Inc., NY, 1985. \$75 (us)

This book is the twenty-fifth volume in the series, "Lung Biology in Health and Disease" (series edited by Claude Lenfant). It is 416 pages long, clearly written, well illustrated, and supported by both author and subject indexes.

In its eight chapters, twelve respected contributors delve into most aspects of gas transport in the lung, including molecular diffusion, anatomical considerations, mechanisms of gas transport during high frequency ventilation, gas mixing and distribution, computer modelling of the lung, and comparative non-mammalian physiology (birds and fish).

Underlying physiological, physical, and engineering concepts are highly emphasized. For example, Chapter 6 develops equations to describe mathematically gas diffusion and transport in the airways.

Correlates to clinical anaesthesia are limited, but include areas such as the contribution of collateral ventilation during bronchial asthma, particle deposition during aerosol administration, and selected reference information (e.g., physical constants of radioactive gases used in regional ventilation studies). As well, basic areas of gas transport crucial to the practice of anaesthesia, such as regional distribution of ventilation, are well covered.

To the practising anaesthetist, this book may be occasionally useful as an up-to-date library reference to address specific questions in areas of gas transport. This multi-disciplinary volume will be enthusiastically received by the physician, investigator, physicist, engineer, or student with a particular interest in any area of the mechanisms of pulmonary gaseous transport.

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Aids to anaesthesia

M.J. Harrison, T.E.J. Hall, J.A. Thornton. (1) Basic Sciences – \$21.70; (2) Clinical Practice – \$18.60. Churchill Livingstone, 2nd Edition, 1984 (Academic Press Canada, Don Mills)

The stated intent of this book is to provide a review aid for postgraduate students in anaesthesia preparing for examinations. This two-volume soft cover text has a major appeal because it is easily portable and can be carried in a coat pocket, a feature which is not the trend of most anaesthesia textbooks these days. It has especially good descriptions of basic science principles of physics, mathematics, computers, and electricity. Its major flaw is a weakness in the clinical practice volume where there is superficial coverage of important material. In the pharmacology section of inhalation agents, the description of ether, chloroform, trichlorethylene and cyclopropane carry as much space as all other inhalation agents in use today, and no mention is made of this fact. The pharmacology of intravenous drugs is similarly superficial and brief. Material in the section of physiology is technically correct but says hardly a word about the clinical assessment of patients.

The section on anaesthetic equipment is weak in its omission of a description of the anaesthetic

machine, of how to check a machine prior to use, and ventilator descriptions apply only to British models seldom found in North America. There is no description of laser beams and the section on electrical hazards omits several major electrical hazards commonly found in anaesthetic practice.

In spite of the above comments this text is too detailed in the basic sciences to be considered a good book for undergraduate students. I would recommend the basic science portion as good material for pre-exam review because it is well-written and up to date.

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Intensive care manual 2nd edition

T.H. Oh (Ed.) Butterworths Publishers, Stoneham MA. \$29.95 (US)

The stated purpose of the 2nd edition of this intensive care manual is to provide practical, useful information for all those engaged in caring for the critically ill. This manual serves as a valuable bedside handbook for inexperienced clinicians or interns in intensive care. It is well organized, readable and the references are useful for trainees. However, experienced residents and staff physicians in critical care units will find the treatment of many complex issues to be very superficial. Brevity is achieved at the expense of important detail.

I expected to find a full description of risks and complications of invasive monitoring techniques. For example, the treatment of a ruptured pulmonary artery from a balloon-tipped catheter is not described. Suggested protocols for catheter insertion and culture techniques for catheter-related sepsis are not presented. Two important topics, transportation of the critically ill and management of spinal cord trauma are only briefly considered.

These omissions and the assumption by the authors that the reader has basic knowledge in techniques of common procedures limits the usefulness of this manual for inexperienced physicians.

This manual cannot be recommended as a comprehensive overview but may be a useful introductory guide to critical care.

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