

Book & New Media Reviews



Kaplan's Cardiac Anesthesia 5th Edition

Joel A. Kaplan, David L. Reich, Carol L. Lake, Steven N. Konstadt. Saunders, 2006. Hardback, 1424 pages, 900 illustrations. ISBN 1416002537 / 9781416002536

The subspecialty practice of cardiac anesthesiology continues to evolve and encompass innovative and complicated surgical procedures, an expanding role of percutaneous catheter-based reparative and replacement techniques, and hybrid procedures. A comprehensive reference text is needed for the cardiovascular anesthesiologist to keep abreast of the changing subspecialty field. The fifth edition of Kaplan's Cardiac Anesthesia text fulfills these criteria.

The preface to the fifth edition outlines some of the changes that the editors have made to reflect current changes in cardiovascular care. The editors have recognized the large volume of material in this text and have sought to create a more user-friendly book by adding teaching aids. There are "key points" listed on the first page of each chapter and these points serve as an outline of the content. As well, teaching boxes have been interspersed throughout the chapters with summaries of important points. For the most part these teaching aids are effective and also provide good synopses for the reader. The text is divided into eight sections organized much like previous editions.

Section I: Past, Present and Future, a new addition, includes very timely chapters outlining the future of cardiology, with reference to the role of percutaneous intervention in coronary, valvular and congenital pathology. Chapter 4 describes the future of cardiac surgery and anesthesia. This is a very informative chapter with many salient points on the expanding role of cardiac anesthesiologists as perioperative cardiovascular specialists involved in risk stratification, patient selection, fast-tracking protocols, and postoperative pain management.

Section II: Cardiovascular Physiology, Pharmacology, and Molecular Biology is a review and is mostly unchanged from previous editions. It has been updated to include a new chapter on Molecular Biology and its application to cardiovascular anesthesiology and perioperative cardiovascular care. This chapter is a general overview of the current state of

knowledge of molecular cardiovascular medicine with specific emphasis given to areas where clinical applications relevant to cardiac anesthesiology are anticipated. Preoperative Evaluation has expanded sections on interventional cardiology and the electrophysiology laboratory. Chapter 13 has an excellent review of anesthetic considerations for the Maze Procedure with or without concomitant valvular surgery.

Section IV: Monitoring. Chapter 15 [introduction to transesophageal echocardiography (TEE)] has been revised and updated. A comprehensive guide to intraoperative multiplane TEE examination is included. There are new sections on myocardial ischemia monitoring, three dimensional echocardiography and stress echocardiography. Chapter 16 is a new chapter outlining intraoperative clinical decision-making utilizing TEE. Clinical case studies have been included to illustrate the decision-making process. Chapter 17 is a synopsis of the newer simplified monitors of neurologic function that can be employed by the cardiac anesthesiologist. The information presented is practical and current to FDA approved devices only. Chapter 18 "Coagulation Monitoring" is new. It is a review of the mechanisms of normal coagulation, the effect of cardiopulmonary bypass on these mechanisms, and the laboratory and point of care testing available to monitor coagulation parameters. The chapter is well written, concise and informative. The information presented on thromboelastography (TEG) is particularly useful to the cardiac practitioner who uses TEG infrequently.

Section V: Anesthesia Techniques for Cardiac Surgical Procedures. This section contains two new chapters; chapter 21 (Minimally Invasive Surgery) and chapter 27 (New Approaches to the Surgical Treatment of End-Stage Heart Failure). Chapter 21 does not discuss the various endovascular procedures under development but focuses on the anesthetic implications of surgical procedures with some type of incision. Chapter 27 is an excellent review of surgical management of heart failure including mechanical assist devices.

Section VI: Extracorporeal Circulation has detailed and concise chapters (chapter 30) on organ protection during CPB.

Section VII: Postoperative Care has excellent chapters on Postoperative Cardiac Recovery and Outcomes (chapter 32) and Pain Management for the Postoperative Cardiac Patient (chapter 37). In chapter 37 the information presented on available multimodal analgesia techniques is detailed and inclusive. There is a good review of the latest scientific reports detailing the use of regional anesthesia and analgesia perioperatively for pain management in cardiac surgery.

The final section, Section VIII, reviews Practice Management. This section provides the cardiac anesthesiologist with a framework for evaluating quality of care in cardiovascular surgery and training guidelines for cardiovascular anesthesiology and for transesophageal echocardiography.

This fifth edition is the most comprehensive and up-to-date reference text of cardiovascular anesthesiology currently published. It provides an excellent review of the current scientific foundations on topics important to the subspecialty of cardiac anesthesiology. It deftly combines scientific knowledge with the clinical foundations of practice. This is a recommended reference textbook for every subspecialty cardiac anesthesiologist.

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Pain in Older Persons. Progress in Pain Research and Management, volume 35

Stephen J. Gibson, Debra K. Weiner. IASP Press, 2005. Hardbound, 432 pages. \$81.00 US. ISBN 0-931092-59-0

The world's ageing population and the issues surrounding chronic disease management have enormous implications on the evolution of healthcare services around the world. As one of the most prevalent health problems affecting the elderly, persistent pain has profound negative impact on physical functioning, psychosocial health, and quality of life. Numerous differences in physiology, social and psychological circumstances bring unique challenges to medical practitioners in the understanding, diagnosis and management of pain in the elderly. In recognition of this problem, the International Association for the Study of Pain (IASP) first published a volume entitled *Pain in the Elderly* in 1996.

Given the significant progress made in the field over the last ten years, IASP has recently released a second publication on this topic entitled *Pain in Older Persons*. This timely publication offers a comprehen-

sive summary of the successes and limitations of our current knowledge on such areas as the epidemiology and neurobiology of pain, appropriate animal models, age-related psychological and cognitive differences in pain perception, appropriate pain and functional assessment tools, and end-of-life issues. Age-specific issues associated with treatments such as oral analgesics, procedural and physical therapy techniques, cognitive-behavioural therapy, complementary and alternative medicine applications, and multidisciplinary pain management clinics are discussed. Discussions on disorder-specific evaluation and management are focused on common pain presentations in the elderly such as low back pain, neuropathic pain, postoperative pain, and cancer pain. This volume serves as a valuable resource to update the field as a whole and to provide much needed current information on the appropriate management of pain in the elderly.

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ERRATA

In the manuscript entitled: "Ultrasound guidance improves success rate of axillary brachial plexus block" published in the March 2007 issue, *Can J Anesth* 2007; 54: 176–82, in Table II on page 180, the count of successful surgical anesthesia without supplementation should read 61/64 instead of 59/62 in group US, with no change in either the percentage (95%) or the *P* value (0.07). The publisher apologizes for this error.

In the manuscript entitled: "Influence of injection rate of hyperbaric bupivacaine on spinal block in parturients: a randomized trial" published in the April 2007 issue, *Can J Anesth* 2007; 54: 290–5, the printed article does not have identified page numbers. The publisher apologizes for this error. The correctly identified page numbers for this manuscript appear online at: www.cja-jca.org.