

Anaesthesia for Patients with Endocrine Disease

Edited by MFM James. Oxford University Press 2010

ISBN: 0199570256

This first edition, 266-page hardback book is written by an international collection of authors and edited by MFM James, Professor of Anaesthesia at Groote Schuur Hospital, Cape Town. It will prove a useful reference text for many but its target audience is primarily consultant and trainee anaesthetists. It draws together a wealth of information some of which is not easily found elsewhere and throughout educates by placing clinical advice squarely in the context of its underlying science.

Its eleven chapters consider topics ranging from basic science to the management of patients with endocrine disease for both endocrine and non-endocrine surgery. The opening chapter revises some relevant molecular biology but rapidly progresses to a more clinically orientated examination of the role of endocrinology in the stress response. The subject is remarkably readable despite containing a good level of detail, which is a tribute to its clarity and structure of presentation, traits present throughout the book.

Thirty pages are devoted to the perioperative management of patients with diabetes mellitus and include a useful update on the pharmacology of newer oral hypoglycaemic agents and insulins, as well as a review of the effect of diabetic control on postoperative outcomes.

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Six of the book's eleven chapters focus on anaesthesia for surgery involving particular endocrine pathology (pituitary, thyroid, parathyroid, carcinoid, adrenal cortex and medulla). These chapters follow a broadly similar format of anatomy and physiology, pathophysiology, diagnosis and anaesthetic management. The reader is drawn along a path from revision of underlying science to practical anaesthesia, but for those in search of a quick answer each chapter ends with a concise summary of "Key Clinical Management Points". The typical case presentation of the anaesthetic management of a patient with a

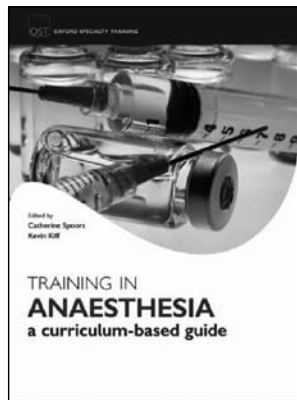
small bowel carcinoid tumour was valuable surrogate experience for a reader with little clinical familiarity with this condition and additional examples would be welcome additions to a future edition.

Two chapters (Endocrine Emergencies and Hormones as Pharmaceutical Agents) were not expected as they are perhaps more relevant to critical care medicine than anaesthesia. The management of endocrine emergencies is certainly amply covered in other more readily available texts and, while the use of hormones (primarily glucocorticoids and vasopressin) in anaesthesia and critical care medicine has been included for completeness, these chapters will be out of date a long time before the rest of the book.

Finally, "Endocrine Surgery: a personal view" gives a surgeon's perspective on some different aspects of endocrine surgery and although there is some overlap with the content of previous chapters there are several insights that would be hard to glean from other anaesthetic texts.

There are plenty of illustrations throughout the book and a handful of colour plates are included. The radiology and histology are refreshingly well reproduced but some of the medical illustration is disappointing as it ranges in standard from really very high (chapter 2, the pituitary) to distinctly amateurish (representations of the adrenal gland, for example) which is unfortunate in a book of otherwise high quality. One hopes they will be revised in the second edition.

Although it is too detailed (and at £75, too expensive!) to become core reading for the final FRCA examination, many anaesthetists (both generalist and endocrine) could benefit from thumbing through a departmental copy of this well written book as it is much more than a simple "how to" for endocrine anaesthesia.



Training in anaesthesia

Edited by Catherine Spoons and Kevin Kiff. Oxford University Press 2010

ESPN: 978-0-19-922726-6

I was halfway through my revision for the Primary FRCA exam when I was asked to use and review this book. Until then I had found it quite frustrating having to switch back and forth between different textbooks and various online materials. I was absolutely thrilled to discover a textbook (finally!) that has it all.

This text is innovative in the way it combines basic sciences with clinical knowledge, as well as describing practical applications of a given subject or system. It has made it much easier for me to digest the information and relate the basics to my daily practice.

The authors have been very disciplined and each subject is limited to two pages - the first with text and the second with diagrams and figures. Only relevant information is included which makes revision more manageable and less overwhelming. The sections on physics, strong ion difference, closing capacity, gas transport and exchange, the cardiac cycle, statistics and pharmacokinetics are very well written. Anatomy relevant to anaesthesia is included and presented in a concise and friendly way. There are great practical sections that, whilst less relevant to FRCA revision, are crucial for clinical practice.

The visual layout of the book is excellent - the colourful diagrams have the relevant information highlighted and plenty of space for notes. It is printed as paperback in a small font and is therefore easy to carry around. This text is full of facts presented in a digestible way to aid the revision process and most of the factual knowledge needed to successfully get through the primary FRCA are included.

My only criticism is that there are a rather high number of spelling mistakes that were missed during the editorial process. Examples include muscuocutaneous (musculocutaneous, page 121), circulating (circulating, page 238), phenoxybenzamine is an antagonist not agonist (page 238), Bainbirdge (Bainbridge, page 256), 'closure of the aortic valve at the start- ... printed twice (page 253).

Compared to other textbooks this book is very reasonably priced and well worth the price. I regret not having it sooner.

Overall this book is a great "fusion" textbook and I would definitely recommend it to all trainees entering their core training years.

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