
An interesting book and worthwhile; one man's experience and opinion—it's refreshing. He writes clearly and simply of things he has experienced and thought about in often unorthodox but imaginative ways. It is not comprehensive but doesn't pretend to be. It does cover points (most of them very practical) sometimes not covered by standard, more traditional, texts, but also omits or glosses over important material found in these texts. There are new insights for almost anyone, concepts that seem not only innovative but sound. Often he simplifies too much, and sometimes vague instructions are given when more exact details are desired. On occasion he gives anatomic descriptions that are redundant if you know the anatomy, and inadequate if you don't. There is something in this book for students, nurses, residents and experienced surgeons. It is incomplete by itself without other informational resources (preferably through direct experience as well as didactic study and reading). He shoots down some "holy cows" (e.g., "A chest tube never causes emphysema")—to the pleasure of many surgeons who will agree with him—things that have not yet been deleted from the texts, but should be.

This book impacts intelligence and perceptiveness, sometimes too much confidence, but is logical and well worth reading.

DAVID H. DILLARD, M.D.
Department of Surgery
BB-133 University Hospital RF-25
Seattle, Washington 98195

Anesthesia in Obstetrics: Maternal, Fetal, & Neonatal Aspects.

Following a hiatus of eight years, two American texts on obstetric anesthesia have been published within the last 12 months. The first was Abouléish's Pain Control in Obstetrics. This, the second, is divided into six sections that cover all anesthetic, obstetric and fetal-neonatal aspects important to the practicing anesthesiologist. Section I reviews maternal and perinatal risk factors, morbidity and mortality, as well as preanaesthetic evaluation and preparation. Section II deals with the physiology of pregnancy, labor and delivery, placental drug transport, and the pharmacology and complications of local anesthetics. Sections III and IV discuss the various methods of pain relief. Section V is devoted to maternal complications from both anesthetic and obstetric perspectives, and Section VI to fetal and neonatal physiology and pathophysiology, as well as to resuscitation of the newborn.

The book is written in its entirety by one author and, consequently, is executed in a uniform style that is concise and precise. Paper, printing, and illustrations are of good quality. Misinformation is minimal, although there are a few areas in which mention of contrary opinions might have been advantageous, such as the extent of sympathetic blockade following epidural as compared with spinal analgesia.

I thoroughly enjoyed reading this book, and was most impressed with the wealth of information presented in its 430 pages of text. The author has done a commendable job. My only complaint is the cost; although the book is in constant demand in our departmental library, most of our residents find it too expensive to purchase for their own use.

GERTIE F. MARK, M.D.
Department of Anesthesia
Albert Einstein College of Medicine
Bronx, New York 10461


Judging by the amount he travels, Sylvan Shane must be a dean or departmental chairman or something pretty close. Come to think of it, he can't be a dean or chairman, because he is able to find time to write about his tours. For anesthesiologists incomparably the greatest interest attaches to his account of a one-month's visit to China. This occupies about a third of the book, and eventually takes us bedside to the scene of acupuncture for major surgery in the Tsien Provinical Hospital. Dr. Shane is a professional dentist-anesthesiologist, and his eyewitness descriptions of a bilateral oophorectomy, a mitral commissurotomy, and a craniotomy and hypophysectomy are obviously written by a person aware of many of the potential problems. The efficacy of acupuncture anesthesia in these particular cases cannot be questioned, and I strongly recommend that those who would like to form their own opinions buy the book for this reason, if for no other.

But there are other reasons too. Hiether and yon we are able to vicariously enjoy experiences we would like to have shared, and some we are glad to have been spared, and then there are the author's opinions, not numerous or subtle, but always strongly, interestingly, and even entertainingly voiced.—B.R.F.

Second International Symposium on Malignant Hyperthermia.

The First International Symposium on Malignant Hyperthermia was held in 1971. The written account of that Toronto meeting was more than two years in coming to print, but as reviews of that time indicated, it was a well received and, indeed, anticipated text. The excellent editorial guidance over both the papers and the accompanying discussion transcriptions produced a cohesive and authoritative volume that was more than the "proceedings" of a meeting. In particular, the edited transcripts provided a sense of immediacy for those who could not attend and focused on the exchange of ideas among the various participants. While there was concordance in many areas, there were also disagreements. The achievements chronicled in that volume were the acceptance of the porcine experimental model, agreement on the muscle as the site of the pathology, recognition of the genetic transmission and confirmation of the special relationship of this disorder to anesthesia.

In the six years that have intervened since that first symposium, a great deal of scientific investigation has been directed at this disorder, which, as Dr. Denborough states in the Foreword of this second volume, "is the most common cause of anesthetist-induced death in North America." Dantrolene, unmentioned in the
Pediatric dentists also educate their patients and the patient’s parents about the importance of oral health and preventative oral health care. Adam Shisler, DDS. Houston ’12 Associate Pediatric Dentist, Cammarata Pediatric Dentistry Group Houston, Texas. Why did you choose to pursue this career path? Although I had no family members in dentistry, I had a really good mentor in high school that was a dentist. I was looking for something that was not engineering, where I could work with people, run my own business and just socialize while I was doing a job that helps people. This is what my