
THE third edition of Obstetric Anesthesia Handbook presents a concise and current review of obstetric anesthesia that is easy to read, from beginning to end, as well as a quick clinical reference. The fact that the text has only one author allows for very little redundancy, as is often found in books written by several authors. There are a reasonable number of graphs and tables to supplement the text, and appropriate clinical pearls are italicized in each section to highlight the important aspects of each area.

Datta’s handbook is outlined in a very readable fashion beginning with a chapter on maternal physiology during pregnancy, labor, and postpartum. The next three chapters focus on maternal and perinatal pharmacology, emphasizing local anesthetics and drug interactions during pregnancy. The chapter on local anesthetics is concise and clinically useful, particularly to training practitioners. Uteroplacental circulation with an emphasis on the implications of those pharmacologic agents that alter blood flow is addressed in chapter 5. Datta focuses on labor and delivery in the next six chapters, including a review of nonpharmacologic options as well as systemic agents for labor analgesia. Fetal monitoring and the long-term effects of a variety of analgesic techniques on neonates are included.

State of the art options for regional anesthesia for labor are described in chapter 11, including a thorough summary of potential complications. An elementary review of the anatomy of the epidural space and the site of action of anesthetics is very clear to the novice provider. Advantages and disadvantages of spinal, epidural, and general anesthesia for cesarean section are outlined and their techniques clearly summarized in the subsequent chapter.

Chapter 13 is devoted to high-risk pregnancy. The chapter begins with advise on managing regional and general anesthesia for high-risk conditions. This extensive section is subdivided to include descriptions of hemorrhage, pregnancy induced hypertension, diabetes, cardiac and respiratory disease, neurologic problems, malpresentation, prematurity, multiple gestation, and a variety of other miscellaneous disorders. This chapter discusses a broad array of obstetric conditions addressing the anesthetic implications and guidelines for their management. There is a particularly useful summary of antihypertensive therapies before general anesthesia for the preeclamptic patient. These ninety pages are a good introduction to the pertinent anesthetic issues surrounding high-risk pregnancy.

Neonatal resuscitation is covered in chapter 14 very clearly, with current recommendations from the American Heart Association. Anesthetic management for postpartum tubal ligation, in vitro fertilization, and anesthesia for nonobstetric surgery in the parturient is summarized in the next three chapters. The handbook concludes with a discussion of morbidity and mortality and includes the Practice Guidelines from the American Society of Anesthesiologists (ASA) task force on obstetric anesthesia. Dr. Datta intends this new edition of his earlier work as a current and clinically useful resource for training anesthesia care providers as well as more experienced anesthesiologists and obstetrician-gynecologists. I believe he has met these goals.

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A “TEXTBOOK” usually implies a classic; an authority; an enormous, systematic, organized tract of information, which of course takes a lot of effort to just read over. This book, Textbook of Neuroanesthesia and Critical Care edited by Matta et al., is traditional, but has a different approach. The book consists of five sections, from basic science such as anatomy, neurophysiology, and neuropharmacology, to clinical application, such as clinical neuromonitoring and anesthesia management. Each section contains a varying number of chapters, depending on the context. This book did cover most neuroanesthesia subjects.

In each chapter, the authors start with a content list, and then follow this with text describing the basic concepts and applications of the subject matter. I was impressed with the authors skillful, yet simple, descriptions of the complicated issues involved in basic science, clinical anesthesia, and intensive care. The book emphasizes key issues that have significant clinical relevance. There is a summary at the end of each chapter. Furthermore, each chapter has less than 10 pages, which surely makes the reading more efficient. I am sure that most readers will find this a more readable book than most neuroanesthesia books. There are many tables, figures, and diagrams throughout this book; these excellent illustrations certainly increase the book’s value, by making complicated issues simple and easy to understand. Finally, this book updates the most advanced knowledge and techniques in neuroanesthesia and intensive care, and contains a more complete reference list. There are no specific references for repeated topics within the book; this is probably editing-related and is only a minor problem, however, on the other hand, this book would not serve as a good reference book for some specific and detailed clinical anesthesia applications. At the cost of $119.00, it is less expensive to purchase a textbook that has a complete context of neuroanesthesia. I would recommend this book to residents, CRNAs, and medical students who are interested in neuroanesthesia—it is an excellent introductory textbook.

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