

Book and Multimedia Reviews

Manual of Office-Based Anesthesia Procedures

Shapiro FE, ed. Philadelphia: Lippincott Williams & Wilkins, 2007. ISBN 13: 978-0-7817-6908-2. 200 pages, \$44.95.

This 200-page paperback volume is an attempt to compile the information necessary for the safe practice of anesthesia in an office setting. Most of the chapter authors are from Beth Israel Deaconess Medical Center in Boston, and the text often reflects their specific practice. The expected topics are addressed, with varying degrees of success. The general principles of making office-based anesthesia safe, pleasant, and comfortable recur in many chapters. The first several chapters provide the background, discuss the growing popularity of office procedures, and review many of the American Society of Anesthesiologists Guidelines applicable to ambulatory and office practice of anesthesiology.

The chapter on preoperative evaluation acknowledges potential difficulties in obtaining all of the information appropriate for evaluating a patient. Preanesthetic history, physical examination, laboratory testing, and medications, including herbals and dietary supplements, are discussed. Factors influencing choice of anesthesia are addressed in chapters that review safety information, the ASA Closed Claim Project, and specific anesthesia agents. Several examples of the authors' anesthesia protocols are included. Discussion of intraoperative monitoring reviews the parameters mandated by the ASA, their implications in patient care, and methods of obtaining the desired information. There is no discussion of monitoring equipment specific to the needs of the office-based practice.

Four chapters discuss various surgical procedures in the office-based setting. These provide a reasonably thorough overview of the surgical procedure and possible complications, the anesthetic requirements, and some suggestions for anesthetic management. One of the chapters centers on ophthalmology, with discussion of commonly used blocks, but does not address cataract surgery under topical anesthesia at all. The chapter on cosmetic surgery for the patient who has lost massive amounts of weight pushes the limits of safe office-based practice.

Control of pain, both intraoperative and postoperative is given its due. A chapter on traditional pain control is thorough in the discussion of IV and oral medications, nerve blocks, and the complications of inadequately treated pain. A separate chapter addresses mind-body therapies under the title of alternative pain control. Recovery and discharge are discussed in general ambulatory terms. The requirement for invasive monitoring capability in recovery areas seems beyond the range for an office-based practice. Eleven appendices reproduce ASA guidelines, statements, and recommendations, the difficult airway algorithm, and cardiopulmonary resuscitation algorithms.

This book has both the advantages and disadvantages of a multiauthored text. Several of the chapters are very well-written and address their topics efficiently. Others are superficial or tangential and vary greatly in the amount of detail provided. There is an excessive amount of repetition. Some are valuable for emphasis: important information can be found in both text and boxes. In other cases, tables are repeated, either exactly or in alternate forms, in separate chapters. The level of emphasis is inconsistent from chapter to chapter.

The *Manual of Office-Based Anesthesia Procedures* succeeds in summarizing the existing guidelines and recommendations for safe anesthesia care in the office setting. Many of the common office surgical procedures are described in terms useful to the anesthesia provider. Drug choices and anesthetic techniques that have been successful for the authors are described in detail. The book could be a useful source of guidance for the practitioner starting an office-based practice.

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Anesthesia in Cosmetic Surgery

Friedberg BL, ed. New York: Cambridge University Press, 2007. ISBN 978-0-87090-0. 263 pages, \$95.00.

Anesthesia in *Cosmetic Surgery*, edited by Barry L. Friedberg is a comprehensive textbook for those who provide anesthesia services to patients undergoing cosmetic surgery. While much of its focus is on anesthesia for office-based cosmetic surgery, the scope is sufficiently broad to cover hospital-based practices, pediatrics, and related topics such as regional anesthesia.

Laid out in three distinct sections, the book is well organized. The first section thoroughly directs the practitioner through the specific practice of propofol-ketamine (PK) intravenous anesthesia. Dr. Friedberg painstakingly elucidates the "do's" and "don't's" of his "minimally invasive anesthesia" (MIA) technique. He strongly recommends that the anesthesiologist develop a close working relationship with the surgeon, and that patients be carefully selected for these extensive and often lengthy procedures. At times, the author is self-promoting in suggesting that the benefits of MIA (a 0.5% incidence of postoperative nausea and vomiting) outweigh all other concerns. The recipe is somewhat formulaic. The author states without references that patients weighing between 90 and 250 pounds have an approximately equal number of NMDA receptors, and that therefore they all should receive the same 50-mg dose of ketamine at the onset of "minimally invasive anesthesia."

From the perspective of patient safety, one must be wary of Dr. Friedberg's suggestion that 2000 mg of dilute lidocaine represents an appropriate dose for breast augmentation. The fact that 100 sequential patients received this dose without any adverse outcomes does not provide statistically sound evidence that the technique is safe. Fortunately, a later chapter by Dr. Adam Dorin succinctly reviews the safety issues surrounding megadose lidocaine for tumescent liposuction and body contouring. Dr. Dorin quotes conventional doses and reviews the toxic plasma levels and their clinical manifestations. Typical dilution quotients, peak serum levels, and pharmacokinetics are presented for doses as high as 35 mg/kg! In these cases, total epinephrine doses may reach 5 mg, again emphasizing the need for careful patient selection. The second major section is entitled "Alternative Anesthesia Approaches in Cosmetic Surgery." The methods presented are neither unique nor alternative to most practicing anesthesiologists.

They primarily resemble the typical practice of hospital-based anesthesia and are alternative only in the sense that they differ from Dr. Friedberg's MIA technique. Perhaps a better title for this section would be "Non-MIA Anesthesia for Cosmetic Surgery." In this regard, Dr. David Barinholtz offers a refreshing look at intravenous general anesthesia. In contradistinction to the editor, Dr. Barinholtz does not hesitate to use opioids when clinically indicated. He accurately points out that many plastic surgeons are reluctant to infiltrate additional local anesthetics once the surgical procedure has started. In addition, he discusses the appropriate use of general anesthesia with muscle relaxation during abdominoplasty. There is also a thorough review of the indications, benefits, and risks of spinal, epidural, paravertebral, and intercostal blocks during cosmetic surgery. It is well referenced, and includes a discussion of the ASRA guidelines for patients receiving anticoagulant therapy. Finally, this section covers general inhalation anesthesia for cosmetic surgery and includes a review of risk stratification for perioperative thromboembolism.

The final section entitled "Other Considerations in Cosmetic Surgery" reviews preoperative patient assessment and selection. It contains a superficial review of common diseases, which seems more suitable for the lay public rather than for anesthesiologists. Highlights include a concise presentation of herbal medicines and a section dealing with psychiatric disease in cosmetic surgery. The discussion of body dysmorphic disorder is cogent and dispels many of the common myths associated with cosmetic surgery.

The last two chapters identify the current controversies surrounding performance standards in cosmetic surgery and discuss the various accreditation agencies that oversee freestanding surgical centers, hospitals, and office-based practices. There is a clear definition that "office-based surgery" refers only to procedures performed in private physicians' offices; an important point is made that these offices are usually not licensed or regulated by the states in the same manner as hospitals and freestanding surgical centers. The authors clearly favor accreditation-based systems over legislative regulations. Nonetheless, they believe that the practice of anesthesia in an office-based setting can be safe.

The text is easy to read. Although generally well written, it suffers from a lack of editorial oversight. The authors and editor are self-promoting at times, and there are multiple typographical errors, inconsistencies, and factual errors. Typical examples include labeling "emergence" as "emergency" on a BIS tracing (page 30), giving a case history for a rhinoplasty and subsequently referring to patient immobility "for injection of her breasts" (page 40), "sermatologic" surgeons (page 208), and a liposuction mortality rate of "19 in 1,000" (page 161). Additionally, there are occasional major errors such as categorizing halothane as an ether rather than an alkane (page 113). Despite these shortcomings, the overall intent of the individual chapters remains clear.

The text is a suitable addition to the library of those who anesthetize patients for cosmetic surgery. The reader is urged to use the described techniques as guidelines rather than de facto rules and to

disregard the bravado of the editor. Also, keep in mind that the dosage guidelines for local anesthetic are "generous." Putting these issues aside, the textbook serves as a useful primer in the practice of anesthesia for cosmetic surgery and deserves a place on one's subspecialty bookshelf.

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LIST OF BOOKS RECEIVED FOR ANESTHESIA AND ANALGESIA

Receipt of the books listed below is acknowledged. Selected books from this list will be reviewed in future issues of the Journal.

The Journal solicits reviews of new books from its readers. If you wish to submit a review, before proceeding please send a letter of intent, identifying the book in question, to Dr. Norig Ellison, Department of Anesthesiology and Critical Care, Hospital of the University of Pennsylvania, 3400 Spruce Street, Philadelphia, PA 19104. The Journal reserves the right of final decision on publication.

Irwin RS, Rippe JM (eds): IRWIN AND RIPPE'S INTENSIVE CARE MEDICINE, 6th edition, Lippincott Williams & Wilkins, Phila., 2007. ISBN 10:0-7817-9153-7. 2487 pages, \$239.00.

Kanellakos G, Dugas G, Slinger P: WEB-BASED BRONCHOSCOPY SIMULATOR at www.ThoracicAnesthesia.com, University of Toronto, 2007. No charge.

Leslie K (ed): AWARENESS DURING ANAESTHESIA, Vol. 21, No. 3 of Best Practice & Research Clinical Anesthesiology, Elsevier, New York, 2007. ISSN 1521-6896. 139 pages, \$198.00 subscription for four issues, \$71.01 for a single issue.

Yao F-SF et al (eds): YAO & ARTUSIO'S ANESTHESIOLOGY PROBLEM-ORIENTED PATIENT MANAGEMENT, 6th edition, Lippincott Williams & Wilkins, 2007. 1348 pages, \$24.95.