

## Book report

# Topics in neuroanaesthesia and intensive care

Bala Venkatesh<sup>1</sup> and Andrea Beindorf<sup>2</sup>

<sup>1</sup>Associate Professor in Intensive Care, Princess Alexandra & Wesley Hospitals, Queensland, Australia

<sup>2</sup>Research Fellow in Intensive Care, Royal Brisbane Hospital, Queensland, Australia

Correspondence: Bala Venkatesh, [Bala\\_Venkatesh@health.qld.gov.au](mailto:Bala_Venkatesh@health.qld.gov.au)

Published online: 17 July 2003

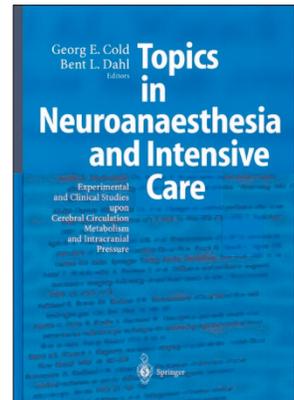
*Critical Care* 2003, **7**:463 (DOI 10.1186/cc2346)

This article is online at <http://ccforum.com/content/7/6/463>

© 2003 BioMed Central Ltd (Print ISSN 1364-8535; Online ISSN 1466-609X)

**Keywords:** book review, intensive care, neuroanaesthesia

Cold GE, Dahl BL: *Topics in Neuroanaesthesia and Intensive Care*. Berlin: Springer Verlag, 2000. 416 pp. ISBN 3-540-41871-7



*Topics in Neuroanaesthesia and Intensive Care* aims to review important experimental and clinical data with emphasis on up-to-date references in the fields of neuroanaesthesia and neurointensive care. The book contains 12 chapters: three chapters on neurophysiology and clinical measurement, five chapters on neuropharmacology, one chapter on the sitting position in anaesthesia, and three chapters relating to neurointensive care. In each chapter, the authors have aimed to provide the evidence base from both animal studies and human studies.

The major attraction of the book is the summary of a large number of studies on various aspects of neurointensive care and anaesthesia, accompanied by a detailed bibliography at the end of each chapter. It thus provides a quick access to the medical literature on a specialized area of intensive care and anaesthesia, some of which may not be available on Medline or Pubmed. There are some good chapters, particularly those on measurement of cerebral blood flow and acute head injury. However, some drawbacks do exist.

The main limitation of the book is the style of presentation. The layout of the headings and the subheadings makes it difficult for the reader to follow the sequence of presentation, and every now and then one has to go back a few pages to pick up on the theme. For example, the simple style of presentation found in chapter 1 is lost in chapter 2, where regulation of cerebral blood flow (arterial oxygen tension) and metabolic regulation of cerebral blood flow are discussed as separate subheadings. In the latter subsection, the coupling between oxygen consumption and cerebral blood flow is again reviewed.

Important sections of neurointensive care such as status epilepticus, neuromuscular disorders and cerebrovascular diseases are not covered. The authors in the section on

cerebral ischaemia mention that, as stroke patients do not come to the neurointensive care unit, these areas will not be discussed. However, with the advent of thrombolysis for ischaemic cerebrovascular accidents and more aggressive surgical drainage of intracerebral haematomata, these patients are increasingly being referred to the neurointensive care unit.

Another notable limitation is the relative inequity in the apportioning of the discussion to experimental data versus current clinical practice. For example, the discussion on triple-H therapy for vasospasm occupies one page, while a discussion of experimental therapies spans more than three pages.

A few factual errors and omissions have crept in.

Page 236: acute lung injury is defined as the ratio of PaO<sub>2</sub> over the fraction of the expired oxygen <300. It should be the fraction of the inspired oxygen concentration.

Page 184: in the discussion on sodium nitroprusside toxicity, there is no mention of renal failure as an important risk factor.

There are also a number of spelling and grammatical errors. Most of these would be discounted by the knowledgeable reader.

In our opinion, *Topics in Neuroanaesthesia and Intensive Care* would be more suitable for the researcher in basic neuroscience than for the neuroanaesthetist or the intensivist. The book may provide additional reading material for those preparing for the basic science component of anaesthesia and intensive care examinations, but it is not a textbook in which detailed clinical information should be sought because it is by no means complete.

### Competing interests

None declared.