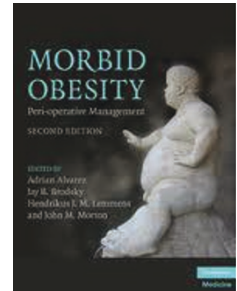


BOOK REPORT

Morbid Obesity: Peri-operative Management

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Adrian Alvarez, Jay B Brodsky, Hendrikus JM Lemmens and John M Morton (Eds.): *Morbid Obesity: Peri-operative Management*. 2nd edition. Cambridge, UK: Cambridge University Press; 2010, 246 pages. ISBN-10: 0521518849; ISBN-13: 978-0-521-51884-0.



The first edition of *Morbid Obesity: Peri-operative Management*, published in 2005, was heralded as an important and timely comprehensive review of peri-operative care of morbidly obese surgical patients. Adrian Alvarez has built on the success of the first book and, with the help of three new editors, has presented a concise and well-written text about the complexities of dealing with morbidly obese surgical patients.

In this second edition, the 25 chapters are arranged in five general sections. The text is well illustrated and competently organized. The authors come from varied clinical backgrounds and include anesthesiologists, surgeons, and intensivists. Each chapter is well researched and appropriately referenced and deals with all aspects of care of bariatric surgical patients.

The authors start with a discussion of specific challenges of the pathophysiology in the bariatric population and then move on to preparation and pre-operative management, intra-operative management, and post-operative care of bariatric surgery patients. The text has minimal repetition and flows very well from one section to the next. New features in this edition include chapters on the pathophysiology of pneumoperitoneum, post-operative rhabdomyolysis, informed consent, and bariatric surgery in adolescents.

The chapters on positioning, monitoring, airway management, drug dosing, ventilatory strategies, comorbidities, and post-operative care all include information that would be extremely relevant to the practice of both anesthesiologists and intensivists. Some chapters (for example, the ones dealing with informed consent, renal

dysfunction, and cortical electrical activity monitoring) were informative but did not seem to provide obesity-specific information. Although intensivists and anesthesiologists are not responsible for operative decisions, the authors could have provided greater detail about the selection of bariatric procedures and their associated outcomes and benefits.

The book is an excellent resource for anesthesiologists, surgeons, and intensivists who wish to develop skills to recognize potential complications and provide quality peri-operative care to obese patients. This book will also be valuable to nursing staff, dietitians, and managers involved in the care of morbidly obese patients and will be a useful addition to the reference collection of institutions planning to develop or improve their bariatric surgery programs.

Competing interests

The authors declare that they have no competing interests.

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