
Long considered an essential resource for oral board preparation, Yao and Artusio’s Anesthesiology: Problem-Oriented Patient Management is now in its sixth edition. Since it was first published in 1983, this text has likely helped to prepare a large number of American Board of Anesthesiology oral examination candidates for that major challenge. As stated in the preface, this text was “written to present a group of important clinical entities covering the most critical anesthetic problems.” Specifically, this edition was intended to “update and expand its subject matter to further improve anesthesia management for sophisticated surgery.”

Previous editions of this text included an authorship almost exclusively from the Department of Anesthesiology at the Weill Medical College of Cornell University. Fully one third of the current edition was contributed by experts from other institutions. This expansion of authorship increases the readers’ confidence that the opinions and discussions represent a more general consensus of anesthesiologists.

This edition has 11 organ system and thematic sections, including Respiratory; Cardiovascular; Gastrointestinal; Nervous; Pain Management and Neuraxial Blocks; Endocrine; Genitourinary; Reproductive; Hematologic; Ear, Nose, and Throat; and Miscellaneous. There are 62 chapters. Three new chapters in this edition deal with perioperative pain management, acupuncture, and electroconvulsive therapy.

Each chapter begins with a clinical vignette involving a specific disease process and surgical procedure. In keeping with this Socratic method, each vignette is followed by questions in four categories: medical diseases and differential diagnosis, preoperative evaluation, intraoperative management, and postoperative management. These carefully crafted questions help the reader to hone decision-making skills, i.e., learn “to think like an anesthesiologist.” The authors clearly meet their stated goal, “to give the anesthesiologist the opportunity to organize his or her own ideas of patient care,” while at the same time presenting essential information. For example, either an oral board candidate or a board-certified anesthesiologist would be well prepared to deal with airway issues after having mastered the respiratory section.

Subtle changes enhance the appearance of this edition. The contents page has been reorganized, and chapter titles within sections are in bold enlarged print. Case presentations are highlighted, focusing attention on key clinical issues. Subheadings of chapters also are now in bold type, making it easier to navigate through the material. Up-to-date reference lists immediately follow the discussions, encouraging readers to seek out original articles.

Chapters within the sections have been reorganized. For example, discussions of congenital abnormalities have been placed at the end of the appropriate pediatric sections. Obstetric chapters, previously included under the genitourinary system, are now included in a new section covering the reproductive system. A new section covering pain management and neuraxial blocks expands on a smaller discussion that was included within the nervous system section in previous editions. This expanded new section more fully discusses pain syndromes and perioperative pain management and includes the role of epidural pain control, chronic opioid tolerance, and multimodal pain management. Innovative additions to this chapter include design considerations for template order forms for epidural analgesia and intravenous patient-controlled analgesia.

The discussion of morbid obesity has been expanded to more fully address this growing epidemic. Obesity’s associated comorbidities, such as obstructive sleep apnea and hypopnea syndrome, right and left heart failure, peripheral vascular disease, systemic and pulmonary hypertension, and altered pharmacology, are included. An up-to-date overview of the current terminology of obstructive sleep apnea and hypopnea syndrome, interpretation of polysomnograms, and postanesthetic disposition of obstructive sleep apnea and hypopnea syndrome patients undergoing surgery are provided.

Given the increasing emphasis being placed on the anesthesiologist as a perioperative physician as our colleagues in other fields absent themselves from the care of the hospitalized patient, an expanded discussion of critical care medicine and “hospitalist” issues would be desirable in future editions. The editors might also consider adding a chapter on new technologies in anesthesia to consider the ever-expanding options for diagnosis and monitoring of surgical patients.

This unusually useful text helps the learner to bridge the gap between the theoretical and the practical, e.g., between the oxygen transport equation and clinical treatment of hypoxemia in the operating room. This text remains a “must have” for the individual preparing for the American Board of Anesthesiology oral examination and a valuable review for the seasoned anesthesiologist.

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