Book Reviews

B. Raymond Fink, M.D., Editor


I find this book particularly useful in that it summarizes extensive work by each of the authors. Melzack and Dennis update the gate-control concept. Cannon, Liebeskind and Frank provide a very readable discussion of serotonin, endorphins and narcotic pain-inhibition mechanisms. Fordyce provides a behavioral analysis of chronic pain and indicates how behavioral modification can be applied in treatment. Chapman presents the sensory decision theory model, as a more precise measuring method of pain, and Hillgard provides an extensive literature review on the subject of hypnosis and pain. Sternbach, the editor, provides a final chapter on "Clinical Aspects", in which he describes pain patients, pain games, methods for soliciting the quality and intensity of pain, and specific therapies.

The authors of each of the chapters are well-known to the students of pain and pain mechanisms. Most are psychologists and view pain management from this non-pharmacological and non-surgical viewpoint, which is useful for anesthesiologists. Most of the chapters represent reiterations of material presented elsewhere. This book provides a summary of the authors' work or of their concepts, and extensive references.

It is increasingly important to speed new knowledge (or concepts) to physicians and other users. Photocopying the original manuscripts, as in this publication, does shorten the time from the author's typewriter to the reader's eye, but leaves the impression of a hurried presentation, prepared under appropriate headings.

This book is well-indexed and a valuable source of information for anyone studying or treating patients with pain. Not a "how-to-do-it" book, nor a primer, I recommend it as a useful survey, covering most aspects of the present state of knowledge in the psychology of pain.

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Genius is the ability to see what others have seen, but to draw different conclusions from the observation. Very few of us are afflicted with the responsibility of genius, and we tend to accept what we have been told without subjecting our knowledge to critical analysis. Most of us suffer from mundane minds that lack either the originality or the energy to question the dogma that has been transmitted to us during our neophyte years. In this category belongs the ritualistic acceptance that blood pressure measurement is a simple matter, a motor skill that can be performed and subjected to interpretation by anyone. Also, the clinical corollary appears so obvious that it hardly warrants repeating: the peripheral blood pressure determination is an accurate reflection of the status of the cardiovascular system.

This apparently benign truth is wrong! Even a superficial perusal of John Bruner's Handbook of Blood Pressure Monitoring reveals the infinite complexities of reliable blood pressure determination. But the difficulties are simplified by an exquisitely lucid style of presentation. A subject that could be incomprehensible to the reader without an engineering or strong physics background is presented clearly. The author is a natural teacher. By analogy and example, Dr. Bruner guides the reader past inborn errors of misconception down paths of rational exposition. The first three chapters develop the concepts of waveforms, oscillation and resonance, phase, impedance and related principles of electronics and hydraulics; considerations in the design of a pumping system, which includes a lengthy, but fascinating analogy between 19th-century manually operated fire pumps and the cardiovascular system, and the components, variability and clinical significance of the pressure pulse. Chapters 4, 5 and 6 offer information for immediate clinical application. Dr. Bruner asks, "Why measure the blood pressure?" He then discusses the noninvasive methods of auscultation, Doppler blood pressure measurement, and oscillometry. This is followed by a description of the reliability and techniques for direct (invasive) monitoring. There is extensive discussion of the electronic capabilities, design, function and needs of components of direct-measurement systems. The author answers the important question of what a clinician should look for and expect in contemporary monitoring apparatus.

Dr. Bruner states in his introduction that "The purpose of the text is to provide an understanding of pulsatile pressure and its measurement in order that the clinician may better select and measure those pressure phenomena that promise to contain information pertinent to the care of his patient." Dr. Bruner has achieved his goal not only in presenting a thorough didactic treatise spanning the areas of related physics and clinical relevance. The material is presented with flair and eloquence. The writing is more than clear: it flows. The author has total command of syllables as well as electrons. The book reads so well it should be acquired for its freedom of speech as well as its scientific content.

The type style is clear, the illustrations are appropriate (and those of the fire engine pump are even fun). The Table of Contents and the Index are complete. I can recommend this book with enthusiasm to every clinician and laboratory worker who will ever measure or interpret a patient's arterial, venous or pulmonary blood pressure. The book makes the obvious seem quite complex, and the complexities are then simplified.

Throughout our professional lives extensive effort is spent in learning the advantages, disadvantages, capabilities, vagaries and subtleties of drugs. The careful physician would never administer a drug without knowing its complete pharmacology. The Handbook of Blood Pressure Monitoring teaches us techniques of clinical instrumentation must be subjected to the same critical focus.

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When first requested to review this book, I shuddered, expecting a pedestrian recitation of sophomoric material. I expected that most of the contents would be ancient history, because by now all possible surgical positions and all possible variations of these positions have been described. I was pleasantly surprised to find that my initial impression was wrong. I enjoyed reading the history of the development of the surgical positions. I greatly profited from the discussions of the physiologic changes occurring in the various positions.