



Book Review

Basics of Anesthesia, M.C. Pardo Jr., R.D. Miller (Eds.), 7th edition Elsevier (2018). 914 pages; eBook version published by Expert Consult eBooks, ISBN: 978-0-323-40115-9

This textbook is of course primarily for anaesthesia learners, but there are excellent chapters on “Perioperative Medicine” and the “Perioperative Surgical Home” dealing with issues in preventing and relieving acute pain after surgery and after trauma. There is also a chapter on Palliative Care, covering not only patients with advanced cancer, but also other serious illnesses nearing end of life, e.g. chronic obstructive pulmonary disease. Sleep medicine, and sleep disturbances from acute pain management/mismanagement and from chronic pain management is covered in a separate chapter. Patients with OSA, Obstructive Sleep Apnea present specific challenges to those who treat OSA patients with acute pain, and especially those who need opioid treatment for chronic pain.

This textbook is one of the classical textbooks for trainees in anaesthesiology. Anaesthesiology is in fact all about pain-free surgery and other painful treatment procedures. One of the most significant developments in modern medicine occurred on October 16, 1846 at Massachusetts General Hospital in Boston, when William Morton successfully demonstrated ether anaesthesia for the surgeon Warren who after removing a tumour from the jaw of his patient without producing any pain, exclaimed: “This is no humbug”: Nitrous oxide had been unsuccessfully demonstrated earlier, in the same place and to the same surgeon. Not until effective and safe way of achieving pain-free surgery, could major developments in this part of medicine happen.

When the patient was waking from ether anaesthesia, a terribly difficult period followed, complicated by nausea, vomiting, and excruciating pain. Therefore, anaesthesia personnel had to develop effective techniques to improve this difficult postoperative and

post-anaesthesia recovery period. They became experts in relieving acute pain after surgery and trauma, but also severely intense pain during internal organ crisis, e.g. passing of a ureter stone, and during and after an acute myocardial infarction. Much progress was possible with local and regional anaesthesia with lidocaine and other local anaesthetic drugs. A major advance occurred with epidural analgesia with catheter-infusion of combinations of low doses of a local anaesthetic drug, a potent opioid (fentanyl or sufentanil), as well as adrenaline that increases the effects of the two other drugs and thereby reducing side effects from epidural analgesia. This is a “blessing” for painful vaginal deliveries, for the excruciating pain after multiple rib-fractures, and after major thoracic and abdominal surgery.

This textbook can therefore be highly recommended not only for anaesthesia learners, but for all health care providers who need to learn the basics and more advanced methods of preventing and relieving acute pain, as well as more long-lasting pain.

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