

for those not well-acquainted with complex neuroanatomy and neurochemistry. The book also neatly describes pathological psychological defence mechanisms employed by addicts such as denial. An understanding of these defences can help explain why these patients continue to engage in activities that are clearly harmful to themselves and others and can be used by the clinician to advance treatment.

There follows a comprehensive section on identification and diagnosis of the different substance abuse problems. Useful screening questions and tools are provided and clinical vignettes are used to illustrate and further explain concepts. This earlier part of the book neatly summarises a large body of work in a readable fashion. This style is carried into the section on treatment, but I was left disappointed that there was not more detail in this area. The authors describe how to decide the intensity of care required and the appropriate treatment setting and how to effectively use motivational interviewing. Unfortunately there is considerably less information on cognitive-behavioural approaches and facilitation of twelve-step programmes. Brief interventions are described but again, not in a lot of detail, somewhat surprisingly given their increasing use in primary care.

The chapter on pharmacological treatment effectively summarizes the evidence for Acamprosate, Disulfiram and Naltrexone in alcoholism, including details on these medications' modes of action and side effects. The use of substitute prescribing in opiate dependence is outlined, and a useful section in the appendix describes medication regimens that could be used in the management of alcohol and drug withdrawal, although some specific drugs and doses would appear to differ from local practice. The book concludes with chapters on nicotine dependence and specific challenges in treating substance abuse problems in the elderly and adolescents.

This enjoyable and readable book will be of particular use to general practitioners, general medical physicians and general adult psychiatrists. It provides a useful introduction for those wishing to specialise in the field of addictions, but its brevity ensures that these individuals will also need to invest in other more detailed texts.

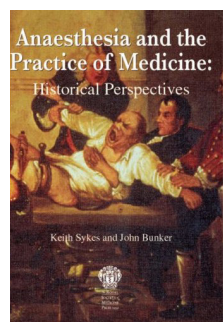
Rowan McClean

Anaesthesia and the Practice of Medicine: Historical Perspectives.

Keith Sykes, John P. Bunker. Royal Society of Medicine Press, London, January 2007. 303pp. £15.95. ISBN 978-1-85315-674-8

This is a delightful volume written by two retired anaesthetists, one a Cambridge graduate and the other a graduate from Harvard. Both worked together at the Massachusetts General Hospital in 1954-55. The book is divided into five parts.

Part 1 deals with the origins of anaesthetic drugs. The first use



of anaesthetics is open to considerable doubt but excluding alcohol, hemlock, hemp and laudanum, the earliest recorded soporific effects of ether were described as far back as 1540. Nitrous oxide, discovered by a clergyman, Joseph Priestley, started off as a recreational drug and as a cure for tuberculosis and other respiratory illnesses. Beddoes and Humphrey Davy identified its pain relieving properties and in 1800 proposed its use in surgery. It was not until 44 years later that nitrous oxide was used to relieve pain during surgical procedures. Volatile anaesthetics ether and chloroform also started off as recreational drugs and cocaine, the first effective local anaesthetic, continues in that role. Cocaine was initially used to anaesthetise the cornea in eye surgery but as far back as 1889 it was used by the German surgeon August Bier to produce spinal anaesthesia. The last chapter in this section deals with the mechanical aspects of anaesthetics and their development – ventilators, heart-lung machine, and various types of anaesthetic apparatus.

Part 2 identifies the impact of a number of historical events, notably the Second World War, and the individuals who helped to establish anaesthetics as an important scientific and clinical discipline. The section concludes with three chapters on curare and neuromuscular blockade reflecting the enormous contribution of these drugs to modern day anaesthesia and the strong research interest of the authors.

Part 3 deals with the extension of anaesthesia into other areas of medical practice – maintenance of respiration in poliomyelitis and other diseases requiring respiratory intensive care, cardiac bypass for open heart surgery, cardio-pulmonary resuscitation and the development of short-acting anaesthetic agents for day surgery. Halothane hepatitis and the safety of anaesthetic agents are also discussed.

Part 4 discusses the role of the anaesthetist in childbirth and in the care of the newborn. Opposition to pain relief during Victorian times was largely silenced by Queen Victoria's pronouncement, "We are going to have this baby and we are going to have chloroform". The important contribution of Virginia Apgar to neonatal intensive care is also discussed. She introduced her Apgar score in 1953, which is probably the most famous eponymous acronym in medicine – Appearance, Pulse, Grimace, Activity, Respiration.

The final section concludes on a less optimistic note. This chapter concludes that anaesthetics, like a number of other medical academic disciplines, faces two major problems: the impact of the European Working Time Directive on clinical services and training, and the erosion of the academic base that is essential for the future development of the discipline.

Together Keith Sykes and John Bunker have built up a wonderful and engaging story of anaesthesia over the last two centuries from laughing gas parties and ether frolics to the targeted use of local and general anaesthetics used today. The volume clearly details how the skills that were developed in the operating room have been increasingly applied to many other diseases and disciplines within medicine. Anaesthetists, surgeons, those involved in pain management and intensive care and those interested in medical history will be enthralled and captivated by this book.

Dennis Johnston

â€° Medicine & Health Sciences. Anaesthesia and the Practice of Medicine: Historical Perspectives 1st Edition. by Keith Sykes (Author), John P Bunker (Author). 4.8 out of 5 stars 7 ratings.Â Appointed Lecturer in Anaesthesia and Consultant Anaesthetist at the Postgraduate Medical School and the Hammersmith Hospital, London 1958, Clinical Reader 1967-70 and Professor of Clinical Anaesthesia 1970-80. Nuffield Professor of Anaesthetics, and Fellow, Pembroke College, University of Oxford 1980-91. Keith Sykes (editor) with John Bunker (contributing editor), Anaesthesia and the practice of medicine: historical perspectives, London, Royal Society of Medicine Press, 2007, pp. xv, 303, illus., Â£15.95 (paperback 978-1-85315-674-8). Anaesthesia and the practice of medicine traces the evolvement of anaesthesia from the introduction of ether and chloroform in the 1840s through to the twentieth century. The book is a collaborative work by two well-known anaesthetists whose careers spanned fifty years of anaesthetic practice: Keith Sykes, former professor of anaesthesia at Hammersmith and Oxford,