

Book report

New information concerning anesthesia and surgery for the morbidly obese patient

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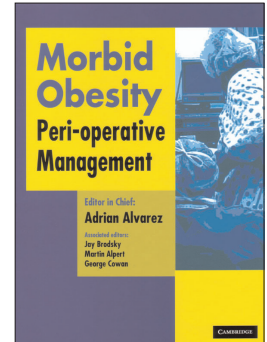
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Alvarez A (Editor-in-Chief), Brodsky J, Alpert M, Cowan G (Associated Editors): *Morbid Obesity: Peri-operative Management*. New York: Cambridge University Press; 2004. 434 pp. ISBN: 1841101885



As noted in the preface to this much needed text concerning perioperative management of the morbidly obese, we are experiencing a global epidemic threatening the health of people worldwide, driven by an increase in the body mass of our populations. The incidence of obesity in US adults has risen from 14.25% in 1978 to over 31% in 2000, and data concerning weight increases of pediatric populations predict no end in sight for these trends. Accordingly, health care providers and institutions have encountered and will increasingly encounter patients requiring treatment primarily for obesity and its complications, or patients with obesity as a major complication to their other surgical and medical treatment plans. It is thus important that information addressing clinical management of these patients be compiled and disseminated, and this book provides a valuable resource in that regard.

The Editor-in-chief, Adrian Alvarez, trained as an anesthesiologist and general surgeon, and has assembled an international group of distinguished contributors to illuminate the management of the morbidly obese patient. The first three chapters in a section termed 'General aspects' nicely describe the scope of the problem, emphasize the need for a multidisciplinary approach to care, outline the risks and complications related to obesity, and comment on the modifications to informed consent for these patients. Appendices that include examples of patient fact sheets and consent forms are valuable templates for programs developing in this area. This section alone would be a valuable monograph to the reader quite apart from the rest of the text.

The remainder of the text is well organized, beginning with five chapters discussing relevant pathophysiology and then discussing preoperative management of the patient and specific management of the common co-morbidities of these

patients – including diabetes mellitus, venous thromboembolism, and cardiac disease. There are also helpful sections concerning pharmacology and monitoring. One-third of the chapters are directed towards intraoperative management and postoperative care, and include extremely useful information concerning positioning, airway management, care in the intensive care unit, and details of anesthetic management, including a chapter dealing with the obese parturient.

Some redundancy exists between chapters – it is common for authors to insert discussions of pathophysiology to explain certain management approaches rather than refer back to chapters on these topics; however, this seems a useful redundancy that clarifies the subject matter at hand. The chapters are well referenced and many of the chapters are rich in tables, figures, and algorithms that provide ready access to the information being discussed.

In summary, this is a fine first edition addressing this important aspect of perioperative management. This book will probably be a valuable resource to the practitioner working in virtually any area of anesthesia, general surgery, or critical care, and would be of special importance to those working in or planning to develop bariatric surgical programs.

Competing interests

The author(s) declare that they have no competing interests.