

Enhanced Recovery for Major Abdominopelvic Surgery, 1st Edition

Gan TJ, Thacker JK, Miller TE, Scott MJ, Holubar S. West Islip, NY: Professional Communications Inc, 397 pages, 34.95 USD, ISBN-10 194323602X

A lot has been written about enhanced recovery after surgery (ERAS) protocols during the last decade. However, no consolidated textbook was available on the market. This book, edited by Gan et al and published by Professional Communications, Inc, is an effort to fill the void. An endorsement by the American Society for Enhanced Recovery and a foreword by the pioneer of ERAS, Professor Henrik Kehlet, certainly add to the face value of the title. With background experience from multiple original trials on the topic, a fitting team of editors has produced a concise textbook. The chapter authors not only span multiple geographic continents (North America, Europe, and Asia), but also all practice specialties involved in the perioperative care of patients undergoing major abdominopelvic surgery. This certainly has provided this book with unique practical perspectives from points of view of the anesthesiologist, surgeon, and perioperative nurse. This book provides structured information about the materials required, specialties and disciplines involved, protocols applied, and implementation guidance for the readers to initiate ERAS in their hospitals. Considering the highly specialized nature of the topic, at first glance, the 397 pages seem to be on the higher side. However, as one scrolls through the chapters, the necessary details of each component of ERAS easily justifies the length.

Because the concept of ERAS is itself very new, most of the chapters understandably reference very recent studies. Many of the contributing authors are representatives of ERAS planning teams in their hospitals and add to the practical value of the text by describing/charting the implemented protocols from their own institutes. ERAS ideology already has sufficient literary support; thus, the hurdle in adoption is never the evidence of benefit, but rather practical limitations in generating and coordinating teams. The first few pages of this book that comprehensively discuss an overview of ERAS for readers and the section on implementation describing roles for surgeons, anesthesiologists, and nurses deserve special mention because they try to address the “realistic hurdles in ERAS implementation.”

This book has 23 text-based chapters and an additional chapter on protocols. Consistent with conventional ERAS protocols, this book is aptly divided into preoperative, intraoperative, and postoperative sections. The chapters provide extensive coverage of evidence-based text in each of these sections. ERAS has changed the outlook toward patient preparation, fasting, and carbohydrate co-loading, and these topics are extremely well covered in the preoperative section. Similarly, the topic coverage for

the intraoperative and postoperative phases is also quite extensive and seems complete. Chapters are brief and to the point, and liberal use of flow diagrams provides the icing on the cake for the readers. Particularly impressive are both the regular use of images in the text and their informative nature. The summary at the end of each chapter highlighting the key points adds utility of this book. Extending beyond the conventional text of the clinical domain, the inclusion of the section on implementations adds significance to the utility of this book. The economics and teamwork involved in ERAS that are described in these chapters provide practical first-hand experience for hospitals that are planning to adopt ERAS protocols. The final section on protocols deserves additional credit. The presented protocols originate from the authors' institutions and would certainly provide the readers with a skeleton for local modifications to implement ERAS in their own perioperative care.

There is a slight overlap among chapters in which patient evaluation is described repeatedly, although that is understandable for a multiauthor book with such a specialized focus. Description at times extends beyond the domain of abdominopelvic surgery (like fluid assessment, etc) and covers the text in more general terms. The section on fluids was extended to include descriptions and implications for surgeries other than abdominopelvic surgeries, which made it slightly lengthy. We did not find it very distracting, however, because the figures and flow diagrams used keep the reader involved. A section on ERAS for high-risk populations (geriatrics, obese, etc) would be a good addition. Similarly, because few trials have reported increased complications with ERAS, a section on limitations and patient selection would have been interesting to read.

We were unable to find an eBook version for sale, and in the context of the present day, we consider that to be a major limitation. As far as the scientific content goes, this book is extremely practical and informative. In addition, information on implementation strategies gives this book a unique advantage over other textbooks. The sections on ERAS components are extensively covered, and this book alone provides sufficient information for clinicians planning to initiate ERAS in their hospitals. It should interest residents and practicing clinicians in the fields of anesthesiology, surgery, and nursing. In fact, readership would extend beyond abdominopelvic surgery teams alone because this book describes key concepts in ERAS protocols that are vital for most other surgeries as well.

Mahesh Kumar Arora, MD
Preet Mohinder Singh, MD, DNB

*Department of Anaesthesia, Intensive Care
and Pain Medicine*

All India Institute of Medical Sciences

New Delhi, India

mkarora442@gmail.com