Cases in Emergency Airway Management

Airway management is an indispensable core clinical skill for physicians working in the emergency department or intensive care unit with critically ill or injured patients. The first edition of *Cases in Emergency Airway Management* is a guide to emergency airway management that aims to confer the knowledge necessary to mitigate the challenges posed by critical situations to providers of airway management. Jointly edited by an anesthesiologist and an emergency medicine physician who together are widely published on emergency airway management, the book includes a multidisciplinary assortment of 46 contributors aiming to “help prepare airway managers for emergency situations.”

The book is not meant to replace authoritative airway management textbooks such as that of Hagberg (*Benumof and Hagberg’s Airway Management*, 3rd edition. Philadelphia: Elsevier, 2012). As summarized in the preface, the goal of the authors is to provide a text that “covers specifically and solely airway management in the emergent setting.” Structured primarily as a series of case-based discussions, the book is compact in size and approximately 200 pages in length. It can be used as a textbook for its scientific foundation about a variety of emergency situations or as a handbook for its quick references to specific topics. It first consists of a brief overview of emergency airway management principles, including airway anatomy and difficult airway guidelines. Following that are 20 succinct chapters, each focusing on various clinical scenarios that may present a challenge to airway management in both adults and children, including a variety of medical, surgical, and traumatic emergencies. At-risk populations, such as the obstetric, obese, and congenitally malformed pediatric patient, also have dedicated chapters. Additional chapters describe advanced intubation techniques, namely videolaryngoscopy, fiberoptic intubation, and surgical airway. The chapter on videolaryngoscopy is noteworthy particularly because it contains a strong evidence-based discussion contributed by the editor. Finally, a chapter on the communication of information regarding difficult airways addresses both resources available to improve patient safety and the dissemination of knowledge among health care providers.

At an average of 10 pages per chapter, each topic starts with a case presentation describing an emergency scenario and subsequent airway management. The structure of each chapter is otherwise variable; at times, what follows is a concise and critical review of the entity in question, for example, the relevant pathophysiology and epidemiology of conditions such as asthma, postsurgical neck hematoma, or cervical spine injury. Typically, airway management considerations are then discussed, followed by the medical and anesthetic management of the situation. Often, the latter is supplemented with graphical algorithms, which may be particularly helpful as visual aids. This print edition does not have supplementary digital content, but an Adobe eBook is available on the publisher’s website. Preferably, a complimentary or discounted electronic version would be available with the purchase of the book. It may also prove to be of benefit to provide a digital collection of the proposed management algorithms that are found throughout the text.

Because the book is a compilation of chapters from different contributors, the text is occasionally repetitive. The book would thus benefit from a more unified approach, with the addition of introductory chapters on recurrent topics, such as rapid sequence intubation, airway topicalization, and emergency medications, which can then serve as references throughout the book.

An overview of the references demonstrates citations predominantly from the last decade of anaesthesiology literature. This, along with the succinct format of the book, may serve as a limitation for the experienced anesthesiologist seeking to review recent literature or update their evidence base. The strength of the book, however, is in bringing attention to potentially unforeseen challenges surrounding the various clinical scenarios, and it is thus best suited for anesthesia trainees, along with other medical specialists and professionals who may have a lesser foundation in difficult and emergent airway management.

The book suggests other titles from the publisher that also present core airway management topics in a similar format. These include *Emergency Airway Management* (Benger et al, eds. Cambridge: Cambridge University Press, 2008), which covers our aforementioned recommendations well but does not have as comprehensive a number of emergent scenarios, whereas *Core Topics in Airway Management* (Calder and Pearce, eds. Cambridge: Cambridge University Press, 2011) predominantly covers intubation equipment and techniques and similarly has a less expansive selection of clinical situations.

Overall, *Cases in Emergency Airway Management* is a compact yet comprehensive reference for multidisciplinary airway management providers that highlights special considerations associated with a variety of clinical scenarios and presents pragmatic approaches to the most pertinent topics related to emergency airway management. The book includes many proposed airway management algorithms that, although not yet recognized officially, should prove to be helpful in clinical practice.

Leon Vorobeichik, MD
Department of Anesthesia
University of Toronto
Ontario, Canada
voro.leon@gmail.com

Marco M. Garavaglia, MD
Department of Anesthesia
Toronto Western Hospital
University Health Network
University of Toronto
Ontario, Canada

DOI: 10.1213/ANE.000000000001916