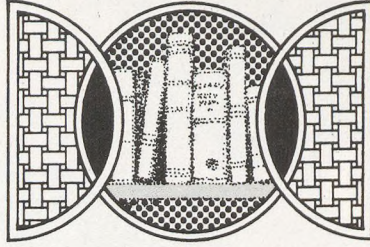


Book Reviews



over or under-diagnosed, and emphasizing the importance of not missing a potentially treatable condition.

The initial chapter discusses how disease differs in old age. Following this, two chapters deal with the most common nonspecific manifestations such as confusion, forgetfulness, apathy, "senility," and fatigue. The next eight chapters discuss symptoms from each organ system. In each chapter, the author points out ways to clarify these symptoms, lists the most common causes, and includes discussion of some often forgotten etiologies, such as depression and over-medication.

Involved discussion of the differential diagnoses is not within

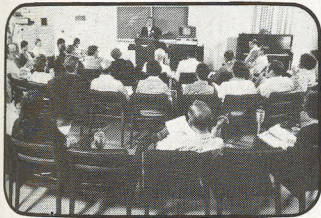
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Common Symptoms of Disease in the Elderly. *H. M. Hodkinson.* Blackwell Scientific Publications, Oxford, 1976, 147 pp., \$11.00.

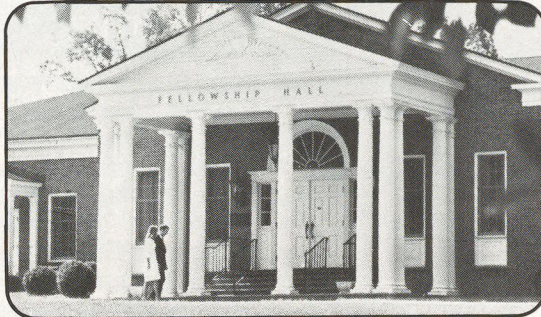
It is the contention of Hodkinson, a noted British geriatrician, that accurate diagnosis of symptoms in the elderly is much more difficult, but no less essential, than in other age groups. The presence of multiple diseases, altered response to illness, difficulty in history taking, and the often nonspecific presentation of disease

causes many a physician to attribute symptoms to "old-age." To help the clinician arrive at a more accurate diagnosis, Dr. Hodkinson has written a short guide to the differential diagnosis of symptoms in the aged. Comprehensiveness is rightly subordinated to his well-achieved goals: stressing and noting the occurrence of significant differences in symptomatology in the elderly, pointing out common diseases causing each symptom and which diseases are most often

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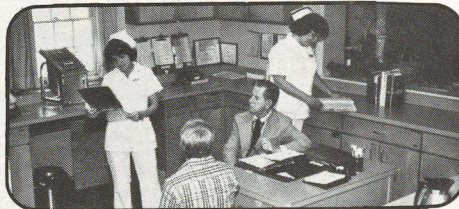
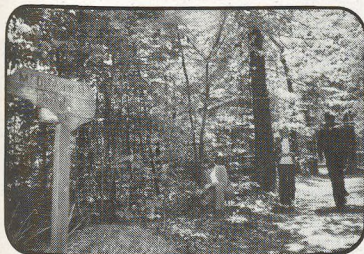


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Continued from page 683

the scope of this book. Much of the material is from the author's vast experience, yet there are some references. He gives practical "pearls," points out common errors, and describes syndromes known to geriatricians but not commonly found in textbooks.

It is this reviewer's opinion that this book is useful for everyone involved in family practice as a short, easily read reference, and is of added merit for the resident, medical student, and allied health care team member as an introduction to geriatric diagnosis.

*Glenn E. East, MD
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Akron, Ohio*

Medication Guide for Patient Counseling. *Dorothy L. Smith. Lea & Febiger, Philadelphia, 1977, 442 pp., \$12.00 (paper).*

This book represents an attempt to provide a readily accessible tool for patient counseling. In a well-written introduction, the author reviews the incidence of non-compliance and the importance of counseling the patient about medications. There is also a discussion on counseling techniques.

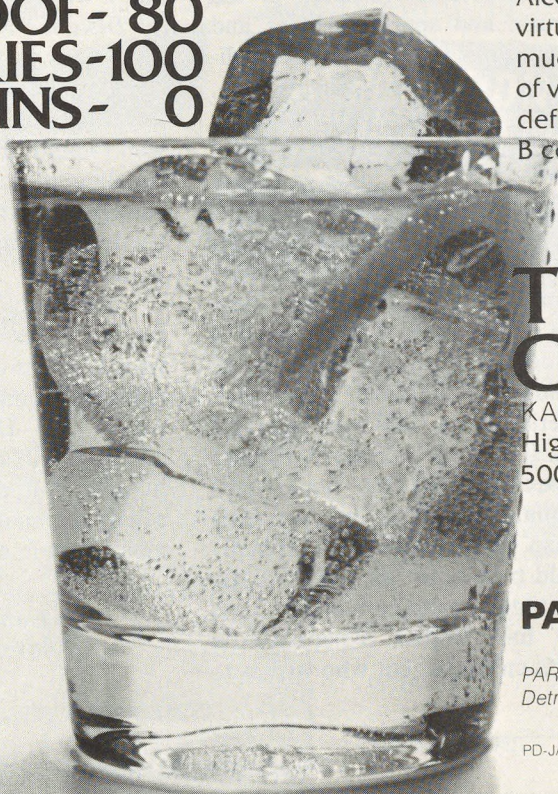
The bulk of the text consists of patient counseling monographs. Only outpatient medications are addressed in this book. Each monograph, written in layman's language, serves as a guide for the practitioner in informing the patient about the drug's purpose, proper storage and administration, activities to avoid, significant interac-

tions with food and drugs, and "selected" side effects. The monographs are presented in alphabetical order by generic name, but the text is also indexed by trade name. Illustrations on the administration of eye drops, nose drops, ear drops, and vaginal preparations are also provided. The author has granted permission for practitioners to photocopy the monographs for the purpose of patient education.

This is a useful book for the family physician, nurse, and pharmacist. The author mentions only side effects which occur commonly or which are potentially harmful and can be recognized by the patient. Although no single book will find agreement with all health

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care practitioners on what patients should be told about their medications, most family physicians should find this book useful.

*Steven H. Erickson, RPh
University of Washington
Seattle*

Dermatology. *R. Marks and P. D. Samman.* Appleton-Century-Crofts, New York, 1977, 507 pp., \$28.50.

Although this book contains 507 pages, its 5 × 8 inch size and liberal use of photographs, illustrations, and tables makes it too brief to cover the very large field of dermatology. Apparently the authors were not attempting to cover the whole field because they state the object of the book in the Introduction as: "To describe some important aspects of skin diseases and in particular point out where investigation is in progress or where further investigation may be fruitful." The subjects chosen for extensive coverage are not always common skin conditions. For instance, whole chapters are devoted to prophyria, topical dermatoses, and cutaneous reticuloses, while impetigo, pediculosis, pityriasis rosea, and diaper rash are not covered at all.

The book is a compilation of chapters written by 24 different authors, 22 are from Great Britain, one from Canada, and one from the United States. It was printed in Great Britain.

The multiple authorship makes its coverage of various subjects spotty. Some chapters are well written, easy to read, and cover their topics very well. A good example is the 23-page chapter on

psoriasis. But most of the chapters can best be described as cursory or sketchy, especially when it comes to treatment.

I would not recommend this book as a good reference source for the family physician needing to learn more about a dermatologic problem. Neither is its coverage of dermatology complete enough to be an ideal textbook for medical students.

*Samuel Henck, MD
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Conditioning for Distance Running: The Scientific Aspects. *Jack Daniels, Robert Fitts, George Sheehan.* John Wiley and Sons, New York, 1978, 106 pp., \$9.95.

This book is part of a series initiated by the American College of Sports Medicine (ACSM) ". . . to help bridge the widening gap between the latest research in the exercise and sports sciences and the consumer." The ACSM Publications Committee Chairperson, Jack H. Wilmore, states that co-authors were sought who could communicate their ideas at a very practical and fundamental level.

The consumer to whom this book is addressed is difficult to identify. If it is the runner, then most of the material in the book is far too technical. If it is the sports medicine practitioner then the material lacks sufficient practical data. If it is the exercise and sports researcher, then the book lacks adequate references and up-to-date human studies. The book probably would best serve the needs of the uninitiated health care professional who has limited experience in sports medicine, but who wishes to

obtain an overview of the field of exercise physiology as it pertains to endurance activities.

The book is divided into four sections. The first is a review of the physiological responses to long distance running of the neuromuscular, cardiovascular, and respiratory systems. The second section deals with environmental and nutritional factors. In the third section the reader is given some highlights of training and running techniques, as well as information related to common running injuries. The final section is labeled as "characteristics common to champion distance runners. . ." and is primarily a review of the physiological measurements of individuals who have been high achievers in endurance sports.

Long distance running or jogging is fast becoming a national fetish. The growing legion of participants deserve to be properly informed so that they may become involved in self-care programs. It would appear that it was the goal of *Conditioning for Distance Running* to meet this need, but, in general, the authors seem to have lost sight of their target population. Most runners who would like a better understanding of their bodies lack the background knowledge in science needed to comprehend the material in the book.

"Consumer" joggers are searching for a resource that describes what happens to their bodies during distance running. The "potpourri" served by Daniels, Fitts, and Sheehan will offer some food for thought, but probably will fail to satisfy the hunger for knowledge of most running enthusiasts.

*Gabriel Smilkstein, MD
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