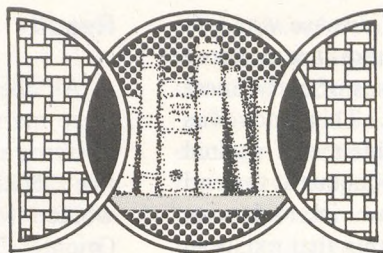


Book Reviews



Clinical Methods in Pediatric Diagnosis (Volume 1). *Balu H. Athreya.* Van Nostrand Reinhold Company, New York, 1980, 289 pp., \$24.50.

As this book is really a reference book, an attempt to read it from cover to cover is extremely difficult. The first section on the history includes definitions of various complaints that are generally understood by physicians.

The second section of the book is a description of what is normal and a suggestion of the many ways in which the abnormal can be stated to deviate from the normal. The section on the general and physical examination begins to be more substantial. There are many current or updated charts revealing the standard and deviations from norm for such things as length for age, height for age, and triceps and fat folds by age. As a reference text, it is an easy task to identify possible diagnoses suggested by any specific abnormality. In addition, some of the diagnostic maneuvers are well described.

In summary, this book is a storehouse of information to be referred to when a child presents with an abnormal physical finding. For this purpose, I would recommend it as an excellent reference text.

Paul L. Bower, MD
Rolling Hills,
California

Color Atlas of Endocrinology. *Reginald Hall, David Evered, Raymond Greene.* Year Book Medical, Chicago, 1979, 176 pp., \$45.00.

This atlas covers a wide range of endocrine orders with a large series of color plates, together with x-rays, line drawings, and other illustrations. The pictures are of good quality. There are, however, several drawbacks in terms of its relevance for the family physician: (1) Many of the pictures, though not all, focus on more advanced conditions rather than on early changes. (2) Generally the x-rays lack specific arrows or identifying marks, and simply have a paragraph off to the side which may or may not elucidate the x-ray findings. (3) Discussion of the conditions is very limited, probably appropriately so for an atlas, but this makes it necessary that the book be used in conjunction with another textbook.

This book might be a useful reference for a medical center or hospital library, particularly in conjunction with a standard text of endocrinology or medicine, but it would not be as likely to be useful in the family physician's office library. The book would most appropriately be recommended to those with a particular and specific interest in endocrine diseases.

Charles Kent Smith, MD
University of Washington
Seattle

V6Sol® Otic Solution

(acetic acid-nonaqueous 2%)

V6Sol® HC Otic Solution

(hydrocortisone 1%, acetic acid-nonaqueous 2%)

Description: V6Sol is a non-aqueous solution of acetic acid (2%), in a propylene glycol vehicle containing propylene glycol diacetate (3%), benzethonium chloride (0.02%), and sodium acetate (0.015%).

V6Sol HC also contains hydrocortisone (1%) and citric acid (0.2%).

Action: V6Sol is antibacterial, antifungal, hydrophilic, has an acid pH and a low surface tension.

V6Sol HC is, in addition, anti-inflammatory and antipruritic.

Indications: (V6Sol only)

Based on a review of this drug by the National Academy of Sciences—National Research Council and/or other information, FDA has classified the indications as follows:

Effective: For the treatment of superficial infections of the external auditory canal caused by organisms susceptible to the action of the antimicrobial.

"Possibly" effective: For prophylaxis of otitis externa in swimmers and susceptible subjects.

Final classification of the less-than-effective indication requires further investigation.

Indications: (V6Sol HC only) For the treatment of superficial infections of the external auditory canal caused by organisms susceptible to the action of the antimicrobial, complicated by inflammation.

Contraindications: These products are contraindicated in those individuals who have shown hypersensitivity to any of their components; perforated tympanic membranes are frequently considered a contraindication to the use of external ear canal medication. V6Sol HC is contraindicated in vaccinia and varicella.

Precautions: V6Sol HC: As safety of topical steroids during pregnancy has not been confirmed, they should not be used for an extended period during pregnancy. Systemic side effects may occur with extensive use of steroids.

V6Sol and V6Sol HC: If sensitization or irritation occurs, medication should be discontinued promptly.

Dosage and Administration: Carefully remove all cerumen and debris to allow V6Sol (or V6Sol HC) to contact infected surfaces immediately. To promote continuous contact, insert a V6Sol (or V6Sol HC) saturated cotton wick in the ear with instructions to the patient to keep wick moist for the next 24 hours by occasionally adding a few drops on the wick. Remove wick after first 24 hours and continue to instill 5 drops of V6Sol (or V6Sol HC) three or four times daily thereafter.

During treatment, to prevent infection of the other ear, use V6Sol in unaffected ear 3 times daily. To help prevent otitis externa in swimmers and susceptible subjects, instill two drops of V6Sol each morning and evening.

How Supplied: V6Sol Otic Solution, in 15 ml (NDC 0037-3611-10) and 30 ml (NDC 0037-3611-30) measured-drop, safety-tip plastic bottles.

V6Sol HC Otic Solution, in 10 ml measured-drop, safety-tip plastic bottle (NDC 0037-3811-12).

Rev. 8/78



WALLACE LABORATORIES
Division of Carter-Wallace, Inc.
Cranbury, New Jersey 08512