Book Reviews

The Office Laboratory. *Paul Fischer, Lois Addison, Peter Curtis, Jane Mitchell. Appleton-Century-Crofts, East Norwalk, Connecticut, 1983, 318 pp., $29.95 (paper).*

The manual *The Office Laboratory* should become an essential element of the family physician's library and should be placed in the family practice clinical laboratory. The text excels not only because it is a pioneering effort to produce a manual for the smaller office laboratory but also because of the clarity and educational content of the entire work.

In 1978 the University of North Carolina at Chapel Hill Family Practice Center began a model office laboratory where residents would learn laboratory procedures and management. This manual grew from the experience in the model laboratory. The authors envision that the text may be used as a procedural bench manual, as a background text for the clinician, and as a teaching tool for residents and office staff. The text accomplishes all these tasks admirably.

The manual covers all the basic office-based tests in detail including hematology, urinalysis, microbiology, and dermatological tests. For each test procedure the following information is given: (1) test background, (2) test indication, (3) specimen collection, (4) test materials, (5) test procedures, (6) reference values or test results, (7) test quality controls, (8) false positives and negatives, (9) comments, and (10) references.

The book surpasses other laboratory manuals available to the family physician because it is aimed at the small office laboratory. This text covers crucial information such as office arrangement, laboratory staffing, and care of equipment. Finally, the manual consistently cautions the clinician against overextending the primary care office laboratory into tests that should be done in hospital laboratories because of quality or cost considerations.

According to various laboratory technologists who have reviewed the book, the information is very accurate overall, although questions were raised as to the authors' recommendations for specific tests such as the AO-Hb meter. The only major criticism of the text is the relatively minor emphasis on scrupulous record keeping, which is a necessity today for quality of care, quality control, accreditation, and medical-legal purposes.

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Practical Allergy and Immunology. *William B. Klaustermeyer (ed). John Wiley & Sons, New York, 1983, 217 pp., $14.95.*

In the preface the editor states that the purpose of this book is to provide a current and practical overview of allergy and immunology for primary care physicians. He states that allergic disorders are among the most common diseases afflicting humans, with a prevalence of 10 to 20 percent of the population. The editor further states that with one allergist for every 25 general practitioners in the United

States, it has become abundantly clear that most patients with allergic disorders will be treated by primary care physicians. Two thirds of patients with asthma and allergic rhinitis are managed by either family physicians or allergists. Optimal patient care requires an understanding and alliance among these groups.

In my opinion, this book would make a valuable addition to almost every family physician's library. It is well written, exceptionally readable, and well organized. The chapters "A Clinical Approach to Allergic Disorders," "Acute Allergic Reactions," and "Bronchial Asthma Diagnosis and Treatment" are exceptionally well presented and are most pertinent to the average family physician. This book should be of value to family practice residents, medical students, and allied health professionals. I would recommend it highly for their library.

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Live or Die. *Thomas H. Ainsworth. Macmillan Publishing Company, New York, 1983, 272 pp., $16.95.*

Dr. Ainsworth has written a very timely book that is aimed primarily at the lay public, but that should be read by every family physician.

Basically, the book is divided into two parts. In the first part, the author discusses in detail the development of the medical establishment and medical care in this country in all its aspects, and then explains many of the problems that have developed with the provision of medical care in the United States. The author mentions such items as the overspecialization of medicine that has occurred, the rapidly increasing cost of medical care, and such diverse topics as the increasing cesarean section rate, the end-stage renal disease program, and coronary bypass surgery.

Three major points are made in this thesis. First, the financing mechanisms of medical care costs must change in order to change the incentives of the current system. These include changing from open-ended cost reimbursement of hospitals to prospective case rates (DRGs). An alternative to the fee-for-service payment for primary care must be offered in the form of an annual community-rate capitation fee. Some of these points may be difficult for physicians to accept, but the author presents cogent arguments for his premises.

Second, everyone must be assured access to a family physician by changing the numbers and types of physicians educated. To meet the needs of the populace of this country, a proportion of twice as many primary care physicians as limited specialists, with at least 50 percent of them family physicians, would be ideal. This thesis will be much more acceptable to the average physician in this country, and arguments for this position are persuasive.

Third, the almost exclusive emphasis on and payment for treatment of disease must be changed to give equal consideration to prevention of disease and promotion of health. In 1981, Americans paid $287 billion for health care, yet only 4 percent of that total was spent for prevention of disease.

In the second portion of the book the author devotes his attention to a discussion of the methods that the typical American can use to reclaim his own life. He discusses such items as disease prevention, health-hazard appraisal, and risk-factor intervention, and

then talks about the entire concept of wellness, proper nutrition, physical fitness, stress management, and smoking cessation. In the appendix he reprints a smoking cessation program and includes facsimiles of health-hazard appraisal questionnaires.

In summary, Dr. Ainsworth has written a very important book. He has put into words what many practicing physicians have felt for some time—that they were pricing themselves out of the marketplace, that the rapidly escalating medical care costs could bankrupt this country, that far too much of medical care and expenditure is devoted to disease treatment and far too little on disease prevention and wellness. This book should be required reading for all physicians.

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Hand Pain and Impairment (3rd Edition). *Rene Cailliet. F.A. Davis Company, Philadelphia, 1982, 232 pp., $11.95 (paper).*

A new edition of what the publisher describes as "one of the most widely acclaimed titles in the popular Pain series" demands our attention. This third edition has grown by 50 percent with the addition of chapters on the spastic hand and hand burns, new illustrations on nerve and muscle control of the hand, and extensive updating.

The first 50 pages are devoted to a detailed description of the functional anatomy of the hand, the text amplified by numerous excellent diagrams and illustrations. Nuggets of clinical information add value to this section. The clinical chapters deal with nerve control of the hand, tendon injuries and diseases, joint injuries and diseases, fractures and dislocations, infections and vascular impairment, and splinting, as well as the two new chapters on the spastic hand and hand burns. There is an extensive bibliography at the end of each chapter.

Professor Cailliet has a clear, uncluttered style. When there is controversy, he presents other points of view, yet makes his recommendations for treatment firmly and concisely. This clarity of style holds one's interest and avoids confusion.

In his preface the author states, "This book provides the nonspecialist with information to better evaluate the impaired hand, and initiate proper treatment." It does, indeed. Yet, paradoxically, the additions to this new edition seem somehow peripheral to the main thrust of the book.

This book is stimulating and enticing, inviting one to read beyond the subject of one's immediate concern. It is a valuable resource for practicing family physicians, especially those dealing with industrial injuries, and those in more isolated locations.

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Drugs of Choice 1982-1983. *Walter Modell (ed). C.V. Mosby, St. Louis, 1982, 809 pp., $49.50.*

This is the 13th edition of *Drugs of Choice,* an update that is occurring every two years. The editor's goal of an "unbiased, authoritative, and definitive discussion on drug therapy" is met well, particularly in several excellent chapters. Of particular note are chapters on rapidly changing areas such as drugs for diseases of the heart, drugs for arterial hypertension, and drugs for hypotension and shock. Each of these chapters contains excellent summary tables that

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name in an organized way the drugs, their dosage forms, and the usual dosage as used by the authors. A chapter by Halpern on analgesics and chapters by Hollister on drugs for treating affective disorders and anxiety are well done and appropriate.

I felt a need for a more comprehensive review in the chapter on antibacterial drugs. This chapter, dealing with medications of daily importance to family physicians, occupied only 18 pages of discussion and lacked the specifics of the previously mentioned chapters. Thirty-two pages were devoted to cancer treatment and 30 pages to vitamins, which seems out of balance for primary care. The brief chapter on drugs for dermatologic therapy lacked enough specificity to determine the medications preferred by the authors.

This book is useful as a source of information on therapeutic choices, and in selected chapters it provides an excellent summary of rapidly changing areas of medicine. Overall, it is a useful reference for a family practice library.

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Practical Rheumatology. *Timothy M. Spiegel (ed). John Wiley & Sons, New York, 1983, 383 pp., $29.95.*

Despite an innate skepticism that a book entitled *Practical . . .* can actually satisfy the objective of providing immediately useful and timely clinical help, this book does just that. Particularly in a medical subspecialty that is not noted for the practicality with which it is usually taught, *Practical Rheumatology* is a well-designed, well-written textbook that should be extremely useful to the family practice resident or practicing physician in the office management of patients with rheumatologic disease.

As noted by the editor in the preface, most textbooks on this subject describe only "specific diseases and pathophysiologic mechanisms." The most helpful aspect of this book is that it presents and fully develops "an algorithm that analyzes the clinical pattern of joint involvement to direct the physician to appropriate diagnosis." The bulk of the book then addresses specific topics, including specific diagnoses grouped as they present in the algorithm—medical and surgical therapies, emergency problems, and pediatric rheumatology. Of particular interest is a section at the end that describes, better than any other rheumatology text I have seen, the issues of functional assessment, rehabilitation, and education of the arthritis patient. There is room for improvement, however, in addressing the topic of family interactions with the arthritis patient, a particularly important area of family dynamics and medical care.

The text is quite readable, the tables and charts appropriately summarize detailed information, and the illustrations are more than adequate for a text of this price. This book is part of a series entitled "Family Practice Today: A Comprehensive Postgraduate Library" (Sherman Mellinkoff and David H. Solomon, series editors-in-chief). One hopes that the other volumes in this series are of equally high quality and are equally useful to the primary care physician.

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