

1989-1990 Pocketbook of Pediatric Antimicrobial Therapy (8th Edition). John D. Nelson. Williams & Wilkins, Baltimore, 1989, 101 pp., \$8.95 (paper). ISBN 0-683-06403-7.

This reference handbook is exactly what the name implies. The 1989-1990 version is the eighth edition of a frequently revised and updated manual that measures under 5 × 7 in, is ¼-in thick, and fits easily into a coat pocket. There is very little narrative; the notable exceptions are brief discussions of "choosing among aminoglycosides, cephalosporins, and penicillins," and "adverse reactions to antimicrobial agents." The body of the book consists of tables of antibiotic use with dosages and indications, cross-referenced by clinical diagnosis, specific pathogen, and drug name. Special sections cover the newborn infant, antifungal and antiparasitic therapy, dosages in renal failure, and drug interactions.

The presentation is concise and the information is complete and easily accessed. Faced with the number of agents currently available, the frequent introduction of new drugs, and the ever-changing sensitivity patterns of infectious agents, any clinician faced with the prescribing of antimicrobial therapy will find this a helpful resource.

Leland J. Davis, MD
University of California
San Francisco

Drug Interactions: Clinical Significance of Drug-Drug Interactions (6th Edition). Phillip D. Hansten, John R. Horn. Lea & Febiger, Philadelphia, 1989, 448 pp., \$65.00. ISBN 0-8121-1203-2.

The general format of the sixth edition of *Drug Interactions* is the same as previous editions with the usual updates and numerous newly described interactions. The index lists all interactions by drug and drug class. Each interaction is described in the body of the book: the mechanism, clinical significance, and management of each interaction are concisely described, and the clinical significance of the in-

teraction rated, based upon the severity of potential harm to the patient, the incidence of the interaction, and the quality of the documentation of the interaction. Each chapter includes a list of pertinent references.

The major change in this edition is that it is now published in a loose-leaf binder. Quarterly mailings of new information from the *Drug Interactions Newsletter* are intended to be placed in the book, along with an updated index, thus obviating the major drawback of a hardbound book on such a rapidly changing topic: quick obsolescence.

According to information shipped with the book, it is also available in an interactive software program with a quarterly updating service, although the computer program is apparently based on the fifth (1985) edition of the book.

In using the book for several months, I generally found it a good reference, although this nonrandom use did reveal several deficiencies such as lack of mention of the increased risk of hypersensitivity hepatitis in patients on isoniazid who use alcohol, despite a specific reference to this in the *Physician's Desk Reference*; an interaction between isoniazid and ketoconazole is described in the section reporting an interaction between rifampin and isoniazid, but is not included in the index; and although probucol currently carries a warning that it should not be used in patients with prolonged Q-T intervals, including patients on Class I and III antiarrhythmics or tricyclic antidepressants, this is not mentioned in the book.

Despite these lapses, *Drug Interactions* is a very useful reference for the practicing physician, resident, student, or other clinician who writes prescriptions. It is easy to use while seeing patients, and the new loose-leaf format and quarterly updates should ensure that it remains current and accurate.

Clinton H. Toewe II, MD
East Virginia Medical School
Norfolk

Primary Care Orthopedics. Royce C. Lewis, Jr. Churchill Livingstone, New York, 1988, 307 pp., \$32 (paper).

In his preface the author describes the premise on which the book is based: orthopedic problems can be placed in three categories, those that can be treated safely by the primary care physician, those that should be carefully monitored and referred to an orthopedist at the first sign of an impending complication, and those where there is no question from the outset that referral to an orthopedist is needed.

The book starts promisingly. The first four chapters on general principles of orthopedic and fracture care contain much useful information. The writing style is informal and pleasant early on.

Though there are excellent discussions of several topics, I became more and more disappointed as the book progressed. For many conditions, the symptoms are vaguely described, and diagnostic features of the examination are not well defined. There are some factual errors; for example, the pisiform is eliminated from the description of the eight bones forming the carpus (p 147). In a book published so recently, it is surprising that magnetic resonance imaging is not mentioned. Above all, the author frequently loses sight of his primary purpose. Often it is unclear what role is being recommended for the primary care physician.

The author set himself an intriguing but difficult task. Primary care physicians vary widely in their orthopedic experience and expertise. The field of orthopedics is extensive and rapidly expanding. An enormous breadth of experience would be necessary to cover it appropriately, an experience that perhaps is beyond the scope of any one expert.

This book deserves another effort. I cannot recommend it highly in its present form.

Peter A. Goodwin, MD
Oregon Health Sciences University
Portland