

Managing Asthma. Miles Weinberger. Williams & Wilkins, Baltimore, Maryland, 1990, 330 pp, \$36.95 (paper). ISBN 0-683-08900-5.

Rarely does one have the opportunity to read a medical book that is so relevant to primary care, readable, organized, packed with pearls, and bereft of extraneous material and complicated explanations.

Miles Weinberger accomplishes all of this in a relatively short book (185 pages excluding appendix), which is strongly recommended for anyone who treats asthma in children. The text contains many bits of information, including techniques of examination that I have never seen in print and have wrongly assumed were known only to me and my students.

The appendix is divided into two parts. Part A is composed of procedures and protocols. Part B is composed of 21 separate pieces of patient education materials, many of which I will find useful.

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Handbook of Occupational Medicine. Robert J. McCunney (ed). Little, Brown & Company, Boston, 1988, 510 pp, price not available (paper). ISBN 0-316-55528-2.

Handbook of Occupational Medicine, edited by Robert J. McCunney, is written for a primary care medical audience. The editor accurately points to the fact that there is a health manpower shortage of occupational medicine specialists, and further states that primary care physicians currently provide most of the occupational medical services in the United States. One assumes that this handbook would serve as a pocket reference for primary care physicians, especially family physicians, enabling them to provide optimum occupational medical services. The handbook does not achieve this goal.

The book has several strengths. As well as any published document to date, this book describes the diversity of the field of occupational medicine. The major sections include "Occupational Medicine Services," "Occupationally

Related Illnesses," "Evaluating a Potential Health Hazard," and "Special Problems and Opportunities in Occupational Medicine." The variety of medical services, the diversity of occupationally related medical conditions, and the investigation of their causality are discussed. The first section, "Occupational Medical Services," is the strongest. The reader is left with an appreciation of the variety of services that a physician, including a family physician, can offer to both the patient and the employer.

"Occupationally Related Illnesses" is organized to reflect the 10 leading work-related illnesses targeted by the National Institute of Occupational Safety and Health (NIOSH). Chapters on occupational lung disease, cancer, reproductive hazards, and noise-induced hearing loss are particularly well written and clinically useful.

The tables and figures are well spaced and nicely complementary to the text. Two appendices are particularly helpful. The first, on health effects of common substances, addresses accurately and efficiently categories of occupational exposure including metals, hydrocarbons, irritant gases, asphyxiant gases, and pesticides. Another appendix lists regulatory agencies at the state level, providing the primary care physician with a first-contact reference.

Perhaps the major strength of the book is its review of issues that confront the family physician on an almost daily basis: fitness for return to work, preplacement evaluations, and approaches to rehabilitation. These issues are addressed throughout the book and are supplemented with pleas for the unbiased delivery of services and an appreciation of ethical dilemmas that arise in the delivery of occupational health services.

The book also has weaknesses. Several of the chapters are quite redundant. For example, chapter 5, "Suspecting Occupational Disease," and chapter 22, "Discovery of Occupational Disease," both deal at length with the topic of occupational history taking. Also, chapter 1 nicely reviews

the diversity of occupational medical services; unfortunately, many of the same topics are reviewed again in chapter 25, "The Economics of Occupational Medicine." These and numerous other instances of redundancy are particularly annoying in view of the excessive length of this book.

One thinks of a handbook as a quick reference, a pocket guide. Furthermore, a handbook intended for use by family physicians should be heavily clinically weighted. This book is neither. Its almost 500 pages of fine print approach the volume of a textbook, yet it does not contain the overall depth to qualify as such, and neither has it the needed clinical emphasis for usable quick reference for medical practitioners.

The chapters are apparently designed to appeal to a wide range of reading audiences, yet the needs of none are satisfied. For example, the sections on epidemiology, biostatistics, and health hazard evaluation are nicely written, but highly technical, and would probably require formal public health training for adequate appreciation. At the other end of the spectrum, the chapter on musculoskeletal disorders is diffuse, superficial, poorly referenced, and not easily readable. This is unfortunate since work injuries represent the vast majority of occupationally related clinical encounters seen by family physicians.

In conclusion, this handbook attempts to do too much and delivers too little. If the family physician is searching for a comprehensive reference textbook in occupational medicine, many currently exist.

More likely, if the family physician desires a true quick reference handbook, several of these also exist, and have come to print in the past 3 years. The family physician is advised to look further, beyond this *Handbook of Occupational Medicine*.

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Euthanasia: The Moral Issues. Robert M. Baird, Stuart F. Rosenbaum (eds). Prometheus Books, Buffalo, New York, 1989, 182 pp, \$11.95 (paper). ISBN 0-87975-555-5.

This book contains several items useful to health care professionals. The debate between ethicists James Rachels and Thomas Sullivan on active and passive euthanasia illuminates many facets of this complex issue. Hospital chaplain Ernle Young offers practical suggestions for handling requests for physician-assisted suicide. Ethicist Tristram Englehardt identifies concerns relating to euthanasia and children. Anesthesiologist Pieter Admiraal delineates the guidelines used by Dutch physicians in making euthanasia decisions, guidelines that American physicians must now begin to consider seriously. Sidney Wanzer et al review recent developments in caring for hopelessly ill patients; these well-respected physicians challenge their colleagues to be more aggressive in managing pain and to reconsider the issue of physician-assisted suicide.

These seven chapters make worthwhile reading for family physicians, family practice residents, medical students, and nurses. The remaining 12 chapters, however, are not particularly useful to health care professionals. The case presentations, which comprise the early chapters of the book, are long on sentiment and short on concrete details and rigorous analysis. The cases are presented with the intent of arousing the interest of the reader through demonstrating the personal, controversial, and relevant nature of the subject. Health care professionals do not need to be aroused in this area; they need wisdom.

Most of the essays following the case presentations are not exercises in clinical ethical reflection, but are polemical diatribes or ideological position papers that usurp moral arguments to promote entrenched viewpoints. These tracts may serve as stimulating discussion starters for the college classroom, and perhaps they serve a function in indicating the superficial and ideological nature of the

"euthanasia debate," but they have little value for health care providers inundated with real-life heat and desperate for philosophical light.

The book suffers from the editors' failure to indicate to the reader errors, anachronisms, and contradictory statements contained in the book's chapters. Typical examples can be found in the selection by C. Everett Koop on "The Case of Karen Quinlan," written just before the 1976 New Jersey Supreme Court decision reversing the decision of a 1975 court. Koop states, quite confidently, that the physicians were correct in leaving Quinlan on the respirator because "no judge could rightly tell someone else to commit a homicide" (a few months later the court unanimously authorized discontinuance of Ms Quinlan's life-support system) and because there is a "distinct difference" between withholding and withdrawing treatment, a distinction considered morally and legally irrelevant after the 1976 decision. For clinicians who must keep abreast of the latest medical, ethical, and legal standards, the editors should have included a more recent discussion of the Quinlan case.

In recent years attitudes and policies have changed dramatically in almost every area of euthanasia decision making. Yet this volume contains numerous essays that antedate those developments. The editors should have contextualized these older essays, through the use of introductions and footnotes, or omitted them altogether. The editors also should have helped the reader to understand apparent contradictions between the various chapters. For example, polemicists on both sides of the debate frequently cited well-known statements by ethicist Paul Ramsey as support for their position. The editors either should have included a chapter of Ramsey's writings or explained how contradictory interpretations arose from the same text. Otherwise, the reader is left only with what I call "ethics as ammunition" and is hindered from achieving what I take to be the purpose of the book: to help the reader develop a

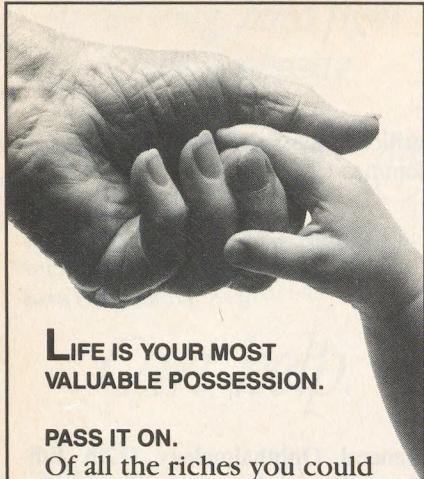
critical understanding of the moral dilemmas of euthanasia.

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General Ophthalmology (12th Edition). Daniel Vaughan, Taylor Asbury, Khalid F. Tabbarra. Appleton & Lange, Norwalk, Connecticut, 1989, 429 pp, \$27.00 (paper). ISBN 0-8385-3107-5.

The editors are not bashful. The preface states that "for three decades, *General Ophthalmology* has served as the most concise, current, and authoritative review of the subject for medical students, ophthalmology residents, practicing ophthalmologists, nurses, optometrists, and colleagues in other fields of medicine and surgery as well as allied health personnel." As a colleague in another field of medicine, family practice, I found the book to be concise, current, and authoritative. Whether it is the most concise, current, and authoritative text on the subject is a judgment I will leave to others.

Nearly all of the information in the text will be of relevance to a family physician either for guidance regarding evaluation and management of a particular problem or as a source of background information for better understanding of a particular topic. The everyday usefulness of the book is exemplified (1) by the inside of the front cover, which presents a table for the differential diagnosis of common causes of the inflamed eye and the page number of the ocular emergency section; and (2) by the inside of the back cover, which contains the abbreviations and symbols used in ophthalmology. There are certainly many other useful tables, diagrams, and photographs throughout the book. Unfortunately, none of the many photographs of the external eye and fundus are in color. Apart from this deficiency—and you certainly cannot have everything for \$27—this



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BOOK REVIEWS

book is excellent for the family physician's library.

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Handbook of Symptom-Oriented Neurology. *William H. Olson, Roger A. Brumback, Generoso Gascon, Vasudeva Iyer. Year Book Medical Publishers, Chicago, 1989, 387 pp, price not available (paper). ISBN 0-8151-6534-X.*

This handbook provides a rapid diagnostic approach to a wide variety of neurological problems. Criteria for inclusion of problems were based on a study of Canadian family physicians and emphasized those conditions that are common or potentially serious and for which therapy can modify the outcome. After introductory chapters on the neurologic examination and neurodiagnostic procedures, the following 17 chapters are organized by presenting complaint (eg, headache, sleep disorder, stroke syndrome) and include all of the common adult and pediatric neurologic conditions. The final two chapters deal with neurologic emergencies and care of the patient with irreversible neurologic damage.

The authors' intent is to define an approach useful in a busy office practice. Minimum necessary history and examination are emphasized toward the goal of sifting through the differential diagnoses rapidly. Pathophysiology and epidemiology are included only when key to the diagnostic strategy, and therapy is described only briefly. Illustrations are plentiful and well done, though often emphasizing the most basic of points. An outline format with numerous subheadings and short, at times fragmentary, sentences all add to the ease of reading for a quick reference.

This book would be useful in practice to facilitate neurodiagnosis. To go on to render care to the patient,

though, one would want a more thorough treatise. The lack of pathophysiology limits the book's usefulness for gaining an understanding of the issues; rather, it would function as a memory aid or roadmap toward achieving a diagnosis.

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Practical Care of the Ambulatory Patient. *Barry M. Stults, Willard H. Dere. W. B. Saunders Company, Philadelphia, 1989, 592 pp, \$49.95. ISBN 0-7216-2474-X.*

This text is directed toward clinicians who provide primary health care for adult patients. The editors have selected a number of important and sometimes controversial clinical topics that are frequently excluded or are presented in limited detail in traditional textbooks of internal medicine. Such topics include the management of patients following coronary artery bypass graft surgery, techniques of monitoring glycemic control of ambulatory diabetic patients, the management of common anorectal disorders, and the management of chronic urinary catheter care. The book also emphasizes the practical step-by-step approach to diagnosis and treatment of various diseases by the use of algorithms and other teaching aids. Of special interest to most primary care physicians are five chapters on health prevention, which include periodic health examination for adults, improving patients' compliance, smoking cessation, cancer prevention, and routine laboratory testing.

I was very impressed with the content of this text and the manner in which each topic was presented. This is a great addition to the primary physician's library in supplementing other more complete medical texts.

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