

Clinical Cardiology (5th Edition). Maurice Sikolow, Malcolm B. McIlroy, Melvin D. Cheitlin. Appleton & Lange, East Norwalk, Conn, 1990, 645 pp, \$35.50 (paper). ISBN 0-8385-1266-6.

Most American physicians are familiar with the Lange series of texts. Physically, this book is the same size as Lange's popular *Current Diagnosis and Treatment* series, except its binding width is thinner (about 2.5 cm). Twenty-three well-illustrated chapters, beginning with anatomy and physiology, history, and physical examination, and concluding with cardiac disease in pregnant and surgical patients, are included between the hot-pink covers.

The authors set the lofty goal of providing "medical students, house staff, cardiology trainees, internists, and other physicians in practice with a current, balanced, integrated account of adult cardiovascular disease." Therefore, there is no chapter on pediatric cardiology. Neither is there one on basic electrocardiography, although a 9-page heavily illustrated introduction to cardiac ultrasound is included. Technically and grammatically, this book is excellent. Typographical errors occur rarely. Occasionally slipping through were an "or not" following "whether" and an "as yet." There were only two real irritations: the incessant use of "owing to" and the incorrect page referrals ("see page . . .").

Other than electrocardiography and pediatric cardiology, the only other important omission from a family physician's viewpoint was a discussion of the therapy of hyperlipidemia. Alphabetic references appear at the end of chapters with occasional parenthetical reference embedded in the text. The end-of-chapter referencing for the coronary heart disease chapter is 14 pages long, listing over 350 references. The most recent references are from 1988.

There were several minor disappointments or irritants. Specific therapeutic protocols are often not included, such as for thrombolytic agent administration and CPK-MB determinations. In the absence of any

other specific protocol, a medical student or house officer may order serial CPK-MB isoenzymes every 2 hours "to permit an estimate of the magnitude of the infarction." The authors almost entirely skirt the issue of chronic anticoagulation in established atrial fibrillation. Usually, only generic drug names are provided; I needed my *Physician's Desk Reference* to keep all the me-too-olol's straight. There was no mention of the studies that indicate that angiotensin-converting enzyme inhibitors prolong life in congestive failure. As in any volume this long, there were some statements of questionable accuracy. For example, ". . . all treatment for coronary artery disease is palliative . . ." is not consistent even with the authors' subsequent discussion. In separate discussions, the authors are also inconsistent in their recommendations of the timing of postmyocardial infarction exercise testing.

Some statements appear to be editing oversights, such as the recommendation to use prothrombin times rather than partial thromboplastin times to monitor intravenous heparin anticoagulation. Some of the illustrations were also disappointing. The index was the biggest disappointment, however. One needs to find the authors' exact indexing term; for example, "cardiomyopathy, hypertrophic obstructive" is listed, but none of its multiple permutations or previous common names. Panic disorder is not listed and, although both are discussed, preeclampsia is indexed whereas eclampsia is not.

As with any textbook in a rapidly changing field whose manuscript age is (I presume) 1988, some information is already out of date. New developments include the release of (1) sustained-release formulations of diltiazem and nifedipine, (2) an intravenous formulation of enalapril (Vasotec), and (3) adenosine (Adenocard), which may soon be the agent of choice to terminate paroxysmal supraventricular tachycardia.

Recognizing these limitations, the purchaser of this text will find a compendium of useful (although sometimes controversial) information. The

1990 cardiology edition is sure to be successful because of Lange's name recognition and reputation for affordability.

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Management of Hypertension (3rd Edition). Norman M. Kaplan. Essential Medical Information Systems, Dallas, 1990, 208 pp, \$12.95 (paper). ISBN 0-929240-05-7.

Norman Kaplan has written a helpful pocket-sized book on the practical aspects of hypertension management. With its big print, many tables and figures, and clear organization, the book is well designed for use as a quick reference. The essential topics are clearly covered: definition, evaluation, nondrug therapy, and drug therapy. Tables on the individualized approach to initial drug therapy and rational combinations of antihypertensive agents are particularly valuable. Recent references conclude each section. Medical students as well as experienced practitioners should appreciate this book. And the price is right!

It is with trepidation that this reviewer disagrees with a few recommendations made by this distinguished author. With FDA support, however, I must dispute Dr Kaplan's statement that women over the age of 35 years should not use oral contraceptives. The author also recommends blood pressure monitoring every 3 to 6 months in all women taking oral contraceptives, which is excessive when compared with the recommendations of other authorities. Dr Kaplan promotes drinking 1 ounce of alcohol daily for its cardioprotective effect, which I also question.

This very good book could be made even better by a few additions to the next edition. Cost comparisons of drugs would be helpful, despite the author's statement that the cost of therapy ought not enter the decision of choice of drug. Also useful would be guidelines for follow-up laboratory testing. Finally, the index would be

more helpful if it included not only the classes of drugs but also the individual drug names.

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The Art and Science of Bedside Diagnosis. Joseph D. Sapira. Urban & Schwarzenberg, Baltimore, 1990, 650 pp, \$49.50. ISBN 0-8067-1791-2.

The Art and Science of Bedside Diagnosis is intended for clinicians at every level of training, employing a layered style of writing in which various sections of the book are further subdivided into increasingly advanced levels of clinical skills, history-taking techniques, and pearls. Sapira states that the goal of his book is to "help the reader achieve the correct personal, metaphysical, and epistemologic perspectives on the artful science of clinical examination." The author brings to the book his own brand of the unique art of the history and physical examination by sharing his own history and career in medicine with the readers.

The strong points of the book are the author's inclusion of pearl upon pearl regarding the history and physical examination. Each chapter is on one hand an excellent reference for the physical examination of the stated organ while on the other hand a fascinating history of the evolution of the techniques of physical diagnosis. Sapira also uses many of his own clinical anecdotes and illustrations to reify various diagnostic maneuvers. The most striking aspect of the text has to be Sapira's passion for his art and his obvious respect for those who have gone before him who were also true scholars of bedside diagnosis.

If there can be any criticism of this book, it would have to be his chapter on clinical reasoning. Although this chapter is good, the author relies too heavily on his own writings and fails to reference other excellent scholars in the area of clinical problem solving, such as Kassirer and his colleagues.

For a medical student or resident who is looking for more than a dog-

matic text on physical diagnosis, *The Art and Science of Bedside Diagnosis* can be highly recommended. For the practicing physician, this book makes for the most entertaining reading of a physical diagnosis text that one could hope to find.

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Consultation in Internal Medicine. John T. Harrington. B. C. Decker, Philadelphia, 1990, 632 pp, price not available (paperback). ISBN 1-55664-076-5.

With perfect timing, this compact manual arrived while I was serving as attending physician on the inpatient service. This volume is one of several in a Medical Consultation Series, authored by faculty associated with Tufts New England Medical Center. The author states that the topics covered in the book comprise approximately 90% of those for which internists are asked to consult on hospitalized patients. Rheumatology and endocrinology are omitted because they are usually the subject of outpatient consultations. Neurology is the subject of a separate handbook.

The level of these condensed (10 pages or less) chapters is that of the "young internist or surgeon" who desires internal medicine consultation. Obviously, this slightly more than pocket-sized manual did not replace consultation in our care of inpatients. I found it invaluable, however, in teaching residents at the bedside on short notice.

The emphasis is on differential diagnosis of clinical syndromes, such as congestive heart failure, anemia, chronic diarrhea, etc, with special regard to parsimonious use of laboratory tests, and on specific therapeutic issues, such as "selecting a parenteral cephalosporin," endocarditis prophylaxis, anticoagulation, or adjuvant cancer therapy. The selected reference lists with each chapter are admirably brief.

The chapters are uniformly readable and well organized. Some, such as that on diabetes, are too broad in

scope to be very useful in such a brief format. A few, such as that on cardiovascular screening for athletes, are skewed so far toward pathology as to be inappropriate for primary care practice. All have as their focus the hospitalized patient and, therefore, will be of limited use in outpatient or nursing home settings. Details of treatment, such as medication dosages, are not included.

This book should aid in clinical reasoning at the bedside of hospitalized adults, speaking clearly and succinctly with the voice of a consulting internist.

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Principles and Practice of Pediatrics. Frank A. Oski, Catherine D. DeAngelis, Ralph A. Feigin, Joseph O. B. Warshaw (eds). J. B. Lippincott, Philadelphia, 1990, 2115 pp, price not available. ISBN 0-397-50707-0.

This textbook is the latest choice for medical educators and clinicians practicing pediatric medicine. Departing from its traditional competitors by virtue of its organization, it is divided into five sections based on the "way the specialty is practiced today": General Pediatrics, The Fetus and the Newborn, Ambulatory Pediatrics, The Sick or Hospitalized Patient, and The Pediatrician's Companion: Important Things You Forget To Remember.

The parts on ambulatory pediatrics and the Pediatrician's Companion are especially relevant to students and practitioners in family practice. The sections on sports medicine and school health may be particularly useful to community-based family physicians. There are extensive discussions on developmental disabilities including disorders of speech, language, and behavior and psychiatric disturbances. The section on The Sick or Hospitalized Patient is structured by organ system in the more traditional model of a general text.

The scope of this text is extensive; however, an excellent index and table

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of contents provide ready access to the information contained therein. Two hundred sixty-one contributors in multiple disciplines provide a wide range of information and experience. Illustrations are easily understood. Its advantage over other pediatric textbooks for family physicians is its specific section on ambulatory pediatrics.

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Medical Procedures for Referral. Richard Sadovsky, David H. Gordon, Richard M. Stillman. *Medical Economics Books, Oradell, New Jersey, 1989, 551 pp, \$55.95. ISBN 0-87489-498-0.*

Effectively informing patients about diagnostic and therapeutic procedures is problematic at best. Medical-legal considerations alone mandate a full information exchange. Patients must be informed about the reason for the procedure or test, how it will be performed, and the cost. They must be made aware of possible side effects and potential risk as well as benefits. Alternative methods for obtaining the needed clinical information or obtaining the desired results should be reviewed. The patient must have enough information to be a knowledgeable and effective partner in procedure and test selection.

The authors of *Medical Procedures for Referral* set out to develop an informative manual for primary care physicians to use when discussing complex diagnostic and treatment procedures with their patients. In large part, they have succeeded in accomplishing their goal.

The content is logically organized by organ system into 12 sections with two additional sections devoted to imaging and other multisystem procedures. The list of tests and proce-

dures is not intended to be exhaustive but consists of those most frequently discussed by primary care physicians. Each chapter deals with a specific test or procedure, discussing indications, alternative choices, risk of failure, contraindications, preprocedure preparation, patient education, procedure description, postprocedure information, complications, and several frequently asked patient questions with suggested responses. There are recommendations regarding informed consent. The photographs and illustrations intended to provide patient information about specific tests or therapeutic procedures are of variable quality and usefulness.

The patient education sections are at times somewhat incomplete, but they have the value of providing suggested terminology to convey an understanding of complicated technical procedures for the layman. The patient question sections are well written and will probably provide a helpful review of current information for the primary care physician as well as the patient. The portions of each chapter describing the mechanics of the procedure, potential complications, and alternative choices are complete and quite useful.

This reference work, the first of its kind, will be of value for primary care physicians and residents in training. It will also serve well as a reference in the nurses' station of primary care offices, since many patient inquiries about diagnostic and therapeutic procedures are directed to nursing personnel.

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Atlas of Human Anatomy. Frank H. Netter, Sharon Colacino (consulting ed). *Ciba-Geigy Corporation, Summit, New Jersey, 1989, 504 pp, price not available. ISBN 0-914168-18-5.*

Thirty years ago I was in London cramming for the Primary Examination of the Royal College of Surgeons, which included anatomy in infinite detail. What wouldn't I have given then for this magnificent book. For a family physician today, its relevance is less apparent.

The author in his introduction explains that it was important to achieve a happy medium between complexity and simplification. Indeed, the drawings are perfect, beautifully executed and printed, with a wealth of detail. The labeling is clear, adding explanation and emphasis. Diagrams provide clarity and understanding to anatomy that previously was obscure. Many drawings supply new, almost startling insights. There is some applied anatomy, but the book essentially is an atlas.

Porning over the pages was a voyage of discovery. I recalled with delight information pigeonholed long ago, marvelled at the clinical relevance of some of the illustrations, thought "so that's how it really is," as I dissected a particularly telling drawing or diagram.

In day-to-day terms, *Atlas of Human Anatomy* may not be greatly missed. Yet, it is a work of art, deserving to be studied, shared with aspiring physicians, sons and daughters perhaps, and treasured. What a magnificent gift it makes!

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