

## Reviews of Books, Software, and Audiovisual Materials

*Difficult Medical Management*. Robert B. Taylor. W.B. Saunders Company, Philadelphia, 1991, 768 pp, \$75.00. 0-7216-8768-7.

Dr Taylor notes that he uses only a fraction of the material in his collection of reference texts, but that he tends to use that fraction repeatedly. This text was intended to gather that often-used information in one volume, with a focus on therapy. Dr Taylor states, "The intended reader is the practicing clinician—the primary care provider as well as the specialist—who encounters therapeutic problems outside his or her field of expertise."

*Difficult Medical Management* covers 93 topics, presented in alphabetic order, from adult respiratory distress syndrome to ventricular arrhythmias. The topics have been chosen well. The editing, figures and tables, page layout, and type style are excellent.

With the purpose of covering only a fraction of medical conditions, the text is intentionally incomplete. Chapters average 6 to 7 pages, a length that prohibits completeness, especially for topics chosen for their difficulty. Many of the therapeutic recommendations are nonspecific; recommendations often specify what to do without indicating how to do it (eg, perform a paracentesis).

The most recent citations are from 1989, creating a clinically important information lag for some of the topics. For instance, etidronate therapy is mentioned in the section on osteoporosis, but two new studies<sup>1,2</sup> that should place this therapy into every family physician's armamentarium are too recent to be cited. Similarly the new data on the role of selegiline in Parkinson's disease are too current to be included.<sup>3</sup>

I found many statements and recommendations that deserve fur-

ther referencing. Misstatements occur, although infrequently.

For the clinician unable to maintain regular journal reading, *Difficult Medical Management* offers an opportunity to review reasonably recent information on 93 topics, each covered in several pages. The topics covered in this text could serve as an outline for discussions in a residency setting, but supplemental literature from the last several years would be necessary. The book is not a how-to manual of the type popular among residents. I do not believe this publication was intended to replace or will replace any of the standard office library references. It may be useful as a supplement to the office library, but I have difficulty visualizing it as a tattered-edged treasure in a collection.

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### References

1. Watts NB, Harris ST, Genant HK, et al. Intermittent cyclical etidronate treatment of postmenopausal osteoporosis. *N Engl J Med* 1990; 323:73-9.
2. Storm T, Thamsborg G, Steiniche T, et al. Effect of intermittent cyclical etidronate therapy on bone mass and fracture rate in women with postmenopausal osteoporosis. *N Engl J Med* 1990; 322:1265-71.
3. Cotton P. Many researchers, few clinicians, using drug that may slow, even prevent, Parkinson's [news]. *JAMA* 1990; 264: 1083-4.

*Stress and Women Physicians* (2nd Edition). Marjorie A. Bowman, Deborah I. Allen. Springer-Verlag, New York, 1990, 216 pp, \$19.50 (paper). ISBN 0-387-97319-2.

Although the first edition of this book was published just 5 years ago, this, the second edition, has been

long anticipated. It does not disappoint.

The 14 chapters cover women's specialty choices, productivity, practice characteristics, marriage, child-bearing, and stress. Although written by two family physicians, the focus is on medicine in general; no family medicine or primary medical care bias is in evidence. A new chapter entitled "Women Are Different: Women Physicians' Ways of Healing" provides an especially useful and provocative addition by reviewing sex-related differences in personality, achievement, and practice.

This book has no peer for collecting in one place the US literature on women physicians. The chapter-end bibliographies contain an astonishing number of titles published since 1985. It is a rare paragraph that does not refer to at least one published research study, often many more. The mostly short chapters routinely cover 30 to 50 research articles, and there is surprisingly little overlap from chapter to chapter. The authors are to be commended for the constructively critical approach taken to published literature. Some important and often-quoted studies are individually discussed in a paragraph or more, with excellent attention to study design and analysis issues.

Strength in documentation is also the book's chief weakness. The studies roll by with breathtaking speed and density. Try as I might to read the book through in one or two airborne cross-country sittings, I never finished more than a chapter (usually less) before setting it aside to think and catch my breath. It is not easy reading.

I expect that the book's principal market will prove to be women physicians, but it is hard to imagine any residency program, any medical library, indeed any physician who



would not benefit from reading and having this volume on the shelf at ready access.

I am sorry (for any number of reasons) that a third edition will probably be needed by 1995 but look forward to reading it just the same. This second edition is highly recommended.

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*The Tropical Traveler*, Version 2.8 (1990). Hobbit Software, Inc, PO Box 308, Victoria Stn, Montreal, Canada H3Z 2V8. Canadian: \$245.00 + \$10 s/h, \$80/yr for updates.

HOW SUPPLIED: 1 360K (5 1/4") diskette.

DOCUMENTATION: *Read Me* file on diskette.

HARDWARE REQUIREMENTS: IBM PC or compatible microcomputer; 5 1/4" floppy drive.

DEMONSTRATION DISK: Available free.

MOUSE, NETWORK, OR TOLL-FREE CUSTOMER SUPPORT, OR MONEY BACK GUARANTEE: No.

*The Tropical Traveler* is an easy-to-use program that provides advice for patients planning foreign travel. The program may be run from a 5 1/4-in. floppy disk drive or copied to and run from a hard disk.

I evaluated *The Tropical Traveler* on multiple IBM systems and on a Compaq LTE-286, which included among them monochrome, color, and LCD displays, and on Hewlett Packard Laser Jet 500+, Okidata, and IBM printers. The program ran noticeably faster when installed on a hard disk. The display settings, which are not modifiable by the user, are good.

The program is menu-driven with logical forced-choice options

for every entry except the user's name. The program provides choices for age group and sex and for pregnancy status if the user is female and within the appropriate age range. The next option is a window listing 200 countries, up to 10 of which can be selected per "consultation." The instructions suggest obtaining information about countries individually if long stays are anticipated because "the recommendations will be more precise for each country visited. On the other hand if be going [sic] to several countries in a short period of time, then list them all (up to 10) in a single consultation so that the risk factors are computed by the software package and that the traveler can leave home with all the required vaccinations and the appropriate chemoprophylaxis [sic] against malaria." The ability to compile medical recommendations for 10 countries in a matter of seconds provides a logical rationale for computerization of this task.

After selecting countries, the program prompts users to provide vaccination status (yellow fever, cholera, typhoid, polio, tetanus, gamma globulin) and other health data that may influence travel. The user may then display or print *The Tropical Traveler's* recommendations. The print function worked flawlessly with all systems tested on the first attempt. Recommendations are provided in narrative form for food and water. Other travel hints are given in addition to vaccine information; a feature to simply list suggested vaccine and drug prophylaxis recommendations, which would be useful for physicians, is not incorporated.

The program has several "annexes," which include vaccine schedules, brief vaccine information, and a reference list. The length of the vaccine information averages two to three sentences. The sources for the

program's recommendations are the US Centers for Disease Control (CDC), its Canadian counterpart, and the World Health Organization. The program's narratives are unreferenced, and vaccinations that were recommended by health organizations are usually not distinguishable from those that are required for entry by the host country.

Software updates are promised at least twice per year, whereas the CDC's *Summary of Health Information for International Travel* is updated biweekly. The program does not mention the CDC's 24-hour Malaria Hotline (404-332-4555) for users to obtain current malaria recommendations during intervals between updates.

*The Tropical Traveler* does not lend itself to self-education; for example, the user cannot produce lists of countries for which a specific vaccine may be recommended.

In summary, *The Tropical Traveler* provides narratives, including information about vaccinations and malaria prophylaxis, based on individual data and itineraries. For the physician who has patients traveling abroad, this program may be useful as a patient service. *The Tropical Traveler* would probably have broader appeal to physicians if it (1) contained sufficient information about vaccinations, about malarial prophylaxis, and about options for prevention or treatment of traveler's diarrhea to serve as a basis for making informed consent discussions, and (2) allowed the user to generate a simple referenced listing of suggested vaccinations and prophylactic medications based on the entered data.

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