Reviews of Books, Software, and Audiovisual Materials

Transvaginal Sonography (2nd Edition). I. E. Timor-Tritsch, S. Rottem (eds). Elsevier Science Publishing Co, Inc, 1991, 521 pp. ISBN 0-444-01577-9.

This latest version of *Transvaginal Sonography* describes in very practical terms what is new in transvaginal ultrasonography, what can now be seen, and how it can be used. This remains one of the most clinically relevant books on the use of transvaginal ultrasonography. It is by far superior to other books on this subject.

The book is organized in a very practical way so that clinically relevant problems can be easily identified along with normal anatomy and physiology. The chapters are easy to read, clear, to the point, and illustrated by excellent drawings and photographic images of good quality. The print and paper are excellent.

This new edition is worth purchasing because of the expanded applications of transvaginal sonography in obstetrics, gynecology, and urology that are described. The material is up-to-date without sacrificing basic information. The references, tables, figures, and index are easy to understand and use. This book contains relevant information for all physicians involved in the care of women, whether in the office setting, the emergency department, or the hospital.

The book provides an excellent, clear introduction to ultrasound physics, with excellent illustrations and explanations. It has one of the easiest to understand explanations of transducers and Doppler ultrasonography. It provides clear and extensive explanations and exhaustive lists of updated manufacturer equipment specifications, and goes into great detail about practical and helpful hints of clinical importance in the use of this technique.

Transvaginal Sonography reviews basic pelvic vascular physiology, fallopian tube and ovarian anatomy and pathology, and fetal anomalies; best of all, it contains an excellent review of sonoembryology. The book presents clear and balanced discussions about the use of transvaginal vs transabdominal sonography, the limitations of transvaginal sonography in ovarian malignancy detection, and the use of color Doppler in pelvic malignancy; also provided are new insights into the pathology of the yolk sac and early fetal demise. Topics such as infertility, placenta previa, and placenta accreta are presented well. The chapter on ectopic pregnancy is clear and concise, but lacks some of the more recent data on the use of hormonal markers for early detection.

The most exciting new topic in the book relates to the visualization of the second and third trimester fetal brain. The chapter on procedures and office and emergency use of transvaginal sonography is also excellent.

This reviewer highly recommends this book for anybody involved in diagnostic ultrasonography.

Ricardo G. Hahn, MD
Department of Family Medicine
College of Medicine
University of Tennessee
Memphis

Manual of Neurology Diagnosis and Therapy (4th Edition). Martin A. Samuels (ed). Little, Brown & Company, Boston/Toronto/London, 1991, 421 pp, $24.50. ISBN D-316-76994-0.

The Manual of Neurology Diagnosis and Therapy, now in its 4th edition (1st edition, 1978), continues to provide in a concise and useful form advice on diagnosis, treatment, and management of common neurologic problems. It does not include details of the basic neurologic examination but assumes just the right degree of sophistication expected in residents and practitioners by providing help only with the more difficult diagnoses.

As in previous editions, the editor and his panel of 12 colleague contributors have managed to condense into this manual a great deal of useful clinical and therapeutic information necessary for dealing with neurological problems in primary care. The chapters are grouped in an interesting fashion, seven dealing with major neurological symptoms such as dizziness and headache, and ten with common conditions such as stroke, trauma, and neoplasms. This simple grouping of the material makes it a convenient and rapid reference book for the busy physician. New material added since the last edition appeared 5 years ago includes new information on persistent vestibular dysfunction, Lyme disease, brucellosis, recurrent glioma, complications of radiation therapy, and neuroleptic malignant syndrome (NMS). This last condition is occurring more frequently because of the increasing use of neuroleptic drugs such as carbidopa-levodopa (Sinemet). The author (Dr S. M. Sagar) points out that sudden withdrawal of carbidopa-levodopa may precipitate a dangerous clinical emergency (mortality rate 15% to 20%) requiring acute intensive care support.

The chapter on headache is comprehensive but lacks information on the new headache classification. The established but time-worn Friedman categories based on Har-

old Wolf's now abandoned vasogenic theory should have been replaced by the new classification introduced in 1988 by the International Headache Society. Among the many changes, the terms classic and common have been replaced by the less confusing "migraine with aura" and "migraine without aura."

The editor has avoided the patchiness and unevenness in quality of writing found so often in works involving many authors. Dr Samuels also coauthored three excellent chapters on coma, mental retardation dementia, and epilepsy.

Much use of tables, diagrams, and protocols is made throughout the text. Each chapter is followed by a helpful list of selected readings, some of which are extensive (44 on headache). The index is excellent, and a new appendix lists educational and support agencies for patients with specific neurologic disorders, which is of particular value to the family physician. I would have enjoyed slightly larger print, an unaffordable luxury where size of the volume is a consideration. Neurology is a field that can easily perplex the generalist; this small volume provides an excellent *vade mecum* to help resolve this problem.

Robert Smith, MD
Department of Family Medicine
College of Medicine
University of Cincinnati
Medical Center
Cincinnati, Ohio

Color Textbook of Pediatric Dermatology. William L. Weston, Alfred P. Lane. Mosby—Year Book, St Louis, 1991, 300 pp, $68.00. ISBN 0-8151-92363.

During the last year, several excellent color textbooks of dermatology have been published for the primary care physician. The current publication, *Color Textbook of Pediat-* *ric Dermatology,* by Weston and Lane, is an excellent addition to this important clinical field. The authors, who have dual academic appointments in pediatrics and dermatology, have written a very practical and useful book on pediatric dermatology that will certainly prove helpful in many daily patient encounters. The text is geared to common pediatric dermatoses, but it also covers those that are rare or presented infrequently.

The greatest strength of this book lies in its consistent use of high-quality color photographs throughout the chapters. The size of many of these photographs is smaller than one might wish, but such a compromise was probably necessary for the 400 such photographs to be included while keeping the book's overall length and cost reasonable. The consistent writing style provided by only two authors also makes for enjoyable reading.

The layout of each chapter is consistent with standard categories of clinical features, different diagnoses, pathogenesis, and treatment. The authors' addition of patient education and suggested follow-up sections for each disease are an important and welcome addition to the dermatologic literature. In addition, Weston and Lane have included many tables, which for the most part are clear and helpful. The authors have also used a problem-oriented differential diagnosis index, attempting to give the primary care clinician a technique with which to differentiate between various types of dermatologic lesions. Unfortunately, the practice of categorizing lesions by colors, and differentiating lesions in newborns or infants from those in children, is somewhat confusing and not easily applied. In future editions of this book, the authors should redesign the problem-oriented index to make it simpler and more effective. The section on dermatopharmacol-

ogy is particularly useful, and the bibliography at the end of each chapter is excellent.

Although the *Color Textbook of Pediatric Dermatology* addresses only the treatment of pediatric dermatoses, much of what is contained in the book is applicable to adults presenting with the same disorders. At a cost of $68.00, however, some physicians, particularly residents and medical students, may prefer to purchase a single comprehensive text that covers dermatologic disorders in both children and adults; but, for those physicians who wish to increase their knowledge of dermatology and are considering purchasing a new text, this book has much to offer and will prove quite useful.

Adam O. Goldstein, MD
University of North Carolina
School of Medicine
Chapel Hill

The Foot in Diabetes. G. James Sammarco (ed). Lea & Febiger, Philadelphia, 1991, 235 pp, $45.00. ISBN 0-8121-1358-6.

Foot problems in patients with diabetes are commonly seen by primary care physicians. Of course, the cardinal rule of foot care in patients with diabetes is to examine the patient's feet with socks off at frequent intervals, preferably at each office visit. The examination can be brief, and should include a visual inspection of the skin, palpation for pulses, and assessment of tendon reflexes and vibratory and pinprick sensations. Early referral to orthopedic or podiatric consultants is warranted for remedial treatment of refractory toenail problems, calluses, or infections. Patient education, proper footwear, and daily inspection and care of the feet by the patient or a caregiver is crucial to the prevention of serious foot problems.

There have been a number of recent advances in our understanding of the pathophysiology, diagnosis, and management of problems such as foot ulcers, foot infections, and peripheral neuropathy. Thus, a practical text on the foot in diabetes, targeted to primary care physicians, would be a welcome addition to the literature. Dr Sammarco's book, however, is targeted to orthopedic surgeons rather than to primary physicians. Although there is an excellent initial overview chapter on diabetes in general, the other chapters are of uneven quality and of uneven relevance to primary care physicians. For example, the chapter on foot infections focuses on the hospital management and surgical treatment of advanced infections, and largely ignores the bacteriology and specific medical management of foot infections often seen in office practice.

Although a good deal can be learned from studying this book, the topical rather than problem-oriented structure of the text is an obstacle to using the book as an efficient resource in office-based practice. If you are an orthopedic surgeon, you may want to buy this book. If you are a primary care physician, other sources of information on the foot in diabetes are more useful.

Patrick J. O'Connor, MD, MPH
Department of Family Medicine
University of Connecticut
Health Center
Hartford

Medical Disorders During Pregnancy. William M. Barron, Marshall D. Lindheimer, (eds). Mosby-Year Book, St Louis, 1991, $85.00. ISBN 0-8151-0519-3.

This book is a comprehensive, well-written resource for any clinician who provides medical care for pregnant women. The book addresses both the more common medical disorders during pregnancy, such as hypertension and diabetes mellitus, and the infrequently encountered disorders, which are organized by the affected organ system. Each section includes expected changes in the particular organ system as a result of pregnancy, concerns regarding the impact of pregnancy on the disease condition and the effects of the condition on the pregnancy, diagnostic/risk assessment, pregnancy management, and breast-feeding concerns. The approaches suggested are not overly aggressive, and the tables and algorithms, particularly in the chapters on cardiac and pulmonary disorders, are quite helpful. Most chapters attempt a critical review of the literature, although the controversial areas are not always presented. Unlike some texts, this book includes a chapter on fetal exposure to x-rays, microwaves, ultrasound, magnetic resonance imaging, and isotopes, but does not address the more common work exposures such as video display terminals or environmental exposures. The book's major flaw is the failure of the authors to acknowledge and discuss the psychological issues that often arise for pregnant women with preexisting medical disorders. There are occasional problems with the language chosen, including paternalistic comments about permitting gestation and the sympathetic clinician taking unwarranted risks. In addition, despite one of the stated goals of this book being the promotion of cooperation and communication among physicians from different disciplines, the team approach advocated seems to ignore the family physician and nurse midwife's roles, and the facilitation of communication is never addressed. There is only a limited discussion on the management of smoking during pregnancy. Finally, the chapter on neurologic disorders barely mentions backache and the complications of regional anesthesia, problems that affect large numbers of women. Overall, how-

ever, the book is a good reference that is succinct and easy to read.

Mindy Smith, MD, MS
Department of Family Practice
University of Michigan
Medical Center
Ann Arbor

Software Reviews
Gary N. Fox, MD, Section Editor

ICDCODEX, Version 2.01 (1991). Conrad Seitz, 1331 Astral Drive, Barstow, CA 92311. Telephone (619) 252-8560. $50.00.

DOCUMENTATION: Six pages printed from a documentation file during installation.

HOW SUPPLIED: One 1.2KB (5 ¼″) or 1.44 KB (3 ½″) diskette.

HARDWARE REQUIREMENTS: IBM-compatible with DOS 3.1 or greater; 512 KB RAM; one floppy drive; hard drive with at least 5 MB free.

MOUSE SUPPORT: No.

NETWORK SUPPORT: No.

TOLL-FREE CUSTOMER SUPPORT: No.

DEMONSTRATION DISKS: No.

MONEY BACK GUARANTEE: No.

ICDCODEX is an ICD-9-CM coding program. When the user enters a diagnosis using medical terminology, the program produces a list of the possible ICD-9-CM codes from which the user may select. Once a code is selected, it may be pasted into another program, such as a billing program. The more complete the diagnosis that is entered, the shorter the list of possible codes.
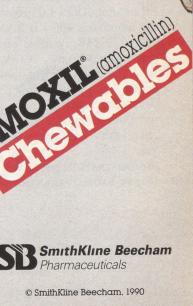
The program is easy to learn. ICDCODEX may be installed in a memory resident (TSR) pop-up mode or may be used as a stand-alone application.

On the test system, an IBM-compatible 386-25, the program worked speedily and accurately. The program functioned exactly as described in the documentation.

When a general term is entered, the program retrieves numerous, remotely related terms. For example, entering "hypertension" produces 53 retrievals, including "Hypertensive Encephalopathy (437.2)" and "Hypertension, Postpartum (624.24)." The users, usually office personnel, would need sufficient familiarity with coding and with the patient to make the appropriate choice among the options. Additional on-screen guidance for coders would be helpful. Also, the program will display a diagnosis if the ICD-9-CM code is entered.

The database supplied with the program is an abbreviated version of ICD-9-CM, but the program is structured to allow incorporation of the complete AMA data file. The full ICD-9-CM data file, which I recommend, is available from the American Medical Association for an additional $170. With the supplied database, ICDCODEX handles diagnoses from the common to the obscure. All 11,000 official diagnoses are included, along with some 9000+ synonyms. "Measles" returns the same code as "rubeola," "UTI" returns codes for "Urinary Tract Infections," and "HTN" returns codes for "Hypertension." The program could not find "ASCVD" or "PMS," so some common abbreviations are not listed in the synonyms list. However, additional codes and diagnoses may be added to or deleted from the database by users.

When installed as a memory-resident utility, ICDCODEX must be loaded before other TSRs (per the installation instructions). Still, it would not function reliably under *Windows* or with some other TSRs (eg, *Sidekick*). Because it is unreturnable, I recommend that prospective purchasers call the author to discuss compatibility, particularly with the office's billing software, before pur-

chase. (My billing program, DATA-MEDIC 4000, worked well with ICD-CODEX, except for the inconveniences created by ICDCODEX's lack of network support.) The pop-up version uses 8K of RAM when inactive; it uses expanded or extended memory if available.

In summary, ICDCODEX is useful in a family physician's office for the purpose for which it was designed. The latest version does not offer network support and requires a separate $170 purchase if the complete ICD-9-CM database is desired. For an office currently doing manual coding, coding software would be helpful. ICDCODEX is one such program with a reasonable price.

Robert Silverberg, MD
Mohnton, Pennsylvania

ALPHA II CODEFINDER Version 1.10 (1991). Unicor Medical, Inc, 4160 Carmichael Road, Suite 101, Montgomery, AL 36106. Phone 1-800-825-7421. $999.00.
HOW SUPPLIED: Five 3 ½″ or 5 ¼″ floppy disks.
DOCUMENTATION: 38-page looseleaf printed manual.
HARDWARE REQUIREMENTS: IBM-compatible XT, 286, 386 or 486 (286 or better recommended). DOS 2.0 or later (DOS 4.01 recommended). Minimum 400 KB RAM. Minimum 12 MB available on a hard disk. Monochrome, CGA, EGA, VGA monitor (CGA minimum suggested, VGA preferred).
MOUSE SUPPORT: No.
NETWORK SUPPORT: Yes.
TOLL-FREE CUSTOMER SUPPORT: Yes.
DEMONSTRATION DISK: Yes.
MONEY BACK GUARANTEE: No.

ALPHA II CODEFINDER is a program designed to find an ICD-9-CM code, check for the code's specificity, and sequence multiple codes according to the American Hospital Association's coding guidelines. When the user enters a description of a diagnosis (not necessarily the diagnosis itself), the program will return the most specific code (to the 5th digit) that matches the description it received. Multiple coding is supported.

The program is self-installing from the supplied floppy disks onto the hard drive. Initially, I had difficulty starting the program, but a toll-free call to the publisher solved the problem in a few minutes. Although the manual does not mention it, it is necessary to manually copy several extra files from the floppy to the hard drive, which my version of the installation program did not do. The publisher provided an easy fix and stated that this bug would be corrected in the next version.

On the test system, an IBM-compatible 386-25, the program worked exactly as promised by the manual. It was easy to learn, and can be operated either as a free-standing program or as a memory-resident (TSR) pop-up.

This program is a more elegant coding program than ICDCODEX. It contains all the codes listed in the ICD-9-CM database, along with their descriptions. The program asks you to input one or more descriptive nouns or noun-based adjectives (aorta, aortic), and presents a menu of choices of possible diagnoses. Having chosen the best general diagnosis, the user is then prompted to select additional, more specific terms that lead to the final code and description. Next, the program prompts the user to supply an additional code if one would be required by the ICD-9-CM protocols. Multiple diagnoses are then sequenced according to AHA coding guidelines to qualify for maximal reimbursement by third parties. The final codes can be pasted into a billing program.

A keyword system is used for input. Entering only the term "aortic" calls up 44 choices, whereas entering "aortic stenosis" returns 16 possible choices. Partial word entries ("aort", "sten"), and common abbreviations (ASHD, PMS, CA, DUB, OBS, UTI, URI) are supported as well. Some obscure and eponymic disorders can be found in this database that could not be located in ICDCODEX (eg, Huchard's disease; Kallman's syndrome, ovarian dysgenesis). Entering an ICD-9-CM code returns the descriptive diagnosis specific to that code.

In summary, I found ALPHA II CODEFINDER to be an elegant, easily used, almost foolproof method of coding diagnoses. One should also be aware that, for $199.00, the same publisher sells a coding book (*Alpha Key Manual*) that theoretically allows a noncomputerized office to determine codes in the same manner as the computer program. It seems that this software is in a period of revision, with several bugs being corrected during the review period. Comparing the ICDCODEX program (cost, $50) with ALPHA II CODEFINDER (cost, $999.00), my opinion is that the less expensive program is a better value, although the more expensive program is more complete, easier to use for an inexperienced clerk, and more technically refined.

Robert Silverberg, MD
Mohnton, Pennsylvania