

Reviews of Books and Software

Acute Obstetrics: A Practical Guide. Martha C. S. Heppard, Thomas J. Garite. Mosby-Year Book Press, St Louis, Mo, 1992, 316 pp, \$29.95. ISBN 0-8016-2147-X.

This pocket reference for obstetrics was developed from a guide for interns prepared by the first author during a leave of absence forced by her own complicated pregnancy. The text was originally geared for incoming first-year residents at a tertiary care institution, and most of the weaknesses of this handbook stem from oversimplicity and reliance on protocols from a single tertiary care institution.

The book is well organized, with individual sections on prenatal evaluation, medical problems during pregnancy, obstetric complications, and a rich and detailed appendix. The section on prenatal evaluation, which includes a template admission note with blanks to fill in for gravidity, parity, and so on, may be too simplistic for the practicing family physicians.

The section on medical problems in pregnancy is useful, but family physicians may find the authors' reliance on medical referral overzealous. For example, the authors encourage consultation with an internist for the management of patients with hypertension and asthma, and go so far as to state that "a change in anticonvulsant medication can be made only after consultation with a neurologist." Conditions such as these should be readily handled by practicing family physicians.

The section on obstetric problems contains other biases toward a tertiary-care approach to obstetrics. This is most evident in the discussion of preeclampsia, in which the authors state that all patients with mild preeclampsia should be hospitalized for the duration of their pregnancy, an approach not generally practiced in primary care obstetrics. Additionally, the obstetric complications section leans heavily on institutional protocols that are sometimes inconsistent with the literature. This is illustrated in the section on antibiotic prophylaxis for group B streptococcal disease, in which a dose of ampicillin is recommended that was not used in the original studies nor specified in the recommendations from the American Academy of Pediatrics Committee on Infectious Diseases. If the authors feel that their dosages are better than the recommendations of others, a

clear rationale should be given for the deviation.

Finally, one criticism of the book is its reliance on outdated references and other handbooks, which may contribute to some of the inconsistencies that appear in the obstetric complications section. Although the book was published in 1992, many of the charts refer to papers published in the early 1980s.

All in all, while there are useful sections in *Acute Obstetrics*, it does not appear to be superior to many of the other pocket references available. In fact, as noted above, many of the tables and references in this volume are from other handbooks. Practicing family physicians may find this reference overly simplistic, but it would be a useful tool for medical students starting an obstetrics clerkship or for first-year residents who may be comforted by the protocols and order sets it provides.

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Occupational Medicine (3rd Edition). Carl Zenz, O. Bruce Dickerson, Edward P. Horvath (eds). C.V. Mosby, St Louis, Mo, 1316 pp, \$149.00. ISBN 0-8016-6676-7.

Occupational illnesses and injuries result in significant morbidity and mortality. Estimates place the number of new disabling occupational illnesses at more than 390,000 per year and the number of occupationally related deaths at 100,000 per year, yet there is a serious shortage of residency-trained occupational medicine physicians. Even with the several thousand additional non-residency-trained physicians practicing occupational medicine, a significant percentage (perhaps 80%) of workers receive occupation-related health care from their primary care physician.

The goal of the third edition of Zenz's text is to provide basic information on the clinical and operational aspects of occupational medicine. This edition has a pronounced international flavor, with contributions from many well-recognized experts in international occupational medicine.

The book is organized into eight sections. The 11 chapters in Part I (Clinical Factors) address a wide variety of clinical subjects, including the following,

which are of special interest to the primary care physician: "The Role of the Primary Care Physician in Occupational Medicine" and "Determination of Fitness to Work." Occupational trauma, dermatoses, toxicology, and ocular injuries are also covered in Part I. Part II focuses solely on pulmonary diseases. The "Physical Occupational Environment" (Part III) addresses such topics as ergonomics, video display terminals, radiation, heat and cold, vibration, and hearing loss. Part IV explores the chemical environment to which workers are exposed. Part V addresses issues of special concern, such as "Women in the Workplace," reproductive toxicology, and occupational issues of agricultural and hazardous waste workers. The remaining three sections focus on behavioral issues in occupational medicine; disciplines related to occupational medicine, such as occupational health nursing and industrial hygiene; and special areas, such as health promotion, travel medicine and substance abuse in the workplace.

Several new chapters have been added to the latest edition. The chapter on "Cumulative Trauma Disorders (CTD) of the Upper Extremity" is superbly written and helps to clarify the current epidemic of CTDs. The discussion of indoor air pollution highlights the issue of this problem in the home, a subject often ignored in favor of the more widely publicized outbreaks of "sick building syndrome." The new chapters on travel medicine and health promotion are excellent and have application for any primary care physician whose practice involves travel medicine or who has an interest in health promotion.

There are few problems with this edition. Although coverage of the Americans With Disabilities Act is scant, the discussion of employment entrance examinations should be read by all physicians who do "preplacement" physical examinations. The physician involved with occupational issues in health care workers may be disappointed in the lack of information about the Occupational Safety and Health Administration's bloodborne pathogen program. The binding of the copy that I reviewed was poor. The clarity of some of the photographs also was poor but did not detract from the coverage of the subjects.

Occupational medicine physicians or primary care physicians with large oc-

occupational components to their practice should strongly consider purchasing this new edition. Primary care physicians with peripheral involvement in occupational health might be better served by purchasing one of the paperback texts such as *Occupational Medicine* by LaDou, or *Handbook of Occupational Medicine* by McCunney.

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Software Reviews

Gary N. Fox, Section Editor

CLINICAL DERMATOLOGY ILLUSTRATED: A REGIONAL APPROACH (2nd Edition), Mac version reviewed (also available in DOS), 1993. Continuing Medical Education Associates, 4015 Hancock St, Suite 120, San Diego, CA 92110. Individual, \$199.00; institutional (multiple persons using one work station) or network use, \$299.00.

DOCUMENTATION: 8-page pamphlet.

HOW SUPPLIED: CD-ROM disk, CME answer sheet.

HARDWARE REQUIREMENTS: Macintosh Plus or later model with CD-ROM drive, 2 meg RAM (2.5 for System 7), color monitor recommended; IBM-PC or compatible with CD-ROM drive, MS-DOS 3.1 or higher, 640K RAM with 500K available, hard drive strongly recommended, Standard VGA supported but Super VGA recommended.

MOUSE SUPPORT: Yes.

NETWORK SUPPORT: Yes; network compatible.

CUSTOMER SUPPORT: Yes, toll-free, 1(800)227-2632.

DEMONSTRATION DISKS: No.

MONEY-BACK GUARANTEE: 30-day return for credit.

Clinical Dermatology Illustrated: A Regional Approach is a multimedia educational compact disk-read only memory (CD-ROM) for personal computers. It contains text by dermatologists John R.T. Reeves, MD, and Howard Maibach, MD, and is written for use by the primary care practitioner. Information is organized by lesion location rather than by type of lesion. Within each general location (scalp, face and neck, extremities, trunk and generalized lesions, genitals, groin and axilla, and tumors, lumps and marks), individual diagnostic entities are listed.

After selecting a diagnosis, the user is presented with basic information including epidemiology, presenting symptoms, characteristic appearance, differential diagnosis, and standard treatments in text form. The selection of topics includes common skin conditions encountered in family practice and excludes rare diseases. A browse feature is available to locate specific references to a word or phrase. This electronic index enables quick searches for a specific diagnosis or condition that may be included under more than one regional entry.

More than 340 color photographs are available for view on the CD-ROM. The graphics are quite good when viewed on a color monitor. A black-and-white monitor can be used, but there is considerable loss of detail. The pictures are primarily of white patients, but some photographs of dark-skinned patients are appropriately included. Some of the pictures have a soundtrack recording of Dr Reeves giving a short lecture based on personal experience. The quality of these audio pearls is excellent, and I learned several new tips and tricks from listening to them.

There are also 15 patient guides that answer common questions asked by patients. The system is fast enough that an appropriate guide can be printed while the patient is in the physician's office. The information in a guide can also be transferred to a word processor for modification before printing, but this should seldom be necessary. The formulary section includes advice on the use of various topical treatments. The procedure section covers the potassium hydroxide examination and culture for fungi, scabies prep, and skin biopsy.

Clinical Dermatology Illustrated is an excellent state-of-the-art CD-ROM, offering the advantages of electronic index searching and sound not provided by standard textbooks. However, for information on less common skin conditions, a more comprehensive dermatology textbook must be consulted. The price of this software is significantly higher than that of a basic dermatology text, but it includes 20 hours of continuing medical education credit. Overall, I would recommend this disk to anyone who has or is planning to own a CD-ROM player.

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YOCON[®] Yohimbine HCl

Description: Yohimbine is a 3a-15a-20B-17a-hydroxy Yohimbine-16a-carboxylic acid methyl ester. The alkaloid is found in Rubiaceae and related trees. Also in Rauwolfia Serpentina (L) Benth. Yohimbine is an indolalkylamine alkaloid with chemical similarity to reserpine. It is a crystalline powder, odorless. Each compressed tablet contains (1/12 gr.) 5.4 mg of Yohimbine Hydrochloride.

Action: Yohimbine blocks presynaptic alpha-2 adrenergic receptors. Its action on peripheral blood vessels resembles that of reserpine, though it is weaker and of short duration. Yohimbine's peripheral autonomic nervous system effect is to increase parasympathetic (cholinergic) and decrease sympathetic (adrenergic) activity. It is to be noted that in male sexual performance, erection is linked to cholinergic activity and to alpha-2 adrenergic blockade which may theoretically result in increased penile inflow, decreased penile outflow of both.

Yohimbine exerts a stimulating action on the mood and may increase anxiety. Such actions have not been adequately studied or related to dosage although they appear to require high doses of the drug. Yohimbine has a mild anti-diuretic action, probably via stimulation of hypothalamic centers and release of posterior pituitary hormone.

Reportedly, Yohimbine exerts no significant influence on cardiac stimulation and other effects mediated by B-adrenergic receptors, its effect on blood pressure, if any, would be to lower it; however no adequate studies are at hand to quantitate this effect in terms of Yohimbine dosage.

Indications: Yocon[®] is indicated as a sympatholytic and mydriatic. It may have activity as an aphrodisiac.

Contraindications: Renal diseases, and patient's sensitive to the drug. In view of the limited and inadequate information at hand, no precise tabulation can be offered of additional contraindications.

Warning: Generally, this drug is not proposed for use in females and certainly must not be used during pregnancy. Neither is this drug proposed for use in pediatric, geriatric or cardio-renal patients with gastric or duodenal ulcer history. Nor should it be used in conjunction with mood-modifying drugs such as antidepressants, or in psychiatric patients in general.

Adverse Reactions: Yohimbine readily penetrates the (CNS) and produces a complex pattern of responses in lower doses than required to produce peripheral alpha-adrenergic blockade. These include, anti-diuresis, a general picture of central excitation including elevation of blood pressure and heart rate, increased motor activity, irritability and tremor. Sweating, nausea and vomiting are common after parenteral administration of the drug.¹⁻³ Also dizziness, headache, skin flushing reported when used orally.¹⁻³

Dosage and Administration: Experimental dosage reported in treatment of erectile impotence.¹⁻³ 1 tablet (5.4 mg) 3 times a day, to adult males taken orally. Occasional side effects reported with this dosage are nausea, dizziness or nervousness. In the event of side effects dosage to be reduced to 1/2 tablet 3 times a day, followed by gradual increases to 1 tablet 3 times a day. Reported therapy not more than 10 weeks.¹

How Supplied: Oral tablets of YOCON[®] 1/12 gr. 5.4mg in bottles of 100's NDC 53159-001-01, 1000's NDC 53159-001-10 and Blister-Paks of 30's NDC 53159-001-30

References:

1. A. Morales et al., New England Journal of Medicine: 1221. November 12, 1981.
2. Goodman, Gilman — The Pharmacological basis of Therapeutics 6th ed., p. 176-188. McMillan December Rev. 1/85.
3. Weekly Urological Clinical letter, 27:2, July 4, 1983.
4. A. Morales et al., The Journal of Urology 128: 45-47, 1982.



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