Reviews of Books and Audiovisual Materials

Color Atlas of Regional Dermatology. Gary M. White. C. V. Mosby, Inc, St. Louis, Missouri, for Times Mirror International Publishers Ltd, 1994, 316 pp, \$85.00. ISBN 0-7234-2027.

"Not again! Another dermatology atlas!" was my reaction when the *Color Atlas of Regional Dermatology* first crossed my desk. A small book, this atlas appeared at first glance to be elementary, lightweight, hurriedly assembled to compete in the medical texts market. It did not impress me as other bulky atlases have. In medical school, I was told that the first clinical impressions are the most accurate, so I did not bother to open it.

But one night, after I had time to leaf through all 318 pages of this "atlas," I realized that the author took a unique approach to skin diseases. Unlike many atlases, this book is not organized according to the study of diseases of the skin by etiology or by their nosological classification. Instead, it cleverly groups common skin diseases by their topographical location. Inside the front and back covers are illustrations of the covered regions. The table of contents is also arranged by regional topography. Isn't this the way the patients usually present to the physician in clinical practice? They ask: "By the way, doc, what is this rash I've got on my

As a practicing family doctor I can personally appreciate this long overdue and innovative approach, which is based on the clinical experience of a dermatologist with academic connections who practices in a busy managed care environment. This author has discovered a way for busy clinicians to avoid wasting time trying to glean the information needed to diagnose the skin rash of a patient who is waiting in the examination room. Such information is traditionally buried somewhere in a maze of useless verbiage and statistics, difficult to assimilate quickly. In this atlas, the author briefly presents a diagnostic descriptive sketch of a skin lesion and related dermatoses found in a specific region of the body. It is accompanied by a close-up clinical photograph of the lesion. The author then gives the reader current first-line or alternative therapy. He provides abundant cross-references to current dermatologic literature, making the book academically "fit."

There are approximately 850 color photographs distributed throughout 80 alphabetically arranged regions of the

body. The quality of these photographs, however excellent, suffers from a loss of detail due to small size. Another shortcoming is the lack of photographs of dermatoses in nonwhites, which is typical of many of this book's predecessors. There are a few questionable inclusions in the atlas, such as the suction purpura found on the necks of passionate lovers, commonly known as "hickeys."

The \$85.00 price may be daunting to students and residents, and understandably so in view of the book's diminutive size. Nevertheless, on the whole, it is an ideal resource for a busy family physician. As befits the family practice credo, it incorporates the entire body from the top of the scalp to the soles of the feet, and does not discriminate according to the sex or age of patients. And its organization makes it a precious tool for busy clinicians by sending them promptly to the information they need.

Indeed, first impressions may always be right in real life, but I must admit that my first impression of the *Color Atlas of Regional Dermatology* was wrong. I will remember not to judge a book by its size.

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Women's Health: A Primary Care Clinical Guide. Ellis Quinn Youngkin and Marcia Szmania Davis. Appleton & Lange, East Norwalk, Connecticut, 1994, 771 pp, \$45.95. ISBN 0-8385-1230-5.

In these days of controversy and confusion about the components of women's health, I was delighted to receive this book to review. A comprehensive textbook on women's health from a primary care perspective is sorely needed. Although parts of this textbook are interesting, little is informative, and most clinicians would be disappointed.

The authors wanted this book to be a handbook: "a resource that allows any primary health care provider to retrieve basic information easily." They also followed a holistic perspective concerning areas of women's health. The editors are two academic nurses, and all of the authors are nurses. This is clearly a nursing textbook, as reflected by the inclusion of sections at the end of most chapters summarizing nursing diagnoses.

I found that the quality of the chapters varied. The book is organized into

four sections. The first is Women, Health, and the Health Care System. In that section, the first chapter, "Women and the Health Care System," is very good. The review of the history of health care in the United States and the breadth of the discussion and resources listed are excellent. On the other hand, chapter 3, "Assessing Women's Health," is disappointing; the recommendations for prevention, for example, did not reference the US Preventive Services Task Force recommendations. Section II is Promotion of Gynecologic Health Care; Section III, Promotion of Women's Health Care During Pregnancy; and Section IV, Primary Care Problems Affecting Women's Health. The gynecologic and obstetrical sections of this text are better handled than the medical sections.

I expected the chapters on breast health, postpartum care, and lactation to be well done and found that they were. The chapter on medical problems in primary care is superficial. The basic information is present, but in an attempt to cover too much medical material in one chapter, it is too sketchy to be helpful. Chapter 19, "Issues for Women with Physical Disability and Chronic Illness," is excellent. It includes information not usually present in a medical text. The topic of violence against women, although brief, is addressed in a comprehensive manner. Unfortunately, prevention is not organized into one chapter. The index is excellent. The tables and figures are well done. The references are very current in some parts of the text but not in others.

This textbook covers a broad expanse of material. Lists of possible diagnoses, medications, or investigations are included without the perspective of prevalence, morbidity and mortality, or costs to help the reader to interpret such lists. The material is generally accurate; however, the only way to condense a large amount of information in a meaningful manner is on the basis of some critical perspective. In the case of a women's health text, I would suggest considering issues such as disease prevalence, reasons women present for health care, or problems in which gender significantly influences disease presentation or manage-

In summary, this text covers a tremendous amount of material, but the quality of the review is variable and it is not sufficiently discriminating to make this textbook more than a list of differential diagnosis or investigative tests. It may be an excellent reference textbook for some nurse practitioners, but I am still searching for my ideal text in the primary health care of women.

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Caring for a Dying Relative. Derek Doyle. Oxford University Press, New York, NY, 1993, 106 pp, \$14.95. ISBN 019-26248703.

Few things in life are more challenging than caring for a relative or loved one who is dying of a terminal illness. This book is an informative and detailed guide to assist individuals who accept this challenge. It is written for the general public audience and should be recommended by family physicians to caretakers of patients with Alzheimer's disease, cancer, and other terminal illnesses.

It includes a discussion about choices of where dying patients can be cared for, such as hospitals, hospices, and home care, and provides guidelines for working with physicians and nurses to care for the patient in the best possible way.

A chapter on truth provides guidelines for saying the right things to patients who want to discuss their illness. A question-and-answer section presents questions frequently asked by patients along with appropriate responses.

Many very ill people cannot decide what food or drink they want or need. The section on nutrition offers useful hints to help the caregiver provide proper nutrition. The simple principles of caring for the patient's dietary needs are especially helpful for the untrained caregiver.

The section on planning at-home care helps the caregiver plan and set up the sick room, making it homey yet efficient. A detailed list of essentials, including equipment and aids, is also provided.

Unexpected occurrences, such as incontinence, sleep loss, and temporary remission, are discussed. The book addresses feelings of helplessness, resentment, and loss of faith, and offers advice on the best way to help the patient and caregiver through this distressing time.

The author recounts the final days in a person's life, providing the caregiver with a clearer understanding of the dying process. He explains the bodily changes that occur, such as the decreased need for food and a marked increase in the need for sleep. A section on funeral arrangements helps the family make necessary plans after the patient's death, and a chapter on bereavement explains the grieving process. The appendix includes a list of useful organizations and suggested reading.

I would have found this book extremely useful in caring for my mother, who died recently of cancer. It uses simple, everyday language with no medical jargon and is written specifically for untrained caregivers who take on the responsibility of caring for loved ones suffering from terminal illness. *Caring for a Dying Relative* shows caregivers that they can do so more lovingly and effectively than they ever thought they could.

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Short Circuiting Stress, Changing the Way You Think About Stress [videotape]. Robert S. Elliot, MD, narrator. Audio Vision, 3 Morningside Place, Norwalk, CT 38483 (800-367-1604), 1994, 18 minutes, \$295, rental \$100.

Short Circuiting Stress is a videotape on stress management. Essentially, the theory of cognitive restructuring is renamed "short circuiting stress" for this videotape, which focuses on changing the way one thinks about stress. Understanding the role the mind plays in stress can help people develop ways to deal with it.

Most stress management programs focus on physical techniques like exercise, meditation, or relaxation. Although these techniques are excellent at addressing the buildup of stress, they are difficult to use while experiencing stress. This videotape demonstrates techniques that can be used during stressful experiences.

The initial portion of the videotape explains that each stressful situation is a sequence of events. A simple "A + B = C" equation helps the viewer understand this sequence. "A" is the activating event, "B" is a person's belief or interpretation of the event, and "C" is the consequence of or reaction to the event. A person can better deal with stress by controlling his or her interpretation of the situation. The videotape emphasizes that it is not easy to develop new habits because behavior patterns occur over a lifetime and become automatic.

Following the presentation of the equation A + B = C are strategies to

develop new habits. For each strategy, there are examples of how to replace the old ways with these new strategies. It is stressed that new habits will seem strange at first.

The final portion of the videotape reviews the A + B = C equation and the strategies. It reemphasizes that having this power of control over one's reactions is a tool for dealing with stress while it is happening. The viewer is also reminded that new ways of thinking will clash with the old ways of responding, but, in time, will become more comfortable.

Overall, this videotape is practical, uses good examples, and introduces the easy-to-remember formula of A + B = C. It summarizes the theory of cognitive restructuring very well in 18 minutes. Of course, implementing these techniques and seeing results takes more time because the concepts are not simple to implement. The viewer may need support understanding that change occurs slowly and that change begins in small steps. Also, it may be necessary for the viewer to watch the videotape several times to comprehend all its meaning.

This tape could be used by physicians to learn the concept before using this technique of dealing with patients. Physicians could also recommend the videotape to patients. It would be most appropriate to use with patients who have a sufficient degree of sophistication to grasp the basic concept. For patients with significant psychological dysfunction, the tape would not be applicable. If recommended to a patient by the physician, appropriate background information should be provided before viewing. In addition, to further complement the video, a patient could identify some of his or her "As", "Bs", and "Cs" and set goals for changing typical reactions to stress.

For sufficiently sophisticated and cognitive patients, this videotape may be a useful adjunct to the physician's discussions and direction about dealing with stress. Physicians who use it in this manner should consider purchasing copies of this videotape to lend or prescribe to patients.

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