Reviews of Books and Software

Book Reviews
Len Scarpinato, DO, Section Editor

Current Pediatric Diagnosis and Treatment (12th Edition). William W. Hay, Jr, Jessie R. Groothuis, Anthony R. Hayward, and Myron J. Levin (eds). Appleton & Lange, Norwalk, Conn, 1994, 1295 pp, \$41.95. ISBN 0-8385-1446-4.

This is an excellent book with many strengths. The editors' goals are to present "practical, up-to-date, well-referenced information on the care of children from birth through infancy and adolescence" and to "emphasize the clinical aspects of pediatric care while also covering the important underlying principles." The extensive changes in this 12th edition include four new chapters, two new authors, and eight chapter revisions.

This book is strikingly complete. There are excellent chapters, including those on growth and development, adolescence, developmental disorders, psychosocial aspects of pediatric and psychiatric disorders, behavioral disorders and developmental variations, child abuse and neglect, and substance abuse. There is indepth coverage of the details of critical care, nutrition, emergencies, and accidents. There are models of charting, examples of patient interviews, treatment algorithms, graphs of drug levels and toxicity predictors, tables of normal values, step-by-step diagrams of procedures such as vascular cannulation and intubation, and a few black-and-white photographs of specific pathological findings. A series of chapters addressing each organ system is similarly comprehensive in covering clinical manifestations, differential diagnosis, diagnostic criteria, laboratory evaluation, and treatment. Discussions of pathophysiology are generally limited to the information relevant to diagnosis and

The authors address the complete range of pediatric care from routine to highly abnormal, from health maintenance to emergencies, and from counseling to medicating, all with the same attention to detail and specificity of recommendations. This places a welcome equality of emphasis on the "softer" and seemingly less acute psychosocial, anticipatory-guidance, and well-

child aspects of pediatric care. These aspects of pediatric care are harder to teach, difficult to master, and frequently less appreciated for the skill required to do well.

In the rapidly evolving world of medical therapeutics, it is a challenge for any published text to represent the very latest opinions on treatment. This reviewer has noted some areas in which the text does not reflect the recommendations in the most current periodicals. Additionally, some topics are treated differently by separate authors. For example, in the section on the febrile infant, the authors stress in-patient management and, although they allude to outpatient care, do not clearly present some of the most recent protocols for outpatient evaluation and treatment that are being widely used in the care of the very young infant. A later chapter on acute care suggests outpatient management of children younger than 2 to 3 months who have a negative workup, but it does not elaborate on the specifics of drug therapy, laboratory evaluation, or follow-up. In the section on critical care, it was surprising to find a recommendation for the use of theophylline early in the therapy of acute asthma, since this is generally discouraged in recent guidelines. In a later chapter section, specifically on asthma, the use of aminophylline is presented as being of questionable value, but specific guidelines are given for use of this drug, if desired. There are also some discrepancies between the Recommendations for Preventive Pediatric Health Care Flow Sheet presented by the American Academy of Pediatrics (AAP) in 1991 and the flow sheet and discussion presented in the chapter on ambulatory pediatrics. For example, routine urinalysis is recommended on the 1991 AAP flow sheet but discouraged in the chapter as having a low yield. The chapter on immunizations presents an excellent discussion of immunizationrelated issues, including the incidence and validity of contraindications and legal issues such as the national childhood vaccine injury compensation program. However, the actual printed immunization schedules are no longer current. For example, we are now giving MMR at 12 months of age.

The authors meet the challenge of constantly changing treatment practices

in several effective ways. In addition to presenting standard treatment regimens, they clearly describe current controversial treatments, stating pros and cons. They also report current treatment modalities that are in use but not yet of clearly proven efficacy, and present treatments currently under development and evaluation. Additionally, the reference lists that follow each subcategory make it possible for the reader to investigate further the current "state of the art." It is a strength of this book that it reflects the evolution of pediatric therapeutic technique rather than giving a falsely dogmatic approach to treatment. This is certainly a more realistic attitude for any student or practitioner to cultivate about medical science. The reader looking for specific therapeutic guidelines, however, may need to investigate further the most current periodical literature for some topics.

I would highly recommend this volume to anyone participating in the primary care of pediatric patients as well as to those who teach pediatrics to residents and medical students. Although family physicians and primary care pediatricians may not provide care for children with some of the less common conditions included, all of us in primary care are on the front line for making diagnoses, helping families understand their children's special needs, and coordinating care with specialists. Thus, all the information contained can be of great value. This is a beautifully written book with an efficient style that packs each sentence with information. It is organized into 42 chapters, which are divided and subdivided into individually referenced component topics It is well indexed and there is liberal use of tables that provide large volumes of information for reference, comparison, and contrast.

Another goal stated in the preface is to "provide a guide to diagnosis, understanding, and the treatment of the medical problems of all pediatric patients in an easy-to-use and readable format." In this reviewer's opinion, they have effectively met all their goals. This book is a bargain at the price.

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Panic Disorder: What You Don't Know May Be Dangerous to Your Health (2nd Edition). William D. Kernodle. William Byrd Press, Richmond, Virginia, 1993, 118 pp, \$10.95. ISBN 0-9631533-1-5.

This book was written for patients suffering from panic disorder. The author, a psychiatrist, serves as medical director of the panic disorder program at the Tucker Pavilion and medical advisor to the Agoraphobics Building Independent Lives, an agoraphobia self-help group. As such, the author is eminently qualified to write such a needed book.

Published in paperback, the book begins by describing panic disorder and its characteristics. After discussing the differential diagnosis and evaluation of panic disorder, the text addresses the complications and treatment of the disorder. Finally, the author draws a comparison between panic disorder and ulcer disease, reports on his clinical experience with panic disorder, and summarizes the key points about panic disorder that he feels the reader should remember. The book ends with series of case studies.

Altogether, this book presents a concise yet thorough overview of panic disorder and its consequences as well as a refreshingly balanced approach to treatment. Compared with other similar books in the lay press, this one is briefer and generally more balanced than others I have seen. It is generally well written and logically organized. Information is generally up-to-date. The cases included are appropriate, and patients should be able to relate well to them.

There are, however, limitations. By relying on DSM-III-R criteria, the book has immediately dated itself. Failure to use DSM-IV criteria may compromise its shelf life. Geared to the well-educated patient who reads at at least an 11th grade level, the book's descriptions of pathophysiology are generally hard to understand. In addition, these sections are scattered throughout the text rather than being presented concisely in one or two chapters. Results of research studies are described at a level beyond that of the average patient. Although the use of cases is well done, the cases might have been more effectively presented if distributed throughout the book to keep reader's interest. Finally, I am particularly concerned by the treatment section of this book because it does not emphasize that medications are given only to prevent panic attacks rather than to treat one once it has begun. This point should be em-



IMMUNIZATION UPDATE

LIVE NATIONWIDE SATELLITE VIDEOCONFERENCE FOR PHYSICIANS AND THEIR COLLEAGUES

September 7, 1995

Noon to 2:30 pm (EDT) 11:00 am - 1:30 pm (Central) 10:00 am - 12:30 pm (Mountain) 9:00 am - 11:30 am (Pacific)

This live satellite videoconference (sponsored by the National Immunization Program, Centers for Disease Control and Prevention, and the Public Health Training Network, funded and supported by the Association of Schools of Public Health; School of Public Health, The University of North Carolina at Chapel Hill; and the NC Department of Environment, Health and Natural Resources) will:

- Provide the latest information on varicella and associated vaccines for hepatitis A and B.
- Examine strategies to improve the immunization levels in your client population.
- Feature Dr. William Atkinson, medical epidemiologist, National Immunization Program, CDC.
- Encourage participants from all videoconference sites to call in questions for the course instructor on interactive 800 phone lines.
- Enable participants to receive CMEs and CEUs.

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phasized, as it is a common source of confusion to patients.

In conclusion, this paperback book is a concise yet comprehensive book written for educated patients with panic disorder. Despite using DSM-III-R criteria and presenting information on pathophysiology at scattered points throughout the book, it appears to be a superior patient-oriented book compared with those already on the market.

David A. Katerndahl, MD The University of Texas Health Science Center at San Antonio San Antonio, Texas

Software Reviews Gary N. Fox, MD, Section Editor

ADULT HEALTH ADVISOR, Version 3.0; PEDIATRIC ADVISOR, Version 5.0; OB/GYN ADVISOR, Version 2.2 (1993). Clinical Reference Systems, 7100 E. Belleview Ave, Suite 305, Greenwood Village, CO 80111–1636 (800-237-8401). \$395 per program (single user).

DOCUMENTATION: Spiral-bound, illustrated manual, approximately 50 pages, with each program.

HOW SUPPLIED: Multiple 3.5-in. or 5.25-in. diskettes.

MINIMUM HARDWARE REQUIREMENTS: IBM PC-286 or compatible with hard drive, 256K available RAM, and DOS 3.0 or higher. Printer for handouts; HP laser jet—compatible for illustrations. Hard drive space: 2.0 to 2.5MB per program.

MOUSE SUPPORT: Yes.

TOLL-FREE CUSTOMER SUPPORT: 1-800-237-8401.

DEMONSTRATION DISKS: Available. MONEY-BACK GUARANTEE: 30-day. RATING: GOOd.

The Clinical Reference Systems Advisor series is a group of similar programs, each providing computer-based patient education information. Good patient education materials enhance care by reinforcing patient-physician communication and by promoting patients' involvement in their health care.

The process of obtaining, reviewing, updating, and maintaining written materials covering the breadth of topics appropriate to family medicine can be a daunting task. For a busy physician, an electronic filing system with annually updated, peerreviewed patient education materials has

obvious advantages, compared with wall racks or metal files of patient education handouts.

The *Advisor* software series is intended to fill this niche with, for example, the Adult Health program, which contains "patient advice handouts on over 400 medical and surgical topics."

The programs are easily loaded onto the hard disk following simple instructions. Straightforward printer selection and optional Windows grouping and icon installation are also easily accomplished.

On opening the program, the user first encounters a Clinical Reference Systems (CRS) main menu, from which the appropriate Advisor or other CRS program is selected. Once in an Advisor, one can begin locating information by typing initial letters coinciding with the desired title or topic. Users may also scroll through the alphabetical index of available information, access help, or view credits (author and reviewer) information. Many topic areas contain subtopics; for example, under Allergy in the Adult Advisor are anaphylactic shock, asthma, contact dermatitis, food, hives; poison ivy, oak, sumac; and rhinitis. Although they are DOS programs, the Advisors also run under Windows and are easily accessed by mouse or pointing device. The operation is simple, and commands can be quickly learned in either format. I actually preferred the keyboard operation.

Handout content is arranged similarly in each of the Advisors. For each medical condition, a title heads the first page with 2 to 3 pages of text answering questions about the disease, how it occurs, its symptoms, diagnosis, and treatment, how long the effects last, how the patient can take care of it, and what can be done to prevent it or reduce its transmission, etc. Surgical procedures and topics related to testing contain text paragraphs, indicating what the procedure is, when it is used, how the patient prepares for it, what happens during and after the procedure, the benefits and risks of the procedure, and when the patient should call a physician.

Illustrations are provided for numerous topics in each *Advisor* and are accessed either by topic name or through the heading Illustrations. A laser printer is recommended. I found that an HP Desk Jet printer did a good job at an acceptable speed. *Adult Advisor* examples of these generally well-done illustrations include arteriosclerosis, exercises for low back,

types of stroke, breast self-examination and the Heimlich maneuver.

The software allows several nice customizing operations. The user may editext and create headers or footers, including physician name, address, and telephone number. In addition, the user may create additional materials for topics not already contained in the software.

Although the Advisors provide broad array of patient education materials, the programs have some weaknesses The handouts lack underlining, italics, or other formatting to help differentiate topic areas. This was particularly notable given the considerable length of many handouts. The handout reading level was approximately 6th grade according to the Flesch Reading Ease Scale. However, I feel that some handouts were too detailed, incomprehensible, or inappropriate. For example, the Pediatric Advisor first advises against home treatment but then describes how parents may open a boil, advising them to cover the lesion with gauze and microporous tape. Similarly, the Adult Advisor's three-page handout discussing ankle fracture de scribes fracture types as complete, incomplete, comminuted, compound, closed, impacted, avulsion, and pathological.

Some interesting inclusions and exclusions of covered topics also were noted. The *Adult Advisor* includes the surgical topic "testicular exploration" and a handout on Legionnaires' pneumonia but omits other topics such as protatitis, urethritis, and influenza. The ON GYN Advisor provides information on bacterial vaginosis under the general topic of "vaginitis" but does not list it under the topic of "vaginosis" or "bacterial vaginosis."

The Advisors are useful as a foundation for patient education handout materials. The user-friendly format and the user's ability to customize handouts and add personally created material make this series useful for all practitioners who use patient education handouts as part of their practice.

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