

## BOOK REVIEWS

**A Manual of Cardiac Arrhythmias.** Michael Bilitch. Little, Brown & Co., Boston, 1972, 295 pp., \$12.50

This concise manual is a welcome work in the field of electrocardiography. As stated by the author, it is not written as a reference work; however, references are included at the end of each chapter for more detailed study.

The first chapter reviews the basic physiology and principles of electrocardiography, but this assumes that the reader has a previous, more thorough understanding of the basics. Study and treatment of arrhythmias including pacemakers and anti-arrhythmic drugs are described in succeeding chapters.

The manual moves into cardiac rhythm and conduction disturbances with recent recommended treatments. Also included is a pertinent description of the mechanisms of cardiac arrest and its treatment. Illustrations are plentiful, well detailed without being too complex, and most instructive.

This manual is not meant to be a basic textbook of electrocardiography. In this light, it would be helpful to a medical student in the clinical years after mastering the fundamental principles and concepts.

The family practice resident should have this on his required reading list. As to the practicing family physician, *A Manual of Cardiac Arrhythmias* should be read and kept on hand for ready reference.

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**Invisible Loyalties.** Ivan Boszormenyi-Nagy and Geraldine M. Spark. Harper & Row, Publishers, Inc., Hagerstown, Maryland, 1973, 408 pp., \$12.50

This book presents two basic concepts which are interesting and relatively new to this reviewer: first, invisible loyalties tie the individual to his family of origin and to his offspring — this vertical loyalty may at times conflict with the horizontal loyalty between the individual and the spouse; and second,

an unconscious but dynamic system of justice develops within the family unit so that the debts or credits which accrue to any one individual member of the family unit may greatly influence attitudes and ability to give or to receive from other family members or outside individuals.

These two concepts are woven together in this excellent textbook on family therapy to produce a very convincing and practical set of therapeutic concepts. The authors' expressed intention to develop a meeting point between dynamic psychology, existential phenomenology, and system theory in understanding human relations is convincingly accomplished. Many hallowed psychiatric concepts, such as transference, seem both logical and therapeutically applicable when viewed in this multi-generational family dynamics oriented manner.

This book is not easy reading. There are no illustrations, diagrams or other graphic means utilized that might make for lighter and more rapid reading. However, selected case presentations are well chosen and serve to illustrate the theories propounded.

This book should be considered a must for those actively involved in family therapy. Educators in family practice departments of the medical schools and in residency programs will find it a very useful reference. Few practicing family physicians will find the time and interest to read it from cover to cover. However, those physicians who do read seriously and absorb the concepts contained in this book will find immediate applications of these concepts to their daily practice.

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**Treatment or Diagnosis.** Michael Balint, John Hunt, Dick Joyce, Marshall Marinker, Jasper Woodcock. J.B. Lippincott Co., Philadelphia, 1970, 182 pp., \$9.50

This book is another in the series "Minds & Medicine Monographs" edited by M. Balint. It presents the preliminary results of an ongoing study of repeat prescriptions in family practice and introduces a new concept, "repeat prescription" which is the diagnosis of a definite doctor-patient relationship.

The book is divided into two sections each containing four chapters. The first section deals with the statistical aspects of the study and contains many tables with their mathematical interpretations. This data will interest those who wish to discover how the data was collected and how the interpretations were arrived at. I personally did not find this section particularly readable.

The second section deals in more detail with the peaceful situations depicted by the diagnosis "repeat prescriptions" and what happens when these situations are disturbed by the doctor or patient. Dr. Balint, in the last paper, deals with the difficulties and possibilities of psychotherapy in these situations. This whole study is presented as a preliminary report and there is as yet little evidence presented that this concept can be put to practical use in family practice.

I would think that family practice residents and practicing physicians would be most interested in this concept. I would hope, however, that the implied sequel to this work would indicate whether or not the concept will be helpful in patient management. Perhaps other readers will be stimulated to discover for themselves whether or not this concept can be useful.

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**Introduction to Anesthesia — The Principles of Safe Practice** (4th Edition). Robert D. Dripps, James E. Echkinhoff, Leroy D. Van Damme. W.B. Saunders Co., Philadelphia, 1972, 456 pp., \$11.00

I first used this book as a resource while a rotating intern and resident in general practice ten years ago. I have recommended it to family practice residents, particularly some of the sections on endotracheal intubation and management of the airway, pre-anesthetic medications, and related subjects. In the ensuing years I have continued to recommend the book, although I no longer practice clinical anesthesia, but feel it is an excellent resource in many areas related to medical practice outside of anesthesia.

The new edition has incorporated some of the sections presented as separate material in the older editions, and has made it much more concise and has consolidated areas that have a common background.

The authors in their preface note that clinical anesthesia has changed a great deal in the past several years. They have concentrated on a discussion of the newer anesthetics and their properties and have deleted previous material related to diethyl ether and ether. The presentation of broader aspects of anesthesia is a distinct improvement, with less attention being paid to specific agents and their properties.

While their presentation of the management of fluid and electrolyte problems is well done, I cannot fully agree with some of the recommendations in certain controversial areas. However, this does not detract from the overall value of the book.

As a family practitioner who no longer practices clinical anesthesia, but who has

some background of training and experience in the field, I found that complete reading of this book provided me an excellent general review. I would continue to strongly recommend the use of this book by medical students and residents in family practice.

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**Early Care of the Injured Patient.** Committee on Trauma, American College of Surgeons. W.B. Saunders Co., Philadelphia, 1972, 441 pp., \$9.00

The preface states that the objective of this book is to provide "reference for physicians in the care of patients in the emergency department and the early care of patients in the hospital." This is no small task when it is recognized that physicians serving these functions vary considerably in the level of their skills and the same physician varies in the level of his skills regarding different types of injuries.

This text is well organized and indexed to serve as a reference in the emergency room and intensive care departments of a hospital. It is concise and readable, making good use of italics, bold print, and numbered lists of protocols and management steps. The chapters on fundamentals (primary assessment, cardiopulmonary resuscitation, shock) are preceded by excellent outlines of the chapter contents which are useful in patient management. Goals of therapy and parameters of measuring the progress of therapy are well defined, though criteria of when to utilize the goals are less well defined. Illustrations and tables supplement the text in a fashion in keeping with the objective.

The chapters dealing with fractures, dislocations, and epiphyseal injuries (about half of the book) seem addressed to the surgeon, but there are many general principles and axiomatic statements dealing with specific problems that are very useful to the family physician. While there are places in the text that could use more anatomical review for family physicians, this text does a good job of meeting the needs of family physicians, surgeons, and residents in emergency care training. It lends itself to use in problem management of the problems at hand, i.e. to read at time of need.

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**Talking with Patients** (2nd Edition). Brian Bird. J. B. Lippincott Co., Philadelphia, 1973, 363 pp., \$10.00

This is the second edition of a book originally published in 1955. It has been consid-

erably expanded from 144 to 363 pages. The contents of this book are particularly relevant to Family Practice because the skillful use of words and the non-verbal communications that take place while talking with patients are the family physician's most effective diagnostic and therapeutic tools. The author has a most pleasing style, making the book very easy to read. Whereas there are no charts or pictures, many anecdotal case presentations are given to illustrate various points. These are not in the form of the usual dull ward rounds or traditional clinic type of presentation but in a pleasing, easy-flowing conversational style.

The book is well-organized into two major parts — Adults and Children. The first two chapters are the "General Aims and Objectives" of talking with patients and the "Specific Technical Points" consisting of helpful hints and technical tips to make talking with patients more successful. Individual chapters are devoted to such subjects as "The Patient Who Makes the Doctor Angry," "The Depressed Patient and the Suicidal Patient," "The Crying Child" and "Parents of Adolescents." The book is well indexed.

The book is intended for and serves well not only family physicians but all physicians, medical students, nurses, social workers and all other practitioners concerned with health care. One can only agree with the author that throughout medicine, use of words is still the main diagnostic technic, and while in therapy many mechanical and chemical aids are truly miraculous in their effectiveness, words continue to play a tremendous role. Satisfactory communication and the development of helpful doctor-patient relationships requires the skillful use of words and talking that is blunt, real and factual while still retaining a personal, human quality. Family physicians who learn the principles and master the techniques of talking with patients which are outlined in this book will not only care for their patients and families more effectively but will enjoy their work even more than they now do.

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**Family Practice.** Edited by H. F. Conn, R. E. Rakel, T. W. Johnson, W. B. Saunders Co., 1973, 1093 pp., \$29.50

This is an initial attempt by the editors to combine in a textbook of Family Practice the sociologic and medical facts needed to practice Family Medicine. They seem to recognize and attempt to include in the organization of the book the new concepts and techniques of practice as well as a description of the strong points of past practice. The first 30 chapters are given to defining

the structure of the family, the problems they may encounter, and some methods of solution. The last 14 chapters are concise specialty oriented reviews of specific areas in medicine and surgery from previously published material under the title *Specialties in General Practice*.

This text is intended as a source book for those interested professionals engaged in family medicine. It has readable sections concerning the family unit, the practice of community medicine, including preventive medicine, and human behavioral changes that occur in families. For the student interested in learning more about the family and its interactions in health and disease, it will be useful to refer to this book. The outlines of diagnosis and treatment are present for such diverse and yet common problems as drug abuse, marriage and family counseling, and alcoholism. In the clinical chapters there are many helpful practical hints for easy office management of common problems.

The organization of the book allows for easy reference and readability. The illustrations are extensive and add to the understanding of the various chapters. Some reference flow charts and sample protocols for the use of physicians assistants are new and well-organized. Extensive reference is made to the value of the problem oriented record in practice.

The practicing family physician will use this book primarily as a reference book, but could well profit by reading some of the first chapters as an introduction to subjects which have a bearing on the family and its interactions as he will find most of the subjects are ones not taught in medical school. He may even find some helpful hints to try to be a more comprehensive physician in his busy and demanding practice. The family practice resident and medical student will also find the book useful as a resource and helpful in answer to specific questions in patient care. The physicians assistant and nurse practitioner will find the presentation simple enough and organized for easy reference; they will especially be informed by the chapter on Community Medicine. To those persons interested and concerned about a new face and horizons for family practice, this will serve as an introduction and continuing source of information. This text could well be the first effort needed in defining Family Medicine for family physicians.

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