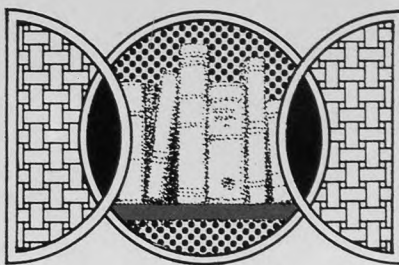


Book Reviews



The Treatment of Cardiac Emergencies. Emanuel Goldberger. *The C.V. Mosby Company, St. Louis, Missouri, 1974, 358 pp., \$14.00.*

The author has accomplished the truly amazing feat of assembling his vast clinical experience in this field into a well-organized, concise, and very readable soft-cover book. The material is organized into three major parts: cardiac emergency syndromes, apparatus used for cardiac emergencies, and drugs used for cardiac emergencies. The author's discussions of the various emergency syndromes in Part One incorporate the kind of observations and suggestions gained only by a few of the master clinicians in this field. Some younger and more aggressive cardiologists might well consider his management of several emergency syndromes rather conservative, but I suspect this represents the result of his vast experience. Part two of the book should be an invaluable reference for concise and understandable information pertaining to cardiac pacing of all types, defibrillation and cardioversion, and cardiac monitoring systems. The discussion of safety recommendations for the patient with a pacemaker, both at home and in the hospital, is particularly helpful. Many iatrogenic complications can arise in the hospital, particularly in the patient with exteriorized wires. There is more useful, understandable and concise information in this part of the book than in any other single reference I have seen.

Part three lists in alphabetical order the drugs used for cardiac emergencies. Many useful comments regarding technique of administration, dosages, interactions with other drugs, etc, make this portion of the book very helpful for quick reference. In the case of those drugs used in several different types of arrhythmias, their effectiveness is graded from "excellent" to "poor." Illustrations are extensively used in the sections dealing with arrhythmias and

cardiac pacing. They are generally of high quality and understandable.

Dr. Goldberger's book should be extremely useful to all family physicians and family practice residents. It will certainly be my own initial reference for many urgent situations in this field, as well as for more routine review of cardiac arrhythmias and pacemakers.

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Techniques and Approaches in Marital and Family Counseling. Richard E. Hardy and John G. Cull. Charles C Thomas, Publisher, Springfield, Illinois, 1974, 240 pp., \$14.75.

The book is a compilation of chapters, each written by a different author or authors and concerned with the general area of marital and family counseling. There are papers on such subjects as "Divorce as a Final Option in Family," and special needs of men, women, or children in divorce, and some chapters are devoted to specific therapeutic techniques or strategies. Like other such collections, this book suffers from a certain potpourri effect. There is a general unevenness in quality and an apparent lack of uniformity as to its intended audience. Several of the chapters are quite technical, describing specific therapy techniques such as Multiple Impact Therapy or Group Marital Therapy, while others are very elementary and seem directed at an interested non-professional reader. This lack of focus lessens the book's usefulness.

The greatest weakness, however, stems from a lack of common epistemology among the authors so that one subject may be discussed in terms of Transactional Analysis, another in the context of an Intrapyschic Growth Model, and a third as an Interactional Family System problem, etc. This eclecticism would

continued on page 69

IN ACUTE OTITIS MEDIA WHILE AN ANTIBIOTIC ATTACKS THE PATHOGEN



AURALGAN OTIC SOLUTION PROMPTLY RELIEVES THE PAIN

AURALGAN provides effective analgesic action; in addition, decongestant action with the driest glycerin available for use in the ear. Fully compatible with antibacterial therapy. Available on your prescription only.

BRIEF SUMMARY

OTITIS MEDIA (ACUTE): AURALGAN is indicated for relief of pain and reduction of inflammation in the congestive and serous stages of acute otitis media. It is effective adjuvant therapy when antibiotics or sulfonamides are administered systemically for otic infections.

Administration: Otitis media (acute): Instill AURALGAN, permitting the solution to run along the wall of the canal until it is filled. Avoid touching ear with dropper. Then, moisten cotton pledget with AURALGAN and insert into the meatus. Repeat every one to two hours (or three or four times a day).

REMOVAL OF CERUMEN: AURALGAN facilitates the removal of excessive or impacted cerumen.

Administration for Removal of Cerumen: Instill AURALGAN three times daily for two days to help detach cerumen from wall of canal and facilitate removal of plug. Irrigate with warm water.

Note: Keep well closed. Do not rinse dropper after use.
SUPPLIED: No. 1000—AURALGAN Otic Solution, in package containing 15 cc. bottle with separate dropper-screw cap attachment.

ON PRESCRIPTION ONLY.

Auralgan[®] OTIC SOLUTION

Each cc. contains:

Antipyrine 54.0 mg.
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(contains not more than 0.6% moisture)
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be acceptable (or even useful) if the subjects of the different chapters were sufficiently similar to allow some comparison and choice among alternatives. Since each author has dealt with a different subject and presented it in terms of his or her own approach to therapy, the impression with which one is left is that specific therapies related to specific problems or, at least, the relevance of one approach to a problem discussed in another chapter is not made clear.

I did not find this book to be of any special value to the family physician. The disturbing number of typographical and syntactical errors did nothing to change that opinion.

Robert J. Massad, MD
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Behavioral Pediatrics and Child Development — A Clinical Handbook. *Thomas J. Kenny and Raymond L. Clemmens. Williams and Wilkins Company, Baltimore, 1975, 209 pp., \$13.50.*

If the reader proceeds beyond the cover design, which does not do justice to this well-written text, the contents include useful information regarding the behavioral aspects of child development. The book is intended as a primer, and will be of greatest value to students and house staff as an introduction to common disorders of child development.

The volume is a well-organized, easily read outline with very few illustrations. Although the authors repeatedly emphasize its usefulness for pediatricians and psychologists, most of the material is quite appropriate for family physicians. Especially worthwhile are the chapters on learning disabilities, developmental problems in communication, community resources, counseling and psychotherapy, psychosocial growth and development, and an interesting section in the chapter on discipline entitled, "The Parent Who Needs a Problem Child." This book would also serve as a valuable resource for undergraduate courses in family psychodynamics and child development.

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Instructions for Patients (2nd Edition). *H. Winter Griffith. W.B. Saunders Company, Philadelphia, 1975, 360 pp., \$32.50.*

For a patient to achieve optimum recovery from his illnesses he must understand the instructions of his family physician and then comply with them. Printed materials for the patient to take home incorporating modern treatment concepts and as a supplement to oral instructions given at the office still are much less expensive and more practical than audiovisual gadgetry and audiocassettes. Family physicians need well-written teaching materials regarding common illnesses and problems.

Griffith's revised edition of instructions for patients presents such materials in an easily reproducible loose-leaf format. For each problem (listed alphabetically and also indexed), one or two pages are devoted to the following aspects: (1) general information; (2) important points in treatment, including activity, diet, general measures and medications; and (3) occurrences that should be reported immediately to the doctor. A series of diagrams of major body systems and organs for instructional use by the physician is also included.

Some of the problems are treated in too general a fashion to be of use to a patient without considerable discussion at the time of the office visit; such materials are therefore not worth reproduction cost, time, and effort. The instructions regarding low back pain, vomiting and diarrhea in infants and children, and viral pneumonia are examples. On the other hand, many more of Griffith's sections are too specific for use by other doctors unless they choose to handle the problems in the exact manner which he uses. For example, instructions for colds emphasize treatment with nasal sprays, a method not advisable in less humid portions of the country than Florida. Urinary tract infections would have to be treated with office follow-up urinalysis at 48 to 72 hours, or his instructions will need modification. At the same time, oral medications are not mentioned specifically for most problems but are left to the discretion of the doctor using the sheets.

Although some common problems are not included, the book has many sections which are well done. Particularly useful are the sections on diabetic

foot care, postoperative instructions for colostomy patients, and instructions for colic in infants, dysmenorrhea, laryngitis, menopause, and angina.

In summary, this patient education loose-leaf manual contains enough well-written, easily reproducible instructional material to be of use to every family physician. Before giving a section to his patient, however, the physician must evaluate it in the light of his own practice methods. This first book of its type will remain a leading source of patient instruction materials through future editions if Dr. Griffith develops a set of instructions reflecting a consensus of currently well-accepted approaches to management of specific problems.

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Ocular Differential Diagnosis (2nd Edition). *Frederick Hampton Roy. Lea & Febiger, Philadelphia, 1975, 612 pp., \$17.50.*

According to the author's preface, this book is intended for use by ophthalmologists, not for study, but exclusively for quick reference while the patient is in the office. It consists of lists of symptoms and signs referable to the eye, each followed by a list of possible causes of that problem, then a list of references related to that symptom or sign and the diagnoses. There is generally no textual material in the book other than the lists themselves. No indication is given as to how one differentiates between the various possibilities and, although each sign and symptom is defined or explained in a few words, there is no explanation or definition of the items listed as possible causes of the problem. The only exception to this lack of textual material consists of a limited number of charts and tables, generally extracted from other sources, giving the differential diagnosis of such problems as blurred optic nerve head and uveitis.

Although this book may well fill a need as a ready reference book for practicing ophthalmologists, I doubt that it would be of significant value to family physicians.

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