

Textbook of Basic Emergency Medicine. Edited by Robert H. Miller, in collaboration with James R. Cantrell.

This 248-page, soft-cover, easy-to-read text approaches the basics of emergency medical evaluation and initial management in a well-organized and understandable fashion. The text is divided into two parts. Part I, entitled, "Emergencies involving the Heart," is extremely well done. A good fundamental review of pathophysiology is emphasized as the basis for efficient and rational initial emergency treatment. The level of presentation is also consistent in both quality and depth for the intended audience. Part II, entitled, "Emergencies involving Other Body Systems," is less consistent because of the number of contributing specialists involved but is judged to be good for the intended audience. Diagrammatic illustrations are simplistic but well done, serve as helpful anatomy refreshers, and are interspersed with appropriate frequency.

The primary objective of the authors is to provide a text for the education of emergency paramedics, with emphasis on pathophysiology as the basis of rational initial therapy. I feel this book accomplishes that objective and can be highly recommended as a text for training emergency paramedics. The text might also be recommended for medical students, first year residents, or physicians out of active family practice for a period of time, as providing a quick overview of emergency medicine. The advanced family practice resident and the experienced practicing physician are unlikely to find this text of great benefit. The intentional lack of detail and depth also make it inappropriate for utilization as a physician's Emergency Room resource text.

In summary, this text is to be recommended and is best suited for use in training emergency medicine students above the level of EMT-ambulance level and below the level of graduate physician.

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Essentials of Family Planning. Josephine Barnes. Blackwell Scientific Publications, Oxford, 1976, 132 pp., \$6.50.

This small, 132-page, pocket-size book was written to provide a very up-to-date, but necessarily superficial, overview of family planning for health-care providers other than physicians. It is appropriate for nurses, nurse practitioners, physicians' assistants, midwives, health visitors, and social workers who advise patients regarding family planning. All methods of family planning are briefly presented including sterilization, abortion, and the more recently introduced injectable steroids. One 17-page chapter is devoted to sexually transmitted diseases.

Written by a British author and printed in Great Britain, the book is intended for a British audience. US readers will find most of the drug names unfamiliar and large sections irrelevant to practice in the United States because of differences in the health-care systems, and different laws regarding abortion, sterilization, etc.

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The Classic Pediculicide **BARC**

Physicians today are confronted with lice infestations of epidemic proportions. In the past years, the American Medical Association has reported more than 3 million cases of head and pubic lice infection.

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BARC is a classic pediculicide, formulated with Thanite (Isobornyl Thiocyanacetate). Unlike the conventional pyrethrin pediculicides which require a label warning against use by ragweed sensitive patients, the BARC formulation requires no allergy warning.

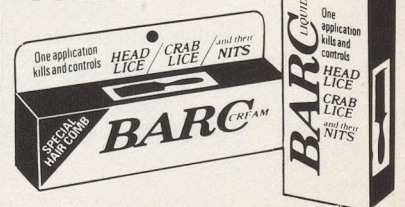
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I think the book accomplishes its purpose well as clearly stated in the preface: "to guide those who advise women... on the methods of family planning in general use in Britain."

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Urology in Primary Care. *Stephen N. Rous. C.V. Mosby, St. Louis, 1976, 277 pp., \$11.75.*

This well-written, concise, and practical handbook on urology for the non-specialist fulfills a long-overdue need. Urological problems are a frequent occurrence in patients of all ages, yet there are few resource texts available. This book should become an essential addition to the libraries of family physicians, family practice residents, and medical students, as well as general internists and pediatricians. Teaching urologists should also find this book useful.

Two features about this text are particularly impressive. First, it is refreshingly practical. The chapters are well organized and written lucidly and succinctly. The subject headings concentrate on the problems most frequently seen in the primary care fields. Pathology, physiology, symptomatology, physical findings, diagnostic steps, and management are presented in a logical sequence. The rarer conditions are generally mentioned only to complete the differential diagnostic considerations.

The second most impressive aspect of this book is that the author has gone to considerable effort to establish a list of educational objectives in urology for the nonspecialist. Chapter 18 provides a list of 159 specific objectives considered "necessary" for every primary care physician. Following this are 12 case presentation "exer-

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cises" by which physicians might assess or evaluate their expertise in urology. Although these are found in the last chapter of the book, it is clear that all the chapters have been written with these objectives in mind.

The contents have been reviewed by *practicing* family physicians, internists, pediatricians, and urologists (500 each) and by the entire membership (200) of the Society of University Urologists. This effort has helped ensure the reader that this text is accurate, complete, and practical.

There are a few minor criticisms. The effort to simplify makes the text too simplistic at times. The black-and-white photographs are a drawback in the sections on cutaneous lesions and "findings in the urine." The chapters on enuresis and sexual problems are much too brief and superficial for the average primary care physician. I had hoped the chapter on end-stage renal disease, hemodialysis, and transplantation would have provided some management guidelines so the primary care physician in the community, in managing these patients, could work along with the university-based hemodialysis experts.

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Cowdry's The Care of the Geriatric Patient, 5th edition. Edited by Franz U. Steinberg. C.V. Mosby, St. Louis, 1976, 518 pp., \$29.50.

The book is organized into five major sections: medical care, surgical care, disorders of the nervous and sensory system, geriatric rehabilitation, and special aspects of geriatric care. Each of the chapters in these various sections is written by different authors and, hence, the textbook lacks a sense of cohesiveness. The chapters are variable in their practicality and usefulness to a practicing family physician. The chapter on arthritis, bursitis, and bone disease is well written and comprehensive, but has a disappointingly short bibliography. The chapter on cardiovascular disorders is written with clarity, but is rather short and limited in scope. One of the more

disappointing chapters in the medical care section is that on diabetes mellitus which, while for the most part comprehensive, provides only a moderate amount of practical information and suggestions concerning the care of the elderly diabetic patient. Its largest drawback is lack of a discussion on the complications of diabetes mellitus. The remaining chapters in the medical section are moderately good but provide little information not available in the standard medical reference texts which should be in the library of every practicing physician.

The sections on surgical care and disorders of the nervous and sensory system are generally well written and should prove useful as a reference source. The chapter on arterial disease is particularly good and offers many practical suggestions for the care of patients with problems in this area. It is, however, somewhat short. The section on neurological aspects is adequate but I would prefer to see a more detailed discussion of the use of computerized axiotomography in the evaluation of patients with neurological symptoms. It is encouraging to see a chapter dealing with sexuality in the textbook. However, the limited discussion of nursing care for elderly people is possibly the greatest weakness in the book. The chapter on nursing care is only ten pages and includes a mere nine references.

The book is well bound and printed on high quality glossy paper. It includes a number of photographs and illustrations, which are all well produced but these could certainly be expanded in the future editions.

This book is difficult to evaluate overall. The editor states that the intended audience is the physician and other health-care personnel who are responsible for the primary health care of the aged. Several of the sections, as mentioned above, are quite good and should prove useful to the practicing physician who cares for elderly patients. Most of the material, however, can be obtained in several of the standard medical and surgical reference books in the libraries of most practicing physicians. It seems that the greatest usefulness for this book would be to nurses and other paramedical personnel.

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Brief Summary

K-LOR™ (POTASSIUM CHLORIDE SUPPLEMENT)
TM-Trademark

Indications:

K-LOR is indicated in the treatment and prevention of hypokalemia and hypochloremic alkalosis where the severity of the condition does not warrant parental therapy. Conditions or factors which may give rise to potassium deficiency include diarrhea and vomiting, decreased potassium intake, increased renal excretion of potassium which may occur in acidosis, diuresis, adrenocortical hyperactivity, or the administration of exogenous adrenocortical steroids, injection of potassium-free fluids, and increased glucose uptake such as occurs in insulin-treated diabetic acidosis.

Potassium chloride may be particularly useful to help prevent the hypokalemia which may be induced by the administration of most diuretic agents.

Contraindications

Potassium chloride is contraindicated in the presence of severe renal impairment with oliguria or azotemia, untreated Addison's disease, adynamia episodica hereditaria, acute dehydration, heat cramps, and hyperkalemia from any cause.

Potassium chloride should not be employed in patients receiving potassium-sparing agents such as aldosterone antagonists and triamterene.

Precautions

With normal kidney function, potassium intoxication from oral administration is not likely to occur, since renal excretion of the ion increases in response to a rise in the concentration of body potassium. Nevertheless, potassium supplements must be administered with caution, since the dietary or daily amount is not accurately known. Frequent checks of the patient's clinical status and periodic ECG and/or serum potassium levels should be done. High serum concentrations of potassium ion may result in death through cardiac depression, arrhythmia, or arrest. The drug should be used with caution in the presence of cardiac disease and systemic acidosis.

Adverse Reactions

Side effects include abdominal discomfort, nausea, vomiting and diarrhea.

In the presence of renal dysfunction it may be possible to induce hyperkalemia by oral administration of potassium salts. The symptoms and signs of potassium intoxication include paresthesias of the extremities, weakness and heaviness of the legs, flaccid paralysis, listlessness, mental confusion, fall in blood pressure, cardiac arrhythmias and heart block. Electrocardiographic abnormalities such as disappearance of the P wave, widening and slurring of the QRS complex, changes of the S-T segment and tall peaked T waves may be noted with hyperkalemia.