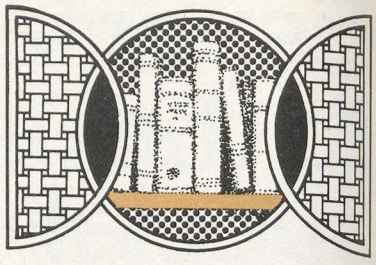
Book Reviews



FAMLI Family Medicine Literature Index, Volume 1, No. 1. *Dorothy Fitzgerald (ed). The World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (WONCA) in cooperation with the National Library of Medicine, London, Ont., Canada, 1980, 47 pp., $40.00 (annual subscription, United States and Canada - $50.00 elsewhere).*

FAMLI is a periodical rather than a book, published quarterly. This review is based on volume 1, No. 1, dated March 1980. FAMLI should prove a boon to authors and researchers in the field of family medicine. It is, as the title indicates, a family medicine literature index, organized in the format of *Index Medicus*, using the same subject headings. There are two sections. Section 1, the MEDLARS section, indexes the family medicine literature published in journals referred by *Index Medicus*. The culling of the pertinent family practice information from the vast amount of material in the *Index Medicus* is accomplished by a search strategy developed by the WONCA Bibliography Committee and the staff of the National Library of Medicine.

The second part, the Supplement section, indexes twelve family medicine journals that are not referred by *Index Medicus*, including family practice publications from New Zealand to Germany. North American journals in this section include *Canadian Family Physician, Continuing Education for the Family Physician, Patient Care*, and *Update*.

Credentials and expertise of the organizers of this publication are extremely impressive. No medical library should be without this publication, and individuals having any occasion to review or search family practice literature will undoubtedly want an individual copy at their fingertips. As a family practice educator interested in research, I consider this publication to be one of the major contributions to family practice since the inception of the discipline.

Herbert L. Tindall, MD
Lancaster, Pennsylvania

Guidelines for Graded Exercise Testing and Exercise Prescription (2nd Edition). *American College of Sports Medicine. Lea & Febiger, Philadelphia, 1980, 151 pp., $6.50 (paper).*

Prepared by an apparently diverse and large committee of the American College of Sports Medicine, this text is recommended for all who evaluate, prescribe, or teach about exercise. Easily read in a short time, it contains much practical clinical information that may be found quickly during the decision making process for exercise evaluation or prescription. On the other hand, the individual seeking in-depth knowledge about exercise physiology must search elsewhere, for this book is not intended to be a reference source. It could serve as an excellent course outline text for

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persons being trained as preventive and rehabilitative exercise program specialists. Family physicians, as well as resident physicians, could benefit themselves and their patients by careful reading of this text. Medical students are unlikely to find it useful, unless they have an interest in sports medicine, but would benefit from reading it.

One very important point made in this book is that when performing an exercise test to determine exercise limitations in a patient on medication, the medication should not be stopped. The objective of such a test is to evaluate adequacy of disease or symptom control and to prescribe exercise appropriate to the results of therapy or to be able to change therapy. Discontinuation of therapy prior to testing subverts the purpose of such a study.

The appendices which occupy 35 percent of the book are useful reminders to everyone of the need for informed consent, medical referral, and drug effects. The list of drugs that affect exercise is helpful but not complete. All in all, we believe this small book would be a helpful addition to a physician's library.

T. E. Temple, Jr., MD
St. George T. Lee, Jr., MD
Newport News, Virginia

The Physician's Practice. *John M. Eisenberg, Sankey V. Williams, Ellen S. Smith (eds). John Wiley & Sons, New York, 1980, 274 pp., $18.50.*

The intent of this reference book is to provide the practicing physician and physicians about to enter practice with an introduction to the organizational, financial, and legal aspects of practicing medicine.

The organization of the text is excellent, addressing all the major issues of the practice of medicine, including chapters on the utilization of other health professionals. The chapters on the structure and functioning of a medical practice provide a clear and complete outline to prepare physicians entering practice with the issues to be considered in selecting or establishing a practice.

Two chapters devoted to the principles of management, planning, directing, organizational design, and change seem out of place for the scope of this book. An effort is made to introduce management models and theory, which would be better presented in a text devoted to the subject.

In general, however, the book is useful for the physician about to enter practice as a reference guide to the complex areas that need to be addressed in the conduct of the practice of medicine.

Merrill N. Werblun, MD
San Bernardino, California

Archives of Family Practice 1980 (Volume 1). *John P. Geyman (ed). Appleton-Century-Crofts, New York, 1980, 413 pp, $16.50.*

In the Preface the editor states quite specifically the objectives to be accomplished in the first in a series of annual volumes, entitled *Archives of Family Practice*. The current volume focuses on three content areas: (1) evolution of family practice as a specialty, (2) undergraduate education in family medicine, and (3) clinical research in family practice. All of these topics are covered by a collection of papers in both full and abstract forms.

The editor has succeeded admirably in accomplishing his objective. He has culled through a mass of lit-

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erature in the three content areas and has selected those papers which best express past and current thinking in those areas.

The book is well organized and very readable. There is, of course, a variation in the style used by the different authors of the papers. This does not provide any significant distraction, however.

The current volume is a must for all family medicine educators and should be of great interest to any serious student of the subject, including medical students, family practice residents, and practicing family physicians.

William L. Stewart, MD
University of Florida
Gainesville

Let The Patient Decide (Volume 1), *Louis Shattuck Baer. Westminster Press, Philadelphia, 1978, 156 pp., $4.95.*

Few books written for patients may also be recommended for physicians, but this is such a volume. Subtitled "A Doctor's Advice to Older Persons," the book sets forth in concise form the author's observations on the relationship between the physician and patient over four decades of practice. It is written from the standpoint of a family physician, although Dr. Baer is qualified in internal medicine. He states: "I have watched science make it increasingly hard for you and me to die a natural death in an American hospital."

Dr. Baer is a physician who too frequently has been enjoined to do everything he could by the family of the patient who is too ill to seriously share in the decision about the method of treatment. The rou-

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tine care of most serious illnesses, even in the seventh, eighth, and ninth decades of life, employs intravenous fluids, antibiotics, mechanical cardiopulmonary support, control of shock, and renal dialysis. If all these measures fail, the patient will often be resuscitated, not once, but as many times as is deemed desirable by the attending physician.

This volume goes beyond right-to-die laws and living wills and sets forth the proposition that these matters are too important and serious to be left to chance or left to the decision of the attending physician without prior consultation with the patient. Such decisions can be made in a practical, realistic manner by patients cooperating with their physicians prior to the grinding fatal illness by discussing what therapy is available and how it should be employed.

Dr. Baer has some strong feelings about nursing homes and the conditions under which he would like to be admitted to a nursing home. He encourages his patients also to do some thinking to limit their therapy and to outline what modalities are available and how they might be employed.

This family physician makes a strong case for patient participation in the decisions affecting their lives. He certainly has the strength of his convictions; as he reiterates in the book, he wears a Medic Alert bracelet which states: "Positively no resuscitation, no IV, no injection, and no intubation."

The concern of the family physician, who respects his patients' wishes about medical care and joins with them in making the care the most expedient and realistic for the individual, is that the health care delivery process is one of joining with the patient to reach optimum health care. These are all good reasons why this book should appeal to family physicians. Medical students, resident physicians, and ancillary family practice personnel would also benefit from reviewing this short volume. It is written as a series of anecdotes from Dr. Baer's own practice, which serve to illustrate how he arrived at the position that he now sets forth. There are no illustrations in the book, but there are a number of quotations at the beginning of each chapter indicating that the concern about dying and the conditions of death have long been with us and is certainly not the exclusive prerogative of physicians.

To any physician who, when caring for his patient, has examined the problems surrounding death and dying, to any physician who has had second thoughts about the management of a particularly difficult case in which the patient was unable to participate in the decisions regarding therapy of an ultimately fatal disease, to any family member who has had thoughts concerning the highly scientific, intensely technologic improvements in medical care that all too frequently have not been accompanied by similar advances in understanding, compassion, involvement, and concern for the patient, to the family physician who believes that the essence of family medicine is to be knowledgeable and understanding, a source of knowledge, and a responsible helper for patients, this book provides the beginning toward carrying out patients' wishes and applying logic to an otherwise illogical, impersonal, technologic dilemma.

Richard C. Barnett, MD
Santa Rosa, California