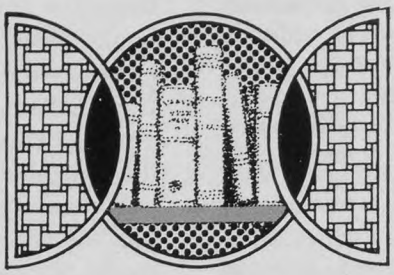
Book Reviews



Psychiatric Examination of Children (3rd Edition). *James E. Simmons. Lea & Febiger, Philadelphia, 1981, 301 pp, $13.50 (paper).*

Although family physicians are included among those to whom the book is directed, I believe the book has only limited value to the family physician. The book would be most useful to the child psychiatrist in training or to other professionals who work in the child psychiatry setting.

The book is very readable and is not burdened with psychiatric jargon. Case illustrations are used liberally and effectively, illustrating the child psychiatrist's approach to examination of the patient. This description includes a discussion of the first appointment and the feelings about it experienced not only by the child and his parents, but also by the psychiatrist in training. He discusses his approach to the family group interview, the child interview, assessing the child's mental status, interviewing the parents, and the special approach to the preschool child. Also included is an interesting discussion of the function of the child psychiatrist as a consultant and the interface between child psychiatry and primary care.

I had hoped that the book would provide additional skills and knowledge for the psychiatric examination of children in my own family practice. With a little effort, perhaps the family physician could adapt some of the approaches described, for example, the mental status assessment. However, most of the assessment methods described are sophisticated and time consuming, appropriate only for the child psychiatrist.

Nevertheless, the book is not without value. By providing a good and readable description of the methods used in child psychiatry, at the very least the family physician reader would be helped to make a meaningful referral.

John Hilditch, MD
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Management of the Allergic Patient: A Text for the Primary Care Physician. *Phil L. Lieberman, Lloyd V. Crawford. Appleton-Century-Crofts, New York, 1982, 385 pp, $33.50.*

Since 15 percent of many patient populations experience allergic symptoms or have an allergic history, the primary care physician should be equipped to help them. In *Management of the Allergic Patient,* two renowned teachers offer authoritative information on the subject. The text's intended audience is "all non-subspecialists of allergy." Consequently, the relevance of the subject, plus the explicit tailoring for family physicians, warrants having it available for reference.

This text discusses in detail type I allergy, that is, immediate hypersensitivity induced by immunoglobulin E. Specifically, allergic asthma, rhinitis, conjunctivitis, atopic dermatitis, anaphylaxis, and some cases of gastrointestinal allergy are addressed in a concise, comprehensive, and clear manner. The authors briefly describe the other types of allergy without undermining the more common problems encountered daily by family physicians. This circumscribed focus, in my view, accentuates the text's clinical value while reducing its potential size and price.

The text is organized in outline fashion with bold, clinically relevant headings and subheadings. The content of each subject discussed is factually rich and generally followed by well-prepared tables, which serve as excellent summaries. This component of the text should delight uncompromising scanners of medical literature. Moreover, the text liberally displays technically high grade figures. Primarily they represent pathophysiologic principles and clinical manifestations of allergic disorders. However, some illustrations such as "dust proofing" one's room could be incorporated as

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teaching aids for patient education.

In conclusion, I enthusiastically endorse this text because of the importance of the subject coupled with its clear, concise, and well-organized presentation. *Management of the Allergic Patient* should help physicians keep current with medical advances pertaining to type I allergic conditions.

Richard McNabb, MD
Seattle, Washington

Sexual Medicine and Counseling in Office Practice: A Comprehensive Treatment Guide. *Dennis J. Munjack, L. Jerome Oziel. Little, Brown and Company, Boston, 1980, 441 pp, $15.95 (paper).*

This volume is both of interest and of value to the practicing physician, student, or resident. It is divided into two sections. The first half of the book addresses the fundamentals of sex counseling.

The chapter on the sexual history deals with many common sexual problems and provides numerous examples of "how to open a discussion" on a particular problem area.

Several chapters are directed to sexual problems encountered with specific disease states, including endocrine disorders, cardiovascular diseases, psychiatric illnesses, neurological diseases, and inflammatory disorders. Sections on the effects of aging, drugs, and illness on sexual response are well written and informative. The chapter on counseling patients with common sexual problems is particularly valuable. The authors review the problems most commonly encountered, which is valuable in itself. They then offer several possible solutions for each problem. This section is recommended for all family physicians, residents, students, and allied health professionals.

The second half of the book concerns advanced sex counseling. These sections are also well written and easily read. This material closely resembles the previous work of Masters and Johnson. The latter half of the text would serve as a quick and worthy review for the student or clinician, but infers a level of counseling skill and commitment of time to treatment not enjoyed by the average busy practitioner.

In summary, the volume has value for the clinician, teacher, student, and resident and is recommended highly.

Don McHard, MD
Phoenix, Arizona

Obstetrics: Essentials of Clinical Practice, 2nd Edition. *Kenneth R. Niswander. Little, Brown and Company, Boston, 1981, 363 pp, $17.95 (paper).*

The author states that this paperback book is written as a basic obstetrical text for medical students. The format is concise and readable. Unlike most medical student "summaries," the book is written in concise prose. The tone of the writing indicates that the author understands the importance of the patient's psychological as well as physical well-being.

The book's comprehensive organization includes 16 chapters: 8 chapters cover the pathophysiology of normal and abnormal pregnancy; 3 chapters cover labor and delivery; 4 chapters cover fetal abnormalities, purpural problems, and placental abnormalities; the final chapter covers current birth control methods in a very informative style.

The author judiciously uses graphics, diagrams, and photographs to illustrate and simplify points made in the text. Each chapter is supported by a bibliography drawn primarily from the literature of the 1970s, with references as recent as 1979. The author also supplements each chapter's bibliography with a list of further suggested reading.

This book provides a solid foundation of current obstetrical knowledge for medical students, and in achieving this stated objective, it provides a useful summary of obstetrical knowledge for family practice residents and family physicians. Practitioners will find no-nonsense statements about the scientific basis for controversial or poorly understood areas of obstetrics more helpful for clinical practice than much of what is stated in the current medical literature.

Walter W. Rosser, MD
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The Neurologic Examination in Primary Care: A Manual for Primary Care Physicians, Nurses and Allied Health Personnel. *Matthew Menken. M.E.D.S. Corporation, Newark, New Jersey, 1981, 93 pp, $11.95 (paper).*

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Primary Care is for those primary care physicians who might be dissatisfied with their methods of neurological evaluation. The purpose of this 93-page manual is to provide the reader with a "structured, brief screening neurologic examination." To its credit, the book hits the mark and provides many discriminating neurologic shortcuts for the busy physician. Furthermore, Dr. Menchen, an academic clinical neurologist, recognizes the pitfalls of random neurologic procedures and tests. His book provides an ordered, clinically oriented examination aimed at detecting neurologic problems.

The content of the manual expands the traditional examination of the patient. For example, the "nose and throat" becomes the "face, nose, and throat." As a result, the screening examination includes assessment of the symmetry of the facial movements, the gag reflex, and tongue movements. Dr. Menchen notes that since some individuals have asymmetrical nasolabial folds, the "documentation of this finding in a patient without neurologic symptoms should be helpful if the patient subsequently needs evaluation for a neurologic problem."

Self-assessment exercises are offered in the manual, which generally underscore questions that differentiate between neurological and nonneurological conditions. There are some tables that complement the written portion of the book. Most of the tables collate and offer interpretations for abnormal neurological findings.

For readers interested in a text that determines pathophysiology, neuroanatomical localization, and etiology, this manual is clearly not for them. This manual is for readers desiring a brief, neurologic screening method that would become an integral part of the patient's physical examination. Consequently, those involved with primary care, whether family physicians, family practice residents, or some of the allied health professionals, could benefit from this book.

Richard McNabb, MD
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Dynamic Differential Diagnosis. *R. Douglas Collins. J. B. Lippincott Company, Philadelphia, 1981, 552 pp, $36.50.*

Considering the breadth of family practice, a text dealing with the various causes of signs and symptoms has great use for the busy family physician. The author describes a variety of approaches to considering the differential diagnosis. In some instances the author describes various pneumonics to help the practitioner recall the various categories to be considered, a common approach to differential diagnosis. In other instances a more pathophysiologic approach to various signs and symptoms is used.

The section on the causes of edema I found to be especially useful, as it lists the various causes of edema in categories related to pathophysiology that may lead to edema.

The section on low back pain is especially useful. The author uses an anatomical approach to considering the various causes of low back pain, starting with the skin and moving toward the muscle,

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fascia, lumbosacral spine, ligaments, and the spinal cord.

Appendix I lists differential diagnosis by associated signs and symptoms, and this is also very useful. For example, although the list of possible causes for abdominal mass is extremely long, when abdominal mass and rectal bleeding are combined in signs and symptoms, the differential list becomes much smaller.

Appendix II deals with the laboratory workup of specific symptoms. The author obviously does not intend that all these tests are justified in every patient with the particular symptoms or findings listed, but I fear that many would interpret Appendix II as suggesting that a shotgun approach to diagnosis may well be justified.

In summary, I find the text to be informative and useful. I believe it will occupy a significant place in my personal library.

Peter J. Rizzolo, MD
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Exercising for Fitness. *C. P. Gilmore. Little, Brown and Company, Boston, 1981, 176 pp, $11.95.*

Exercising for Fitness is volume 2 of the Time-Life series *The Library of Health.* The book is a beautifully illustrated, well-written introductory discussion of exercise. The book covers in detail the rationale and benefits of exercise and introduces the various methods of obtaining beneficial exercise.

The strengths of this book include the beautiful photographs and illustrations and the entertaining writing style. Helpful color charts are provided for determining percent body fat, target heart rate, and comparing the benefits of various exercises. The authors address potential hazards of exercise, including hyperthermia, hypothermia, and running injuries.

Exercising for Fitness addresses a lay audience unsophisticated regarding exercise. The major appeal of this book is that it can provide motivation to the beginning exerciser. It does not replace a detailed exercise prescription, especially since the book highlights a broad range of exercise programs, nor does it provide detailed information about any one exercise or sport.

The family physician may suggest this book for selected patients who are beginning exercise programs and need both educational and motivational stimuli. The book may also be useful for lay personnel teaching exercise programs who need an introduction to exercise physiology. The book is not detailed enough to be used as a text for provider at any level of health care.

Bruce Perry, MD
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The Practice of Preventive Health Care. *Lawrence J. Schneiderman (ed). Addison-Wesley Publishing Company, Menlo Park, California, 1981, 363 pp, $29.95.*

The editor states his intent is to convey "theoretical practical information that will help in the provision of office-based primary health care." In a volume of modest length he succeeds quite well. Initial chapters provide a background in the theory and basic

techniques of preventive medicine, including screening and health hazard appraisal. There follows a series of chapters discussing in depth 10 specific areas in prevention. The areas are well chosen to give broad coverage of the field, but because of the multiauthor approach, the relevance of each chapter to primary care is variable. I found the chapters on environmental and occupational health, dentistry, nutrition, and associated health care professionals and community resources particularly relevant for my practice. On the other hand, the chapter on "anticipating psychiatric crisis," despite an intriguing title, was lacking in information on primary and secondary preventive issues.

Other chapters dealt adequately with genetic counseling, immunization, sports medicine, and cardiovascular disease. While smoking was appropriately given the emphasis of a complete chapter, alcohol abuse was inadequately shared between nutrition and psychiatry. The final two chapters nicely summarize by presenting schemata for instituting prevention in the office setting for pediatric as well as adult patients. They go beyond the usual presentation of checklists to discuss techniques of improving adherence as well as family and personal counseling appropriate for the various life cycle stages, areas which perhaps merited more depth as individual chapters.

A strong feature of the book is the annotated bibliography which follows each chapter. Rather than merely providing documentation of the chapter content, these suggest further resources aimed at primary care providers and patient education materials. The book is readily read and well organized, although some tables were overly long. Marginal synopses throughout and chapter outlines aid in rapid review. I found this book a useful summary as well as a resource list for my practice. I can highly recommend it both to practitioners and students.

Fred Heidrich, MD
Seattle, Washington

Geriatric Medicine for the Primary Care Practitioner. *Edward B. Elkowitz. Springer Publishing Company, New York, 1981, 226 pp, $21.50.*

This book, according to the biographical sketch of the author, is the product of over 20 years in family practice. In general, it is well written and uses a systems approach that makes it easy to read.

Because the author tries to cover a wide range of topics in a rather small volume, the book is not very detailed in its discussion of the problems presented. A number of important problems common to the elderly are entirely omitted; for example, the index contains no listings for depression, anxiety, agitation, sleep disturbances, emotional disturbances, or psychiatric problems. There is little or no discussion of socioeconomic problems, the emotional problems of aging, decisions about institutionalization, or death and dying. Important differences in symptomatology and physical manifestations of disease, selection of therapeutic agents, and response to medications peculiar to geriatric patients are mentioned only briefly under the title "Iatrogenic Illness."

This is an attempt to produce a medical encyclopedia in 226 pages, resulting in sketchy treatment of most of the topics presented. The same material can be found in much greater detail in the standard texts on the shelves of most family physicians.

David Keisler, MD
Collin Baker, MD
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Ethical Decisions in Medicine (2nd Edition). *Howard Brody. Little, Brown and Company, 1981, 421 pp, $15.95 (paper).*

The first edition of this book published in 1976 has become a key reference text, particularly in the more clinical areas of contemporary ethics. The first edition, as is the second, is designed as an introductory text but is remarkably detailed in its analysis of problems without any loss of readability.

This book is well-organized, makes excellent use of case studies, and gives useful introductions to ethical decision analysis and the biopsychosocial/systems view of the practice of clinical medicine. The orientation is strongly clinical, but the main philosophical approaches to ethical analysis are well developed. The first edition has been criticized for an apparent indifference to religious influences on moral issues. This has been remedied by a new appendix on ethics and religion by Dr. Martin Benjamin. The author admits to some modification of his treatment of such issues as abortion, informed consent, terminal care, quality of life, and the social responsibility of health professionals; other chapters have been reorganized. The bibliography in this new

edition is both up to date and comprehensive.

Howard Brody, who is an Assistant Professor of Family Practice and Philosophy at Michigan State University, must be regarded as one of the major contemporary scholars in family medicine. His major scholarly interests lie in his contributions to a general systems theory of man, including his recent fascinating book entitled *Placebos and the Philosophy of Medicine* (1980).

The new edition of this book is highly recommended for use in current undergraduate and graduate teaching and for continuing medical education. It should be on the bookshelf of all practicing physicians.

Thomas R. Taylor, MD, PhD
Seattle, Washington

Novak's Textbook of Gynecology (10th Edition). *Howard W. Jones, Jr, Georgeanna Seegar Jones. The Williams & Wilkins Company, Baltimore, 1981, 887 pp, $48.00.*

This 10th edition is an update of a classic textbook of general gynecology, gynecologic endocrinology, and gynecologic oncology. Its scope is comprehensive, with an emphasis on pathology.

The textbook systematically begins with foundation chapters on anatomy, physiology, cytology, development, menstruation, gynecologic history and examination, embryology, and genetics. Subsequent chapters cover the full spectrum of gynecologic disorders, ending with chapters on family planning and sex education.

This revision continues to emphasize current views of contemporary gynecology, with most of the text rewritten except for the sections on anatomy. In addition, the final two chapters on cytology in the old edition were appropriately incorporated into earlier portions of this book.

The text is well written and replete with pictures, graphs, and tables. The extensive index and logical arrangement of chapters make this a valuable reference tool. A paperbound shortened version is also available with a more core-curricular emphasis but is inadequate for residents or practitioners who practice gynecology.

In summary, this latest edition of a fundamental and comprehensive textbook belongs on the shelf of every family physician and family practice resident.

Robert J. Creager, MD
Scottsdale, Arizona

Nutrition and Medical Practice. *Lewis A. Barness (ed), with Yank D. Coble, Jr, Donald I. Macdonald, George Christakis. AVI Publishing Company, Westport, Connecticut, 1981, 408 pp, $19.50 (US and Canada), $21.50 (elsewhere).*

This book represents a compilation of over 30 articles originally published in a special edition of the *Journal of the Florida Medical Association.* With updating and expansion, they have been combined in a very useful book. Nutrition is, without doubt, the most neglected area of instruction in medical schools and residencies and is as well a subject of benign neglect on the part of most practicing physicians. Yet, the public each day is becoming more demanding of education and guidance in matters involving nutrition. This book is certainly timely. It is well written on the whole, with appropriate depth on most topics for a practicing physician. In most areas, however, I feel that it lacked the depth to serve as a true reference text.

Several sections are unique and helpful. Chapters on making a nutritional diagnosis, with excellent summary tables, are representative. Other subject areas covered include nutrition for patients receiving cancer therapy, nutrition in pregnancy, total parenteral nutrition, feeding children, food additives (a very informative chapter), and obesity.

Much has been written about these subjects for years. However, this text does bring them together in a concise and readable format. It is at times a bit too concise, shortchanging a few important subjects (eg, 16 pages on total parenteral nutrition, and one page on peptic ulcer and gall bladder disease). There also is very little said specifically about nutrition in the elderly. One area I found lacking, as a practicing family physician, is what might be called "fringe" nutrition: those areas of nutritional practice that are discussed on television talk shows, in so-called health food stores, in fly-by-night nutrition clinics. Certainly, on a daily basis I am asked questions about such things as vitamin E, lecithin, and trace elements, and I find information sources lacking. I was a bit disappointed that this book did not provide a chapter directed toward this soft area of knowledge. Otherwise, I found this to be a quite complete, well-written book, with a clear format that is geared to the family practice resident or family physician.

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Family Medicine: A Guidebook for Practitioners of the Art. *David B. Shires, Brian K. Hennen. McGraw-Hill Book Company, New York, 1980, 512 pp, $15.95 (paper).*

This text is well written, easy to understand, and contains much useful and practical information for the audience it is meant to serve.

It is divided into nine sections, each dealing with a particular area of family medicine and practice. The sections are further divided into chapters and subsections, with margin headings, making it very easy to find a particular bit of information. There are many tables and figures, well laid out and easy to understand. There are a few black and white photographs in the chapter on dental problems. References, mainly from the family medicine literature, are listed at the end of each chapter.

In the preface, the authors state that this is a book about caring for people, reflecting the philosophy of family medicine. I feel they have achieved their objective. The sections dealing with concepts and philosophies are very well written. The authors review all of the pertinent literature and include case histories from their practices together with their personal observations and viewpoints.

In the chapter on common health problems, the authors attempt to cover too large a knowledge base. The problem-solving approach with branching diagrams is well done, but unfortunately, many of the diagnostic and treatment recommendations are outdated or controversial. For example, the writing of this chapter no doubt preceded publication of the new classification of diabetes mellitus and the five-year study of the Hypertension Detection and Follow-up Group. Criteria for diagnosis and management of both problems, as they appear in this chapter, can be questioned in light of recently published information.

Space does not permit the citing of any more examples, but the reader of this text should consult more up-to-date sources for information on clinical management.

The rest of the book is a good source of information on the content of family medicine for medical students and family practice residents and, to a lesser extent, for practicing family physicians and allied health professionals.

It will be a useful addition to libraries of medical schools and departments of family medicine.

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Douglas-Stromme Operative Obstetrics (4th Edition). *Edward J. Quilligan, Frederick P. Zuspan. Appleton-Century-Crofts, New York, 1982, 967 pp, $68.50.*

The ideal reference of obstetrical operative techniques for use by family physicians should present concise but detailed descriptions of common operative interventions useful in the practice of low-risk obstetrics. Optimally, alternative methods, especially those suitable to ambulatory care and/or short stays in the hospital, should be included as well as discussions of indications, contraindications, and complications of these selected procedures.

The revised fourth edition of *Douglas-Stromme Operative Obstetrics* meets the above objectives admirably in some respects and is disappointing in others. To deal with the drawbacks first, the primary criticism of the text is that it is not written for the practitioner of low-risk obstetrics. Thus, much of the text has marginal relevance, focusing on complex high-risk procedures that will seldom if ever be used by family physicians. Since the authors never intended it to be useful to only this audience, such an objection is perhaps overly critical. Of greater relevance, however, is that the authors seemingly cannot decide if they are writing a textbook of perinatology or a surgical text. The first 436 pages of the text discuss a variety of essentially medical complications of pregnancy. Although these discussions are up to date, relatively conservative, and of course relevant to the care of the obstetrical patient, many other excellent discussions of this type are available, and excluding them in this discussion could have considerably shortened the text (and made it less expensive).

In spite of these shortcomings, however, the book on the whole is well written and well illustrated and includes the best discussions of many operative procedures relevant to the practice of low-risk obstetrics that this reviewer is aware of. The authors are conservative on the indications for surgical intervention, especially cesarean section. Their discussion of fetal monitoring, premature rupture of fetal membranes, and breach deliveries as indications for abdominal delivery will be well received by anyone concerned about the recent marked increase in the rate that cesarean sections are performed.

It is unfortunate, considering the excellent discussions the authors do give, that the use of the vacuum extractor as an alternative to forceps and the minilaparotomy technique for tubal ligations were omit-

ted. Until a text tailored to the needs of family practice is available, however, this work will be useful for physicians interested in the management of obstetric patients requiring operative intervention.

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Guide to Clinical Reasoning. *Maurice Kraytman. McGraw-Hill Book Company, New York, 1981, 561 pp, $13.95.*

This book is designed to aid medical students in forming diagnoses by going further than the "classical descriptions" of diseases, including a broad range of possible manifestations. Most of the common diseases and conditions usually considered in internal medicine textbooks are discussed. Pathophysiology is dealt with briefly, but therapy and prevention are not included.

The author's aim was to be concise yet comprehensive. Because of these somewhat conflicting goals, this book would be difficult for an inexperienced clinician to employ. Exhaustive lists of differential diagnoses are presented with little to guide the reader to an appropriate sequence of gathering data. If one were to obtain all the tests mentioned for a given category of diseases, one could conceivably then use this reference to sort out the most likely diagnosis. I had expected from the title, however, that more guidance to the appropriate path to a diagnosis would be given.

Nonetheless, the book has several strong points. Differential information that can be obtained from the patient's history is presented in some detail. Sections on features casting doubt on a given diagnosis, special presentations in the elderly, and the recognition of complications of treatment for each disease were particularly helpful.

I found the book demanded careful reading because the author attempted to include a large amount of information in a concise format. Tables and figures were rarely included.

This book would be of some use as a reference text to an experienced resident or clinician pursuing a diagnostic dilemma in internal medicine.

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