

Environmental Emergencies. Charles E. Stewart, Williams & Wilkins, Baltimore, 1990, 411 pp, \$39.50 (paper). ISBN 0-683-07932-8.

New knowledge and reviews of older concepts in the management of wilderness and environmental emergencies have been appearing in the literature with much greater frequency in the last few years. Much of the interest and enthusiasm has been stimulated by the Wilderness Medical Society. It is within this context that this new publication by Charles E. Stewart is reviewed. This inexpensive softcover text represents an extensive review of the literature coupled with the author's personal experience. Although quite readable and interestingly written, the book lacks the authoritative touch that comes from the multiauthored approach found in *Management of Wilderness and Environmental Emergencies*, by Paul S. Auerbach, MD.

The text appears to be written for emergency department physicians. Physicians caring for patients suffering from environmental emergencies frequently are not board-certified emergency department physicians, but in many cases are family physicians living in rural communities, covering emergency departments or attending rescue efforts. Other audiences include residents in training and medical students. In general, the information provides reasonable guidance for physicians in all these settings.

The curriculum for medical students in wilderness medicine is being reviewed and developed by the Wilderness Medical Society. Until this curriculum is well defined, it is difficult to wholeheartedly recommend this text for medical students. The price is less than one half of Auerbach's exhaustive text; however, as a library reference for emergency departments, medical libraries, and search and rescue services, Auerbach's text is more appropriate, comprehensive, and authoritative.

Stewart's book is divided into 14 chapters with an appendix on the prevention of arthropod envenomation. Chapters on burns and radiation inju-

ries are included (chapters on these topics have been deleted from the second edition of Auerbach's text). Each chapter is followed by a reasonable-length bibliography highlighting key articles in each of the areas. The text contains multiple hand-drawn illustrations that are well done and one page in color referencing frost bite injury. It is not clear why this one color page was included at the exclusion of other possible choices. Numerous, somewhat helpful tables and flow diagrams are included summarizing textual materials.

Although readable and useful for physicians caring for wilderness and environmental emergencies, this text arrives in a very competitive environment and, other than cost and portability, represents a weak competitor to Auerbach. Those with limited funds and possibly medical students may find this a useful addition to their libraries.

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Practice Made Perfect: The Physician's Guide to Communication and Marketing. Edna Kaplan, Barrington Press, Boston, 1990, 261 pp, \$39.95. ISBN 0-9616920-1-4.

"In this communication age, when presidents are judged as much by their ability to communicate as by their ability to govern, America's doctors are also expected to communicate effectively." *Practice Made Perfect* is a physician's guide to improved communication and marketing. Based on over 200 studies and interviews, this book instructs physicians in the art of optimal practice management. Topics covered include practice assessment, office strategies to satisfy patients, marketing, public relations, advertising, preparing for radio and television appearances, reshaping an unrewarding career, and hiring a marketing consultant.

I feel that many areas included in the book are already covered in the education of family practice residents such as communication, doctor-patient relationship, and practice

management topics; however, the book is well organized, concise, easy to read, and informative. It would be an important resource for those in charge of teaching practice management, entering practice, being blitzed by competitors, or feeling the need to reshape a practice or career.

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Massachusetts General Hospital Psychiatric Aspects of General Hospital Pediatrics. Michael S. Jellinek, David B. Herzog (eds). Year Book Medical Publishers, Chicago, 1990, 421 pp, price not available (paper). ISBN 0-8151-4899-2.

This pocket-sized manual is intended to parallel and complement *The Harriet Lane Handbook*. Prepared by the resident staff of the Pediatrics Department at the Johns Hopkins Hospital, *The Harriet Lane Handbook* has been used for over 20 years as an up-to-date compendium of practical medical information on the treatment of children. The psychosocial subject matter of the *Massachusetts General Hospital Psychiatric Aspects of General Hospital Pediatrics*, however, does not easily lend itself to a similar tabular and outline format. This would not have posed an insurmountable problem had the editors organized the chapters with regard to related topics and provided authors with a structure for presentation of materials.

Instead, the 53 chapters reflect a disjointed collection of contributions from a variety of authors: psychiatric faculty and staff, residents and clinical fellows, psychologists, social workers, nurses, a nutritionist, lawyer and a variety of pediatric subspecialists. Moreover, the titles of chapters follow no obvious order. The book begins with chapters on "Interviewing," "The Family Interview," and "Caring for Children in Hospitals," and then jumps to such diverse topics as pediatric nursing and social work, house staff relations, acute and chronic illnesses, mental retardation, ophthalmology, grief, emergency

ward triage, abuse, suicide, behavior management, psychological testing and legal issues in pediatric care. Each chapter reflects the individual interests and writing styles of the authors. Many fail to address either psychiatric issues or the care of hospitalized patients. For example, the chapter "Accident Prevention and Management," written by the chief of the Endocrine-Metabolic Unit, focuses on how pediatricians can play a far more important role in preventing accidents than in caring for injuries.

In the preface, the editors note that they "did not edit for uniformity." They go on to observe that "each chapter bears the author's style and approach" and "some themes are repetitive, yet the perspectives are diverse." Unfortunately, experience tells us that in order to merit a coveted position in a laboratory coat or back pocket, a handbook needs to be succinct, relevant, and easily used. *The Massachusetts General Hospital Psychiatric Aspects of General Hospital Pediatrics* falls short of these goals.

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Boies Fundamentals of Otolaryngology: A Textbook of Ear, Nose, and Throat Diseases (6th Edition). George L. Adams, Lawrence R. Boies, Jr, Peter A. Hilger. WB Saunders, Philadelphia, 1989, 578 pp, \$65. ISBN 0-7216-2802-8.

This text is perfectly suited to the needs of its intended audience: family practice and primary care physicians, medical students, and residents. The material is readable and succinct, with summary comments written in the margin of each page to help the reader identify and synthesize the key points in each section. The fundamentals of ear, nose, and throat anatomy, physiology, and clinical examination are clearly written and well illustrated. The contents of such discussions are economical, but thorough.

Most chapters of the book focus on diseases and conditions of particular

anatomic regions—paranasal sinuses, salivary glands, and the inner ear, for example. Sections on audiology, speech and language disorders, and tracheostomy are excellent. The index works well for researching specific symptoms, such as vertigo, hoarseness, and tinnitus. Nearly every page has a photograph, illustration, or table. They are of high quality and work well to reinforce the effectiveness of the written material.

Although not a text of detailed ear, nose, and throat (ENT) surgical technique, the book discusses and illustrates the common major and minor surgical procedures. From adenoidectomy to zygomatic reconstruction, the reader will gain an understanding of ENT surgical principles, indications, and techniques, and thus be better able to describe them to patients. Those procedures and maneuvers that are within the realm of the practicing family physician, such as nasal packing and cautery, are outlined nicely.

I feel that there is no better ENT textbook for the family physician, and I highly recommend it for every clinic and residency library.

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Conn's Current Therapy 1990. Robert E. Rakel (ed), W.B. Saunders, Philadelphia, 1990, 1145 pp, \$49.95. ISBN 0-7216-2582-7.

Sometimes it is difficult to justify the purchase of books that are updated each year. Not so in this case. This newest edition of *Conn's Current Therapy* is clearly the best revision yet. It is a text that should be found in the library of every practicing physician.

This edition is the product of 347 international authorities reporting on the clinical management of 284 symptoms and diagnoses. Maintaining its tradition of clinical relevance, *Current Therapy* has been greatly expanded to include such subjects as human immune virus infections, and a major revision was done on the discussion on acute poisonings. In fact,

more than 75% of the articles are entirely new, quite a feat for an annual publication.

Reading through a number of the sections, I am struck by a greater emphasis this year on the "practicalities" of establishing a diagnosis, monitoring patients on a longitudinal basis, and selecting among alternative therapies. There is liberal use of summative tables and even selected forms and questionnaires suitable for copying and use in clinical practice. The writing styles are uniformly clear, concise, and readable.

W.B. Saunders is to be complimented for its capacity to offer a quality hardbound medical reference of over 1100 pages for less than \$50. This book is a bargain that should find its way to the desks of physicians in training as well as those of us in practice.

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Pocket Guide to Medications Used in Dermatology (2nd Edition). Andrew J. Scheman, Williams & Wilkins, Baltimore, 1990, 150 pp, price not available (paper). ISBN 0-683-07591-8.

This pocket-sized handbook, now in its second edition, was originally designed to provide a quick and comprehensive reference for both the dermatologist and nondermatologist on available dermatologic agents. The authors felt that information on such products was lacking in the commonly used *Physician's Desk Reference* or generally not available in standard reference sources. The result is a thorough compilation of virtually all marketed dermatologic products listed by trade name, generic name, concentration, vehicle, unit size, and dosage.

Information on specific agents is grouped alphabetically by tables according to broader categories of clinical use. These agents include, but are not limited to, such products as acne medications, antibiotics, antifungals, antihistamines, antiseptics, corticosteroids, debriding agents, emollients, hair growth products, keratolytics, photosensitizers, pigmenting

and depigmenting agents, shampoos, soaps, sunscreens, tars, wart medications, and wet dressings. There is a special section on bases and vehicles, but otherwise the written text is limited, and no photographs are included. There are several pages of references in addition to an excellent index of agents by trade and generic names.

Although intended for the nondermatologist, the practicing family physician may find this book too detailed for daily reference use in treating common ambulatory problems. For those with a special interest in dermatology, this book will provide an appropriate and thoughtful addition to a medical library. Most, however, will find a descriptive reference text, such as the *Physician's Desk Reference* or *Drug Facts and Comparisons*, and a general dermatology manual with photographs and therapeutic information, to be more helpful in a typical clinical practice.

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Family-oriented Primary Care: A Manual for Medical Providers. Susan McDaniel, Thomas L. Campbell and David B. Seaburn. Springer-Verlag, New York, 1990, 397 pp, \$42.50. ISBN 0-387-97056-8.

What has been lacking since Doherty and Bairds' book *Family Therapy and Family Medicine* is an up-to-date practical book answering that most feared of all question, "So what if the family affects health, how do I integrate it within my practice?" By using recent family systems medicine research as a foundation, the authors attempt to answer that question by not only providing important content information (what should be assessed) but by providing important process information (how to assess and intervene). Rather than advocating that all family physicians become family therapists, the authors recognize the realistic limitations placed

upon family physicians and take a much more balanced view by advocating the use of the family conference where family strengths and resources are mobilized, sort of a family psychoeducational approach. The authors even go so far as to address the ethical and practical objections many family physicians would have to their approach to clinical care. Regardless of those objections, however, the authors' approach to clinical care fits well within the philosophy of family practice, as they advocate caring for the patient within the context of the family.

The book is organized into four sections. A brief introductory section introduces family systems concepts, the basics of family assessment, and the use of the family conference. The second section then examines family developmental issues and how those issues may have an impact upon the health of the patient. A third section describes a family-oriented approach to specific medical problems: chronic illness, somatization, depression, alcoholism, and child abuse. The concluding section contains chapters on ethical and practical issues, working with families during hospital care, collaborating with family-oriented and other mental health professionals, and an examination of how the physician's own family and their family-of-origin affects the clinical care physicians provide. Throughout the book important points are highlighted in boldface type with many short clinical vignettes presented to illustrate main points. A particularly useful feature of this book is a brief protocol detailing the main points of the chapter located at the end of each chapter. For example, after the chapter on conducting a family conference, a page and one-half protocol appears in which all of the phases of the conferences are outlined.

Despite the authors' complete treatment of the issue of family-oriented primary care, some lingering issues still remain. Although the authors rightly point out that studies of

family intervention in a family therapy setting consistently show benefit, studies examining the effectiveness of family interventions in the primary care setting, for example, the use of the family conference, are virtually nonexistent. Skeptical readers may require such studies proving that this approach is not only effective but safe before implementing it within their practices. Additionally, even though the authors are very clear in their description of the process of family assessment and intervention within the primary care setting, it is not at all clear as to which patients would benefit most from this approach or how to really integrate it within the clinical care physicians provide patients. How to unite the biomedical and psychosocial aspects of care during a patient's visit is still a vexing issue for many practitioners. Are the psychosocial aspects of care simply added to a biomedical assessment, or is there truly a way to achieve an integration? This text, along with other recent additions to the family medicine literature, represents a tentative first step at coming to a solution to this central question.

In conclusion, this text does provide an excellent answer to the question asked in the first paragraph. Unfortunately, it clearly does not provide "the answer" given the dearth of research in this field, nor will it be an excellent answer for very long given the amount of research that is being stimulated in this area. At this time, however, this text represents the best treatment of family assessment and intervention in the primary care setting and thus should be read not only by those who are learning about family practice, advance level medical students and residents, but by practicing physicians as well, who will clearly benefit from this book's use of up-to-date literature and clear description of process.

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