

Reviews of Books, Software, and Audiovisual Materials

Preventive Cardiology. Dennis M. Davidson. Williams & Wilkins, Baltimore, 1991, 300 pp. ISBN 0-683-02350-0.

Cardiovascular disease is the leading cause of death in industrialized countries; therefore, knowledge of developments in preventive cardiology are essential to the family physician. *Preventive Cardiology* provides a reference and introduction to the subject, divided into seven major sections including coronary artery disease epidemiology and pathophysiology; indicators of risk; primary prevention (divided by age groups); treatment after detection of ischemia; prevention of coronary artery disease event recurrence; dysrhythmias and sudden death; and cerebrovascular disease.

The book's strengths are its readability and concise but thorough presentations of important topic areas in this field. Up to date in primary, secondary, and tertiary prevention, the contents are extremely well referenced. Chapters on approaches for specific age groups include comprehensive reviews of prevention for pediatric and elderly patients. A chapter on the role of sex and hormones addresses the special risks and treatment for women. The emphasis and references on interventions at family and community levels are refreshing given the familial clustering of cardiovascular risk and behaviors.

This book is an important update to earlier texts in this field and is an important resource and reference to anyone interested in prevention or treatment of cardiovascular diseases. I have already used *Preventive Cardiology* to prepare educational sessions, as a student text, and to access a wide range of references. As is often the case with introductory texts, however, the brief coverage of each area

limits the presentation of specific clinical management of risk factors and manifestations of cardiovascular disease. There is a lack of detailed treatment approaches for clinical nutritional management, pharmacology of hypertension and dyslipidemias, and risk stratification after myocardial infarction.

The book would serve as an introductory text for health care professionals and students extremely well. It is a valuable resource text for anyone with a special interest in cardiovascular diseases. The family physician in practice will find this to be an excellent overview, but may need to use other references for specific management information.

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1991-1992 Pocketbook of Pediatric Antimicrobial Therapy (9th Edition). J. D. Nelson. Williams & Wilkins, Baltimore, 1991, 106 pp, \$9.95 (paper). ISBN 0-683-06404-5.

This little yellow book, which I have relied on since its 4th edition in the early 1980s, is what a colleague of mine refers to as one of the essential "how to be a pediatrician" books. It easily fits into the side pocket of a physician's white coat, which makes it a convenient tool to help in the management of sick children.

Infectious diseases are a major component of pediatric medicine. Antibiotic therapy is a mainstay of pediatric practice. Unfortunately, most sick children present with non-specific signs and symptoms, for example, fever and irritability. It is the job of the physician who cares for

sick children to narrow the range of possible etiologies by means of diagnostic testing. The rapid tempo of illness in pediatrics, however, necessitates the provision of presumptive antimicrobial therapy in many instances. Roughly one third of this book, which in my view is its most unusual and useful section, presents recommendations for antimicrobial therapy according to clinical syndromes in newborns and older children. For example, under "Bacterial meningitis" are listed guidelines for "Unknown bacterial, 1-3 mos of age," and "Unknown bacterial, after 3 mos of age." The guidelines include specific antibiotic recommendations with dose, route of administration, and duration of therapy. Also listed are alternative antibiotic choices and comments regarding rationale and adjunctive therapy.

Other major sections of the book are devoted to preferred therapy for specific pathogens, including antifungal and antiparasitic therapy, and an alphabetical listing of antibiotics with dosage forms and usual dosages. Smaller sections (the only textual material, which comprises just over 10% of the book) include a variety of useful topics: penicillin desensitization, dilutions of antibiotics for intravenous use, and maximum dosages for large children.

I have found no other book to be as useful as this one in guiding pediatric antimicrobial therapy. *The Harriet Lane Handbook* lists antibiotic dosages but contains little information about presumptive therapy for clinical syndromes or pathogen-specific therapy. Other pocket-sized handbooks of antimicrobial therapy, such as the *Guide to Antimicrobial Therapy 1990* by Jay P. Sanford, are not specific to pediatric medicine. *The Report of the Committee on Infectious Diseases*, or *Red Book*, of the

American Academy of Pediatrics has much useful information and more detailed specific guidelines for the management of some pediatric infectious disease problems, but it is meant to be used more as a reference source of information and is too big to be carried around conveniently.

Anyone who sees or treats sick children will find this book very useful.

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Management of Infertility: A Clinician's Manual. Brian M. Cohen. Essential Medical Information Systems, Inc, Dallas, 1990, 322 pp, (paperback). ISBN: 0-929240-16-2.

Management of Infertility: A Clinician's Manual attempts to overview briefly the entire scope of infertility. It is divided into sections, the first of which addresses the anatomy and physiology of conception, and includes text, diagrams, and charts. This section is followed by an overview of fertility evaluation and management, which includes a discussion of the primary consultation, history, and physical examination, as well as a plan of treatment. One of the important sections of this manual, it will be a help to any physician who deals with infertility, whether rarely or frequently, and can be used as a guide to how to approach a patient who is concerned about the subject.

The next section deals with diagnostic tests, and explains in words and pictures those most commonly used. The section on diagnostic tests is followed by a section dealing with common problems encountered in the management of infertility.

The last section of the book reviews current trends in infertility. The manual is set up like the other manuals in this series, with the index in the center of the book, the table of

contents at the front, and segments numbered along the edge for easy reference. There are references at the end of the manual for further reading. As with all manuals, the student, resident, or practicing physician should not limit his or her reading to one text; however, if he or she has studied a common text on reproductive endocrinology and infertility, such as the book by Mishell or Speroff, I think this manual could be a welcome addition.

Both family physicians whose practices include obstetrics and obstetricians will find *Management of Infertility* useful. It may be useful also to those physicians who do not practice obstetrics but who occasionally come into contact with patients who are interested in becoming pregnant. This manual can provide a resource to family physicians who would like to assist the patients with a basic infertility workup and management before referral or consultation.

My criticism of the book is that, as in many manuals, the authors tried to be too inclusive. I believe it could have been streamlined for ease of use without compromising its perceived purpose as a useful clinician's manual.

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Practical Strategies in Outpatient Medicine (2nd Edition). Brendan M. Reilly (ed). W. B. Saunders Company, Philadelphia, 1991, 1300 pp, \$115.00. ISBN 0-7216-2821-4.

The second edition of *Practical Strategies in Outpatient Medicine*, an outstanding book, should be on every family physician's bookshelf. It is practical, easy to read, and provides invaluable information on everyday

YOCON® Yohimbine HCl

Description: Yohimbine is a 3a-15a-20B-17a-hydroxy Yohimbine-16a-carboxylic acid methyl ester. The alkaloid is found in Rubiaceae and related trees. Also in Rauwolfia Serpentina (L) Benth. Yohimbine is an indolalkylamine alkaloid with chemical similarity to reserpine. It is a crystalline powder, odorless. Each compressed tablet contains (1/12 gr.) 5.4 mg of Yohimbine Hydrochloride.

Action: Yohimbine blocks presynaptic alpha-2 adrenergic receptors. Its action on peripheral blood vessels resembles that of reserpine, though it is weaker and of short duration. Yohimbine's peripheral autonomic nervous system effect is to increase parasympathetic (cholinergic) and decrease sympathetic (adrenergic) activity. It is to be noted that in male sexual performance, erection is linked to cholinergic activity and to alpha-2 adrenergic blockade which may theoretically result in increased penile inflow, decreased penile outflow or both.

Yohimbine exerts a stimulating action on the mood and may increase anxiety. Such actions have not been adequately studied or related to dosage although they appear to require high doses of the drug. Yohimbine has a mild anti-diuretic action, probably via stimulation of hypothalamic centers and release of posterior pituitary hormone.

Reportedly, Yohimbine exerts no significant influence on cardiac stimulation and other effects mediated by B-adrenergic receptors, its effect on blood pressure, if any, would be to lower it; however no adequate studies are at hand to quantitate this effect in terms of Yohimbine dosage.

Indications: Yocon® is indicated as a sympatholytic and mydriatic. It may have activity as an aphrodisiac.

Contraindications: Renal diseases, and patient's sensitive to the drug. In view of the limited and inadequate information at hand, no precise tabulation can be offered of additional contraindications.

Warning: Generally, this drug is not proposed for use in females and certainly must not be used during pregnancy. Neither is this drug proposed for use in pediatric, geriatric or cardio-renal patients with gastric or duodenal ulcer history. Nor should it be used in conjunction with mood-modifying drugs such as antidepressants, or in psychiatric patients in general.

Adverse Reactions: Yohimbine readily penetrates the (CNS) and produces a complex pattern of responses in lower doses than required to produce peripheral a-adrenergic blockade. These include, anti-diuresis, a general picture of central excitation including elevation of blood pressure and heart rate, increased motor activity, irritability and tremor. Sweating, nausea and vomiting are common after parenteral administration of the drug.¹⁻² Also dizziness, headache, skin flushing reported when used orally.¹⁻³

Dosage and Administration: Experimental dosage reported in treatment of erectile impotence.¹⁻³⁻⁴ 1 tablet (5.4 mg) 3 times a day, to adult males taken orally. Occasional side effects reported with this dosage are nausea, dizziness or nervousness. In the event of side effects dosage to be reduced to 1/2 tablet 3 times a day, followed by gradual increases to 1 tablet 3 times a day. Reported therapy not more than 10 weeks.⁴

How Supplied: Oral tablets of Yocon® 1/12 gr. 5.4 mg in bottles of 100's NDC 53159-001-01 and 1000's NDC 53159-001-10.

References:

1. A. Morales et al., New England Journal of Medicine: 1221. November 12, 1981.
2. Goodman, Gilman — The Pharmacological basis of Therapeutics 6th ed., p. 176-188. McMillan December Rev. 1/85.
3. Weekly Urological Clinical letter, 27:2, July 4, 1983.
4. A. Morales et al., The Journal of Urology 128: 45-47, 1982.



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clinical problems in office practice. It is written both for the practicing primary care physician and for the physician in training.

The first edition was published in 1984 and contained 13 chapters, 806 pages, and many illustrations. It cost \$44.50 and was printed on heavier paper in larger type, making it easier to read than the new edition. Nonetheless, despite the increased cost and the smaller print, I am just as impressed with the second edition. In the 1300 pages there are 22 chapters, an expanded number of illustrations, and more than twice as much information. The scope of the topics covered has been expanded to include new chapters on common eye complaints, common respiratory tract infections, depression, dementia, hypertension, hand and wrist pain, liver dysfunction, menstrual disorders, and foot and ankle pain.

Each chapter includes a content summary and overview of the topic and is highlighted by a case illustration. The case discussion traces the history of the patient's presenting complaint to its conclusion. As the hypothetical patient's illness evolves and he or she returns to see the physician, the problem is discussed in detail, and the illness is more clearly defined. Differential diagnoses are developed, and treatment strategies follow in a logical sequential format similar to the real practice setting. Hence, the natural history of the disease is elucidated.

Appendices to the chapters contain practical tips on physical examination, additional diagnostic testing, patient education materials, and other treatment considerations. At the end of each chapter, there are also a number of illustrative common patient presentations followed by a discussion. Also included is an exciting list of questions for clinical research. These questions provide a useful educational tool for graduate medical education programs, to guide and stimulate the student, the resident, and the faculty in scholarly pursuits. I am particularly impressed with the discussions of diagnostic test probabilities and their correlation to physical diagnosis. The bibliography in this new edition has over 2000 more literature citations than were present in the first edition. As the editor points out, this indicates the expanding body of knowledge in ambulatory care medicine.

The editor indicates that when this book was originally conceived there was "a very different agenda in mind." He perceived a need for teaching clinical medicine in a much more practical way, with the focus on the patient who presents in the office setting where the time is more limited but there is an opportunity to allow the presenting complaint to evolve. A practical, cost-effective approach to clinical problem solving is consistently applied. Reilly and his coauthors stick to the theme that the generalist should know "a great deal

about what is common and enough about what is not so common." Major goals of this book are to help the clinician think in practical terms, develop an approach to the undifferentiated clinical problem, establish a working diagnosis, and institute relevant, appropriate, and effective treatment strategies. He has done an impressive job in meeting those goals.

There are nine new contributors, eight from the Dartmouth-Mary Hitchcock Medical Center, where the editor was located when the book was assembled. Even though each chapter is written in the same format, the quality of the discussions is not uniformly the same.

With 1300 pages, the book can hardly be expanded and be kept in one volume. It is expensive, but in comparison with other costly, more comprehensive but less practical books, it is well worth the \$115.00. Despite cost considerations, I would still like the bigger, bolder print, and I would like to see a further expansion to include even more topics such as itching, hemoptysis, fatigue, constipation, anorexia, fever, and weight loss. To do this, the third edition will have to be published in two volumes.

This book is a must for the library of every residency program in family practice or internal medicine.

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