

Reviews of Books and Software

Perez on Medicine: The Whimsical Art of José S. Perez. José Perez, Wayman R. Spence. WRS Publishing, Waco, Tex, 1993, 64 pp, \$29.95. ISBN 1-56796-005-7.

"We all need to laugh at what we fear, and nothing is more troubling than disability and death." With these words, artist José Perez describes his task of drawing insights from the American medical scene. While disability and death linger in the background and foreground of many of these paintings and create a tension skillfully relieved by Perez's bull's-eye humor, much of the tension and catharsis pertains not to these perennial existential themes but to the present messy state of the American health care system.

Perez's paintings and sketches focus primarily on three subjects: medical specialties, health care providers other than allopathic physicians, and medical institutions, such as hospitals, emergency departments, and third-party payers.

Perez is adept at exposing the foibles of each specialty: the neurologist who examines the mind without appreciating the wonder thereof; the psychiatrist whose own mind wanders to personal fantasies; the surgeon who is a glorified auto mechanic; the urologist who is a plumber; the internist who expects priests and princes to stand small in her almighty shadow; the ophthalmologist whose office is shamelessly comfortable and luxurious; and, by contrast, the family physician who, frazzled by his busy and eclectic practice, is in greater need of care than his patients.

A subtext emerges, pointing toward a reevaluation among the specialties. Perez's heroic pediatrician and public health physician appear more divine than human, and his family physician, although frail and mortal, seems to have acquired sainthood by means of martyrdom. Perez's paintings of nurses, podiatrists, and alternative practitioners convey a similar message about the saintliness, simplicity, and effectiveness of those who practice patient-centered care.

Whereas Perez's paintings of the various health care providers generally focus on one theme, his paintings of medical institutions often convey multiple meanings. The style is busy and colorful, the tone ranges from whimsical to sardonic, and the insights hit home. The

emergency department, for example, is a besieged citadel, the medical team outnumbered 10 to 1 by a never-ending onslaught of patients. Attempting to impose order on the chaos is an ineffective policemen whose demonstrative instructions go unnoticed. A closer look reveals a dog, a vulture, a television camera, a sidewalk vendor, an ambulance, and a triage nurse with a shovel, each a comment on the way emergency departments of public hospitals have become the primary care clinics for far too many patients.

Accompanying these provocative, delightful paintings and sketches are brief commentaries by Wayman R. Spence, a physician and art collector who apparently commissioned the paintings and published the book. I found many of Spence's interpretations helpful by identifying artistic allusions and providing insights from his knowledge of Perez's experience. The overall quality of the commentary, however, is uneven. Some interpretations seem flippant. Sometimes Spence comments on an image on the periphery of the painting but neglects a central, illusive image. Who, for example, is the woman sitting in the doctor's lap in "A Day in the Hospital"? I also had other concerns about the book. For example: why didn't Spence commission a painting of his own specialty, psychiatry? Why did he present the paintings in meaningless alphabetical order rather than organize them into the three themes identified above? Why did Spence refer to our ilk as "family practitioners"? Why didn't he comment on Perez's sexual objectification of women?

Although some of these concerns are more serious than others, they do not diminish my overall enthusiasm for this book. Most physicians will enjoy comparing Perez's caricatures of the various specialties, and many will equally appreciate his poignant critique of what Spence aptly terms the American "illness-care system."

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Sexual Abuse Counseling by Family Practitioners: Issues Across the Treatment Process and Management Strategies. Gary Direnfeld. Secrets of the Trade, Dundas, Can-

ada, 1993, audiotape, >60 min, and text, 20 pp, \$35.00. ISBN 1-895853-03-6.

This text and audiotape were produced by a medical social worker who specializes in treating adult victims of sexual abuse. The audiotape was recorded live during a presentation to family practitioners at Chedoke McMaster Hospital, Hamilton, Ontario, Canada. The manual is brief, 20 pages, and the tape runs just over 60 minutes.

There are many excellent works describing sexual abuse and its management. Unfortunately, this is not one. Because the audiotape was prepared at a live presentation during which there were many questions and answers, the volume of the recording changes constantly and is difficult to hear. Although the speaker's responsiveness to the audience, conversational tone, and pleasant manner would be conducive to an effective live presentation, the audiotape alone seems unorganized and the presentation superficial. References to diagrams that are not clearly described are not helpful.

Both the manual and audiotape focus on the practical aspects of caring for patients who have a history of sexual abuse. The author describes three stages to the relationship of the therapist/physician and these patients: establishment of trust, disclosure and repercussions of disclosure, and follow-up and termination of care. The audiotape further describes these changes in the context of behavior change in general. The stages are accurate but the descriptions brief. How long do most people take to establish trust? What are the most common repercussions of disclosure and which patients are most likely to experience them? How does this vary by clinician? How does this vary by age, ethnicity, and sex of the patient? Are certain types of sexual abuse more devastating to patients than others? None of these questions are answered.

The author recommends that practitioners familiarize themselves with the topic area before instituting therapy with persons who have been previously sexually abused. I would concur with this recommendation. Although this audiotape and manual might decrease a practitioner's anxiety about managing victims of sexual abuse, it does not provide an adequate review of the subject matter. Neither the audiotape nor the manual are comprehensive in their description of previous sexual abuse. There are few sta-

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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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statistics about sexual abuse and no discussion of different theoretical or therapeutic approaches. The manual is not referenced. There is an annotated bibliography describing four books. While those are well described, the bibliography is inadequate.

In summary, although this author tried to prepare a practical case-based review of the material concerning victims of sexual abuse, both the text and audiotape are inadequate. I cannot recommend the purchase of this learning kit.

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Conducting Research in the Practice Setting. Research Methods for Primary Care, Volume 5. Martin J. Bass, Earl V. Dunn, Peter G. Norton, Moira Stewart, Fred Tudiver, eds. Sage Publications, Newbury Park, Calif, 1993, 266 pp, \$20.95. ISBN 0-8039-5127-2.

The fifth volume in the series *Research Methods for Primary Care* examines a wide range of issues surrounding the conduct of research in the primary care clinic setting, with contributions from 24 primary care researchers from Canada, the United States, and Wales. The volume is divided into four sections: general issues including strategy and ethics; practical issues, such as how to involve staff and recruit patients in a busy clinic; collaboration with networks, industry, and universities; and examples of research using five different primary care populations.

The editors have been aggressive in covering a broad range of material in this volume. Major quality and ethical issues affecting the physician who delivers primary care and also performs research are addressed enthusiastically. Several experienced researchers provide valuable advice on how to retain the interest of both colleagues and nurses, and offer practical suggestions for incorporating research into patient-care activities. In what may be its best chapters, the importance of collaboration is described in detail from the unique perspective of the primary care physician, including the importance of community-oriented assessment and the advantages and disadvantages of involvement with other segments of the research community. The final chapters discuss problems that can occur during implementation of clinic research, along

with some practical solutions. The appendix contains a practical and encompassing checklist for persons considering initiating a clinic-based research project.

Far more comprehensive than other publications on the subject, the book sometimes suffers from lack of depth. Although providing study examples, it is not a text of study design. All in all, this volume provides an excellent introduction for clinic-based primary care physicians beginning to do research, as well as providing valuable background for an experienced researcher considering initiating a project in a primary care setting for the first time. *Conducting Research in the Practice Setting* is readable and motivating. It does not allow problems of this type of research to dampen the enthusiasm of persons who recognize the value and potential of practice-based research.

As an introduction to the field of practice-based research, it is eminently affordable, is not overpowering in length or difficulty, and presents a valuable perspective on the conduct of practice-based research in the real world. There should also be a place for this book on the shelves of all teachers of family medicine and other disciplines who have an interest in clinic-based research.

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