Book reviews

Medical therapeutics

Manual of medical therapeutics, 28th edn, GA Ewald, CR McKenzie. pp 592, illustrated. Little Brown & Co, Boston, 1995. £24.50, spiral bound

This Washington manual is now over 50 years old and still going strong in this, its latest edition. It has established itself as a standard reference source for practical therapeutics, and this new edition lives up to this. The choice of drugs (unusually for an American text, it uses only generic drug names) and the use of investigations were obviously based on US practice and would sometimes seem inappropriate in the UK. In general, however, the manual's approach to therapeutics is conservative rather than heroic, and this is probably why I found the differences between US and UK practice less intrusive than I expected. Areas such as the recommendations for management of hyperlipidaemia particularly ("cholesterol levels should be obtained in all adults over the age of 20") and other prophylactic therapies seemed excessively aggressive. The pivotal 4S study seems not to have influenced the section on hyperlipidaemia, but given the aggressive approach to managing lipids, it probably seems conservative to the authors. Apart from this, the text seemed up to date and key supporting literature is referenced (but only up to 1992, as far as I could find).

This is a book to be dipped into rather than read from cover to cover, and such a book depends heavily on the quality of its indexing: this was of a very high standard and makes this manual a very user-friendly text. A mark against this is the widespread use of abbreviations which to me at least were less than clear. It is more longwinded than I would have thought necessary, but I find this a fault with many American texts. There are a few anomalies in expression: for instance the suggestion that preoperative anti-arrhythmic therapy "should be reserved for patients with a history of sudden death" made me smile.

Will I use this book? I will certainly keep it on a shelf and look into it for an opinion when I feel uncertain. Will I recommend it to my house officers? I showed it to them, but they universally preferred the existing British books (eg, *Oxford handbook of clinical medicine*); this was not because of any deficiencies of the manual, but rather because they seem better placed for the UK market, although less comprehensive. I am sure that the Washington manual will deservedly continue to be popular elsewhere.

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Tuberculosis

Tuberculosis. A clinical handbook, LI Lutwick, ed. ppix+378, illustrated. Chapman & Hall Medical, London, 1994. £25.00, paperback

This slightly larger than pocket-sized book represents extremely good value. It provides a reasonably comprehensive account of tuberculosis, including chapters on all aspects

relevant to most clinicians' practice. For a book of its size it is remarkably well referenced and any student of tuberculosis would find it friendly to use and easy to get around. The use of tables summarising key points is used to good effect in several chapters.

The chapters on paediatric tuberculosis and clinical aspects of adult tuberculosis are particularly good. The book makes no attempt to deal with the more modern areas of tuberculosis research which may soon be applicable to the service fields such as the polymerase chain reaction and restriction fragment length polymorphism. It is obviously firmly stamped with its origins from the US and as such would perhaps be of only limited value in countries with poor resources. The chapter on infection control in particular, would have relatively little application outside the US. All contributors to the book are currently working in the US, which tends to limit the international applicability of the book.

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Internal medicine

The internal medicine casebook. Real patients, real answers, RW Schrier. pp xi+468. Churchill Livingstone, Edinburgh, 1994. £24.00, paperback

This book contains modified actual cases provided by 89 subspecialty fellows in Denver, US, that have the real flavour of the teaching round and are of high quality. These have been edited by distinguished clinical teachers but the proceeds of the sale will support future fellows' travel to educational meetings!

The cases cover 89 topics of US internal medicine subspecialties but lack topics in general medical neurology suitable for UK house staff. Each case is succinct and packed with relevant detail. A number of questions are then raised which demand an interpretation of the findings, a reasoned explanation of the pathophysiology and opportunity to discuss the management. The answers are clear with therapy to the fore. It is easy to find topics of interest and the index is sufficient. Good recent references for further reading are given but a few are past their best. It is not a textbook but should be viewed as a valuable aid to learning and many final year medical students and junior doctors will find it stimulating. The topics are case-diagnosis based and not problem based. The initial introductory text narrows the reader to a particular diagnostic area too readily before reading the case and I believe weakens some of the educational strength of the excellent material. The introductory information could be readily built into the discussion after the case and so encourage the reader to evoke their own knowledge before working through the answers. This is a viewpoint and not a criticism of what is an excellent text.

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Clinical statistics

Clinical biostatistics: an introduction to evidence-based medicine, G Dunn, B Everitt. Edward Arnold, London, 1995. £10.99, paperback

This book presents a rather different approach to medical statistics than most, in that traditional significance testing is relegated to an appendix and instead the emphasis is on the practical use most doctors would want to make of statistics: in interpreting probability, the variability of clinical measurement, clinical trials, and determination of associations. I found this enjoyable and interesting, but perhaps incomplete. Many of the current uses to which statistics are put are unsatisfactory, but what is wrong with them is perhaps difficult to understand if the student has no base in hypothesis-testing type statistics.

The book is well written. Mathematics is kept to a minimum, and where present is placed in boxes so that it does not interfere with the flow of the text. Despite the subtitle concerning evidence-based medicine, there was nothing about the importance of absolute versus relative benefits of treatment, nor about such useful measures as numbers needed to treat.

On the whole I enjoyed this book; but I doubt that it will be read by the lay person keen to learn more about the interpretation of medical data as the authors suggest, and I do not think that the material in it would alone be adequate for a medical undergraduate course, although the understanding it might generate would be a useful foundation for other parts of a course.

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Statistics in clinical practice, D Coggon, pp viii+115, illustrated. BMJ, London, 1995. £10.95, paperback

Statistics is one of those heartsink subjects for many doctors. Yet, as David Coggon says in his foreword, these days one cannot practise medicine well without some understanding of statistics; a doctor with no knowledge of statistics is unable to evaluate much of the scientific information that is crucial to the optimal care of patients. The trouble is that the relation between the theory and the clinical application is not very clear in many statistical texts, making them largely inaccessible to clinicians.

Coggon states that the book is aimed at doctors and students who view statistics as a necessary evil; it is not intended as a manual for those wishing to carry out their own statistical analyses but sets out to explain the principles of statistics that must be understood to read journals and practise clinical medicine competently. I think he has achieved this task admirably. The often cited publisher's remark about Stephen Hawking's best-selling *Brief history of time*, that every equation would halve sales, has clearly had an impact. This is a statistics text with no equations or Greek letters (except in one brief footnote).

The book starts with descriptive statistics used to summarise data, followed by chapters on a description of statistical inference and methods by which general conclusions can be drawn from observations. Concepts such as probability, statistical power, confidence intervals, and the predictive value of screening tests are explained clearly and practical examples drawn from medicine are used to illustrate principles. I found the questions at the end of each chapter particularly helpful in helping to consolidate understanding.

Paradoxically, the dangers of a poor understanding of statistics are exacerbated nowadays by the ubiquitous access to personal computers and powerful statistical programmes; it is so easy and tempting for the young researcher to produce tables of multivariate regressions with exciting values but with little sense of their meaning. Coggon laudably includes a final chapter on interpretation of statistical analyses, often omitted in statistical texts, but a critical part of the process of interpreting findings and their relevance. Issues of bias and chance are discussed, but I was somewhat surprised that confounding, such a central issue in interpretation of findings, was not covered and I hope this is something that can be remedied in a future edition.

Inasmuch as any statistics text can be described as readable, I think this book is, and would warmly recommend it as an excellent introduction for clinicians to key statistical principles.

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Infant care

The first year of life, 4th edn, HB Valman. pp vi+106, illustrated. BMJ, London, 1995. £12.95, paperback.

This book will be useful for general practitioners, particularly those involved in surveillance, and for health visitors. It would form a good core document for an undergraduate child health curriculum. Its strengths include the attention to detail with simple, understandable guides to procedures such as resuscitation. It is well illustrated and contains an up-to-date growth chart, although only for boys. In the chapters on failure to thrive and growth there is an excellent analysis of growth patterns in infancy. There frequently remains confusion about what is normal and what is abnormal growth. The examples given here clarify the situation and give practical advice.

It was nice to see the term 'clicking hip' treated with the contempt it deserves—something usually missing from more weighty tomes. The information on 'what the fetus feels' and 'what the newborn baby can do' focusses well away from the torrent of information on evidence-based care but is just the sort of thing that parents are interested in and just the sort of thing to chat about in the baby clinic.

The book contains no references, so the scientist wanting to know the reference for the data on the relationship between bacterial vaginosis and a five-fold reduction in preterm delivery is thwarted. He may also want to see support for the statement 'home prepared foods are best' when he has seen a

recent paper showing they contain too little nourishment. The general paediatrician, however, may appreciate the sound practical approach.

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Diabetes

Diabetes in Europe, R Williams, L Papoz, J Fuller, eds. pp vi+215. John Libbey, London, 1994. hardback.

Diabetes mellitus is a problem—the most uncontroversial statement anyone could make! The prevalence of both Type 1 and Type 2 diabetes is increasing and 75 years after the first isolation of insulin it remains a very major cause of morbidity and mortality worldwide. It was therefore with interest that I reviewed this book which is based on a publication as part of the 'Euro Diab' concerted action programme of the European community. It helps put into context the scope of the problem of diabetes with consideration of areas such as epidemiology, classification, pathogenesis, vascular complications, pregnancy, and, in particular, socio-economic impact. All the contributors, and particularly the editors, are well known in their field and generally give a balanced view of their subject area.

The monograph is epidemiologically based and is unique in that it largely concentrates on diabetes in Europe. It is also a brave attempt to provide much needed data on which to base outcome studies required by the St Vincents Declaration. The St Vincents Declaration is basically a 'statement of intent' which seeks to achieve, amongst other things, significant reduction in blindness, amputation, renal disease, etc, in diabetic patients over a finite time period. A major problem in fulfilling these excellent aims is that hard epidemiological data are difficult to come by from which to establish a baseline. This publication goes some way to help overcome this problem.

On the negative side, some of the chapters are somewhat turgid and would make difficult bedtime reading! There is also some overlap between chapters which is inevitable in such a multi-author publication. The monograph is, however, generally well written and very interesting in parts and will certainly be a useful source of reference for some time to come.

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Neurological disorders

Management of neurological disorders, CM Wiles, ed. pp viii+341, illustrated. BMJ, London, 1995. £24.95, paperback.

This small but heavy paperback contains a compendium of articles, many of which were published in the *Journal of Neurology, Neurosurgery and Psychiatry*. It is not a neurology textbook and it does not cover important areas of neurological practice such as managing the dizzy or ataxic patient, or dealing with peripheral nerve or spinal cord disorders. In

most chapters, the reader is told about the epidemiology of the disorder and guided through diagnosis, investigations and management with a final section on audit. There is a panel of summarised information at the end of the text, followed by references. The most successful chapters are those where you feel the author is writing about real-life difficulties and how he deals with them. The least effective are just cut-down textbook chapters listing facts about particular diseases. Also included are articles describing clinical genetics and neurorehabilitation and an excellent chapter on resources and facilities which should help the modern neurologist to plan his service in the context of local strengths and deficiencies. The audit approach is only partially successful as it seems that some authors are still confused about what audit should be. The book is reasonably cheap and worth buying for the neurology unit if only for the five or six excellent chapters it contains. Beyond this, though, given that most patients with neurological disorders will not be managed by neurologists at all, I would hope that this book will be bought and read by many if not most physicians.

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Practice management

Practice management handbook, P Forster. pp viii+189. BMJ, London, 1995. £14.95, paperback.

The questionable management of recent changes in the National Health Service has tarnished the concept of 'management' in many a general practitioner's mind. General practitioners are also, perhaps, becoming distanced from the day-to-day running of the practice. That work is increasingly performed by managers, often specifically trained for the job. This excellent book draws together a broad range of relevant topics based on articles previously published in *Practice Manager*, *Pulse*, *Medeconomics* and *BMJ*. Peter Forster ensures a style that is uniform and straightforward; the emphasis, by means of the prolific use of bullet points and boxes, is practical rather than theoretical. Full of abundant good sense, the tone of the book is hopeful and humanistic. Most problems, it suggests, may be overcome by reasonableness and good communication embodied within transparent and accessible procedures. There are clear indications as to when and where legal considerations must be taken into account, with references to more comprehensive information and guidance. Management theory is drawn mostly from the commercial sector but, in the section on handling complaints, attention is drawn to the distinction between difficult patients and customers. The book does not emphasise, however, that specific management problems may attach to the 'business' of dealing with health and illness. A useful handbook for managers, this book is also both a reasonably comprehensive and brief guide for the general practitioner into what the practice manager, in the name of sound practice management, should be up to.

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