

burdensome jargon. For those who wish additional information on particular topics, several key references are provided at the end of each chapter. Additionally, subject matter is easily accessed by the index, which distinguishes between illustrations and text.

The strength of this atlas lies in the quality of the visual material, its clinical applicability, and its demystification of often misunderstood and challenging concepts within the field. The family physician, family practice resident, medical student, and allied health professional will find it a meaningful accompaniment to the study of allergy and immunology and a most welcome addition to the professional library.

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Diabetes Mellitus: Diagnosis and Treatment. Third edition. By Mayer B. Davidson. 435 pp. New York, Churchill Livingstone, 1991. \$37.50 (paper). ISBN 0-443-08718-0.

This book's purpose is to offer guidance in clinical decisions regarding the treatment of diabetes. Having accurately identified who cares for diabetic patients, the author addresses this book to that audience. Practical suggestions are given to help those who care for patients with diabetes mellitus, and patient profiles are used to illustrate many of the suggested treatment strategies.

This concisely written book has a writing style that is easy to follow and readily comprehended, with the exception of a few areas that are excessively detailed. After preliminary discussion of the definition and classification of diabetes mellitus, treatment strategies are provided, including diet and the complications of this chronic illness. Whether intentional or coincidental, the title of chapter 2, "Dietary Therapy," helps reinforce the concept of nutrition as a therapeutic aid in controlling diabetes. In addition, the book validates what family medicine has acknowledged for years: the critical importance of the "psyche" in illnesses, in this case, diabetes mellitus. A comprehensive review of insulin and oral agents along with their uses is presented in chapters 4 and 5.

It is refreshing to learn that a diabetologist recognizes the benefit of flexibility and the need for different approaches to patient care, i.e., not all patients with newly diagnosed diabetes need be hospitalized. Throughout the book there are many examples in which the author treats the disease in the context of the patients and their families.

In summary, this book is well written, and unlike many medical texts that contain paragraph after paragraph of facts that make it difficult to follow, *Diabetes Mellitus: Diagnosis and Treatment* reads with the flow of a good novel. It is filled with necessary data that are presented in a manner that motivates the reader to keep turning pages.

I have not found a better source of information about diabetes mellitus in a text that is so readable. With diabetes accounting for 2.5 percent of a family practice population, all house staff and any practicing family physician who cares for patients with diabetes mellitus should read this book.

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Conn's Current Therapy 1991. Edited by Robert E. Rahel. 1192 pp. Philadelphia, W.B. Saunders, 1991. \$49.95. ISBN 0-7216-2583-5.

Conn's Current Therapy 1991 is an annual update of both common and uncommon problems family physicians frequently encounter. This particular addition claims that 350 experts provide consultations with a fresh viewpoint. Treatments presented are deemed "easy to read." The editor notes that 75 percent of the material in this edition is entirely new.

Certainly the content of *Current Therapy* is relevant to family physicians. Conditions that family physicians encounter every day in their office or the hospital are discussed authoritatively. Rare and esoteric conditions are infrequently presented. Whereas medical conditions predominate, obstetric, pediatric, psychiatric, and surgical conditions are also included.

The clinical material is organized by organ system, which makes the Table of Contents a ready reference. The limitations of such a broad classification system are overcome by a detailed and comprehensive 51-page index, which greatly enhances reader access to specific topics.

The greatest strength of *Current Therapy* is the breadth of clinical material presented in such an easy-to-read and concise fashion. Many topics are covered in a couple of pages, making it possible for physicians to review a condition while the patient is still in the office. The editor has done an excellent job in presenting the essence of the topics and their treatments.

Limitations of *Conn's Current Therapy 1991* include the absence of references, minimal attention and discussion of psychosocial interventions, and lack of suggestions regarding thorny management issues, such as how to handle a suspected case of chickenpox in the office. Despite these limitations, *Current Therapy* hits the mark.

Its concise scientific focus is bound to be warmly welcomed by most busy family physicians. It is a bargain at an even greater cost. Every practicing family physician should have ready access to it. If they do not, they should at least get a 30-day free preview to judge for themselves.

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