

Book Reviews

Manual of Clinical Problems in Obstetrics and Gynecology with Annotated Key References. Edited by Michel E. Rivlin, John C. Morrison, and G. William Gates. 480 pp. Boston, Little, Brown, 1990 (paper). ISBN 0-316-74774-2.

Among the many significant challenges presented to family physicians in practice, few are more daunting than "keeping up." This task is even more important in areas of high potential acuity, morbidity, and mortality, such as obstetrics and gynecology. Failure to exhibit currency in these areas not only increases the likelihood of adverse patient outcomes (often with both fetal and maternal patients involved), but also plunges the physician into an area fraught with significant medicolegal risks. This small handbook, which succinctly deals with the most troublesome and controversial areas in obstetrics and gynecology, thus has excellent relevance to family medicine. Its content covers the 105 major problem areas commonly seen in clinical practices that include obstetrics and gynecology.

The book is easy to read. Each problem area is assigned one chapter, which is usually only 2 to 3 pages in length. The authors have endeavored to provide both good clarity and reasonable comprehensiveness in this extremely concise format. While significant variability exists between the styles of the multiple authors, the editors have created a book with good internal consistency.

The book is published in the spiral notebook format that Little, Brown has used in their popular "Spiral Manual™" series. Its 6 × 8½-inch size allows it to be easily carried in a clinic coat pocket. In the foreword, the goal of the volume is articulated as "... providing in-depth information in simple, readable fashion about major topics . . .," and this task is well carried out. The 105 topical areas addressed are grouped into major sections under the general categories of obstetrics and gynecology. The organization is logical, and the volume is well indexed.

Although small, the print is of good quality and is easy to read. There are no illustrations, graphs, or tables.

This book would be useful to all family physicians, even those who do not practice obstetrics. Its concise, summary-style format provides an easy method of updating for the practicing physician. These same advantages also accrue to family practice residents who require a quick review before approaching unfamiliar clinical situations. Family physicians who are not currently practicing obstetrics will not only find the gynecologic information useful, but will also appreciate quick obstetric reviews in the event of an emergency.

My major concern about this manual is its currency. If used as an updating tool, currency is man-

datory. From the copyright dates of the first and second editions, it appears that the book is updated only every 4 years. While the annotated bibliography included with every topic is useful and quite complete, its most recent inclusions are from 1989 journals. The information, especially in rapidly changing areas, can quickly become dated.

In summary, this is a useful, high-quality book with strong relevance for family medicine. It should be considered for inclusion in all family physicians' libraries.

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Manual of Emergency Medicine Diagnosis and Treatment. Second edition. By Jon L. Jenkins and Joseph Loscalzo. 529 pp. Boston, Little, Brown, 1990. \$24.50 (paper). ISBN 0-316-46055-9.

One of the Little, Brown "Spiral Manual™" series, this compact, well-written book is a valuable reference for those who provide emergency or acute medical care. It is sensibly organized into five sections: cardiopulmonary resuscitation, diagnosis by chief complaint, initial assessment of the multiple-traumatized patient, trauma, and special problems. The section covering problems that present by chief complaint, where the diagnosis is not yet made, has a particularly interesting format. For each of the 34 problems, such as the acutely red eye or shortness of breath, the authors assist in diagnosis by outlining the common causes, the less common causes not to be missed, and other causes. Then, in each case, a more detailed discussion of diagnosis and management follows. In all sections, the illnesses and injuries discussed are the ones most commonly seen, and these are supplemented by less commonly seen ones, such as altitude sickness and electrical injuries.

The book is indexed and cross-referenced, and the writing is succinct. There are charts and tables that support the written text but no photographs or diagrams. I do not see this as a shortcoming, though. The authors, in keeping the size of the text small, kept the information of highest priority. They sought to provide essential, practical information in a text format, and they met their goals well.

Medical students and residents will appreciate having this text in their pockets when seeing patients in emergency or acute care settings. It will help them manage most of the problems they will see. It is not intended to be the definitive textbook for detailed discussions of specific problems. Practicing physicians will use it more selectively to help answer those important questions that come up when seeing patients: