defined, and the prose is easily readable. The authors point out that the information in their book generally represents the consensus of American clinical rheumatologists.

The authors devote the greatest part of the book to the basic and clinical pharmacology of the important drugs in rheumatology. They separate the agents used in rheumatic disease patients into four major categories: nonsteroidal anti-inflammatory drugs; corticosteroids; slow-acting agents, including immunosuppressive drugs; and drugs used for gout and pseudogout. A section at the end of the book (25 pages) provides a brief review of overall drug therapy for the major rheumatologic disorders. This format allows readers interested in the treatment of a specific condition to read the brief section at the end of the book first and then review the basic and clinical pharmacology of the individual drugs. The tables and illustrations are excellent, abundant, and relevant to the topic discussed in each chapter. This book is a good source for family physicians and internists in general. It is an important resource for primary care physicians who are interested in rheumatic disorders.

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Manual of Clinical Problems in Cardiology with Annotated Key References. Fourth edition. By L. David Hillis, Richard A. Lange, Peter J. Wells, and Michael D. Winniford. 553 pp. Boston, Little, Brown, 1992. \$28 (paper). ISBN 0-316-36405-3.

The intended audience for Manual of Clinical Problems in Cardiology with Annotated Key References (Manual of Cardiology), part of the Little, Brown spiral manual series, is not specified, but the goals of this fourth edition are to update and add topics, to update references (a large number of them are from 1988 to 1991), and to provide "a maximal amount of current factual information . . . within the context of a manual."

Manual of Cardiology is organized into seven sections (Rhythm and Conduction Disturbances, Myocardial Ischemia and Infarction, Myocardial and Pericardial Diseases, Congenital Heart Disease in the Adult, Valvular Heart Disease, Common Therapeutic Approaches to Cardiac Abnormalities, and Miscellaneous Conditions and Issues) containing 128 chapters. Chapters typically consist of one to two pages of text, followed by an annotated bibliography that is twice the length of the text. Each reference is followed by one or two sentences of annotation. As claimed, there are references up through 1991, but many references are from the 1960s and 1970s, such as JAMA articles on management of malignant hypertension published in 1974 and 1977, whereas 1991 references fail to appear (e.g., Gifford RW. Management of hypertensive crises. 7AMA 1991; 266:829-35).

Manual of Cardiology contains a wealth of information. The short synopses of atrial fibrillation, unstable angina pectoris, valvular dysfunctions, pericarditis, and a variety of drugs, for example, provide excellent reviews and updates; however, specific details of information vary substantially. For example, the authors state that "the success of conversion of atrial fibrillation to sinus rhythm is indirectly proportional to left atrial size," but left atrial dimensions, even normal ones, are never specified. Nevertheless, normal valve dimensions, as well as valve dimensions generally corresponding to mild, moderate, and severe disease, are presented in the chapters on each valve dysfunction.

I was unable to locate endocarditis prophylaxis regimens, isolated systolic hypertension is barely mentioned, and the Systolic Hypertension in the Elderly Program (SHEP, JAMA 1991; 265:3255-64) is not referenced. There is no discussion of pulmonary artery (Swan-Ganz) catheters. Additionally, there are some indexing quirks: the entry "asymmetric septal hypertrophy" refers the reader to an isolated sentence but ignores the chapter on hypertrophic cardiomyopathy.

Manual of Cardiology is unillustrated, tables are rare, and print is small. Students and new residents could have difficulty determining relative importance of information and would not obtain the specific guidance they usually seek. Because substantially more than 50 percent of the book is annotated bibliography, Manual of Cardiology seems most useful for those in need of this feature; this manual is less expensive than frequent extensive literature searches. Primary care physicians with an interest in cardiology would find Manual of Cardiology useful if its limitations are recognized.

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Nelson Textbook of Pediatrics. 14th edition. Edited by Richard E. Behrman and Robert M. Kliegman. 2006 pp., illustrated. Philadelphia, W.B. Saunders, 1992. \$90. ISBN 0-7216-2076-8.

By virtue of publishing a 14th edition, the longevity of this textbook attests to its success. It is likely that few practitioners involved in the care of children do not already have a familiarity with this "standard." Certainly, the editors would not want to deviate too far from their successful formula in preparing a new edition. In fact, the overall organization and format have not changed much, and even major portions of the text are taken word for word from the previous edition. This is not a deficiency but a reflection of the large body of basic information that has not changed a great deal in the 5-year interval since the previous edition.

For those who are unfamiliar with this book, it is a comprehensive textbook of the entire field of pe-