Comprehensive Adolescent Health Care. Edited by Stanford B. Friedman, Martin Fisher, and S. Kenneth Schonberg. 1190 pp., illustrated. St. Louis, Quality Medical Publishing, 1992. \$85. ISBN 0-942219-14-7.

This text, as the title implies, is comprehensive, one to which you can refer for almost any question concerning adolescent care. At nearly 1200 pages, however, it hardly fits in your pocket.

Multi-authored and edited, the text is well organized into five sections: Principles of Adolescent Medicine: Medical Disorders: Psychosocial Issues: Gvnecologic, Urologic and Sexual Issues; and Adolescent Surgery. The index is thorough and facilitates quick reference to the text. Individual chapters within each of the sections are generally well done and timely. For example, there are some interesting chapters in the section Psychosocial Issues that address each of the following areas: affluence, poverty, cults, and the adopted adolescent. The chapter on sports medicine, although brief, is an excellent overview. Although much of the medical information found in this text is familiar to family physicians, it is appropriately placed within the context of adolescent care. For example, the discussion on sleep disturbances describes hypersonnia as it relates to findings from a survey of adolescents. The information is as current as any textbook.

Although I found this text useful, I doubt the intended audience is the practicing family physician. Most of its information can be obtained from other references family physicians would have available, which might not be true for pediatricians or general internists, who would find adolescents at the boundaries of their practice profile.

There are areas of deficiencies in this text. Orthopedics and obstetrics are not covered, and the chapter on dermatology is inappropriately focused. Rather than try to give an overview of all dermatology, I would have preferred to see much more discussion of conditions common to the adolescent age group, such as acne. Most family physicians would have a more comprehensive general dermatologic reference text.

Whether an individual physician should purchase this text depends on the number of adolescents in that physician's practice and the style of reference preferred. This text is a worthwhile purchase, and I would recommend it for a family medicine program, a group practice, or a hospital library. The price is typical for this class of book.

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Differential Diagnosis of Common Complaints. Second edition. By Robert H. Seller. 416 pp., illustrated. Pbiladelpbia, W.B. Saunders, 1993. \$27.50 (paper). ISBN 0-7216-3327-7.

The second edition of this wonderfully written book is intended to help physicians focus on the diagnosis of the most common complaints seen in primary care. In the first edition there were 31 complaints covered. This edition addresses 34, which according to the author account for more than 80 percent of the chief complaints with which physicians are confronted in their office practices. The book is certainly not intended to review the possible diagnoses in any detail, but they are discussed adequately.

Each chapter has an introduction describing the most common causes of the symptom or problem, as well as the nature or characteristics of the patient, and pointing out those conditions that are most likely to occur in a particular age group or with an underlying chronic problem. The author describes the nature of the symptom or problem itself, including its special characteristics of presentation, duration, and timing. There is an informative discussion of associated symptoms precipitating and aggravating the problem, as well as ameliorating factors, physical findings, diagnostic studies, and less common diagnostic considerations. There is no purposeful discussion, however, of management or treatment, which is frustrating; I was left with a need to know more about the problem. This omission unfortunately makes the book somewhat less useful. Selected references are provided with each chapter. A unique characteristic of the book is the summary table that is located at the end of each chapter, listing the salient diagnostic features of the most common clinical entities that might cause a particular complaint.

This book is geared to the student, resident, and practitioner, as it is oriented toward a broad overview of patient care. It is particularly relevant for the physician in primary care, and I am comfortable in recommending it.

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Emergency Procedures. Edited by Micbael S. Jastremski, Marc Dumas, and Lisa Penalver. 470 pp., illustrated. Philadelphia, W.B. Saunders, 1992. \$42. ISBN 0-7216-5127-5.

Regardless of the clinical setting, family physicians are often called upon to perform emergency or semi-

emergency procedures during the course of their clinical practice. Although the authors intended this book for the "beginning physician who is learning patient management," it will be useful for all physicians performing emergency procedures, especially those physicians who are working more extensively in emergency department or urgent care settings. Most chapters include helpful illustrations to accompany the text description of each procedure. For each procedure the authors have included a brief description of indications, contraindications, equipment, universal precautions, technique, complications, perils and pitfalls, and references.

The book is easy to read with a clear, concise, readable style. Some chapters cover several procedures in a particular discipline, e.g., anesthesia or orthopedics, while other chapters are devoted entirely to a single procedure, such as thoracentesis or nasal packing. The quantity of information and the extent of detail varies widely from procedure to procedure. Even in those chapters that are brief, however, the descriptions are of sufficient detail to give the reader useful guidelines. The text description of how to perform a procedure with an accompanying illustration was very easy to follow and clear. For the most part, two or three references are listed for each procedure. For some procedures, the author's "extensive experience" is the only reference listed. Because this is more of a how-to text, the lack of references in some chapters does not detract from the quality of the book.

Although most procedural techniques are learned through practice under guided supervision, this book is a useful reference for the clinician who wants to review the techniques for uncommonly performed or new procedures. It will be perhaps most useful as a quick specific review before performing a procedure.

In summary, this is a useful technical manual for those who perform emergency procedures as a part of their clinical practice. Medical students and physicians in training will find this text helpful as they learn procedural techniques.

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Essentials of Family Practice. Edited by Robert E. Rakel. 468 pp. Philadelphia, W.B. Saunders, 1992. \$49.95. ISBN 0-7216-4227-6.

In the Preface of *Essentials of Family Practice*, the editor explains that this new book is designed to "serve as a resource for medical students enrolled in courses teaching the [essentials of family practice]." The book has 72 contributing authors. It is divided into 19 content chapters and concludes with a 20th chapter entitled Clinical Case Studies. This last section, 202 pages in length, contains 47 different, patient-based discussions about common problems seen in the specialty of family practice. Each chapter is followed by a set of self-study questions, the answers for which appear at the end of the text.

This book is ambitious in both its breadth and depth. The initial two chapters provide an overview of the specialty of family practice. The third chapter explores the subject of ethics in family medicine, and Chapters 4, 5, and 6 examine family dynamics and the family's influence on health and illness. The remaining content chapters focus on care of the dying patient, home care, communication and interviewing skills, patient compliance, disease prevention, practice management, research in family medicine, how to read medical journals, clinical problem solving, and interpreting laboratory tests.

This text is actually two books in one. The first is a resource guide to familiarize students with the specialty of family practice and with a number of topics often best taught to medical students by family physicians. The second book provides an introduction to a number of common clinical problems seen by family physicians. Yet, the case studies in the latter half of the book do not necessarily relate to the content areas presented in the first half of the book.

It seemed apparent to us as reviewers that medical students might need guidance if they are to avoid becoming frustrated when reading this book. In particular, some chapters provide extensive, in-depth analyses of specific content areas. Students might be overwhelmed with the amount of information contained within these chapters. It would seem appropriate for course directors to read the book carefully and to select the sections or chapters they believe are most appropriate to meet the objectives of their courses. By contrast, the clinical case studies range from 3 to 6 pages in length, are easy to read, and can be used as self-directed learning for the students.

This book can be compared with a popular text edited by Sloane, Slatt, and Baker entitled Essentials of Family Medicine. The Sloane, et al. book, written in 1988, is smaller in size, shorter in length, and less extensive in scope. In the first 12 chapters, Sloane and his colleagues provide an overview of the principles of patient care in family practice. Because the chapters are brief, the authors have added a list of annotated suggested readings to the end of each chapter. Similar to Rakel's book, the text of Sloane, et al. also includes a number of chapters that address common problems seen in family practice. Whereas Rakel has used a patient vignette to provide a context for each common problem discussion, Sloane and colleagues present background information about each clinical problem followed by a discussion of management strategies. Some of their chapters include brief case examples, but the cases are not used to explore the process of clinical problem solving, which is one of the benefits of the case discussions in Rakel's book. Family medicine educators who teach