

various symptoms. In both sections of the book the topics are arranged alphabetically, from abortion, spontaneous, to Zollinger-Ellison syndrome in the expanded topics section, and from acanthosis nigricans to zygomycosis in the short topics section.

The text layout is unique and user-friendly and the information is concise. Each expanded topic is displayed on two side-by-side pages in a three-column format, and the subject matter under discussion is flagged in boldface type at the top of each page. The topics are subdivided into six sections—basics, diagnosis, treatment, medication, follow-up, and miscellaneous—with generally one section per column. The short topics are subdivided into description, synonyms, causes, and treatment. Usually three short topics are covered in each column, so that there are nine short topics per page. A medication index, with cross-references to topics where that drug is mentioned, and a topic index are included at the end of the book. Although there is an occasional table, there are no illustrations.

The reader will find pertinent information regarding commonly diagnosed problems, whether atrial fibrillation, failure to thrive, human immunodeficiency virus infection and acquired immunodeficiency syndrome, menorrhagia, pulmonary embolism, syncope, or teething. A great amount of information is provided for each topic, including description, signs and symptoms, causes, risk factors, laboratory tests, imaging, choice of medications, patient monitoring, prevention, prognosis, associated conditions, and age-related factors. All this information is displayed in outline format, truly providing a quick 5-minute consultation on the subject at hand.

This text would well serve practicing primary care physicians as an adjunct in the office setting either before, during, or after patient contact, especially when they encounter conditions they might not have seen recently. Residents and medical students would also greatly benefit by having this reference in their library.

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**Arthritis in Black and White.** Second edition. By Anne C. Brower and Donald J. Flemming. 428 pp, illustrated. Philadelphia, WB Saunders Company, 1997. \$79. ISBN 0-7216-5152-6.

*Arthritis in Black and White* achieves its goal of providing a small, practical book that aids in the accurate diagnosis of arthritic and systemic disease using radiography. The book, written in a clear and concise manner, is organized into two parts. The first half, which analyzes radiographic changes by joint, allows the physician with a knee radiograph, for example, to look at various radiographs of the knee and match it with the appropriate arthropathy. The second half of the book designates a chapter, including radiographic findings, to each of the following 14 diseases: rheumatoid arthritis, psoriatic arthritis, Reiter's disease, ankylosing spondylitis, osteoarthritis, neuropathic osteo-

arthropathy, diffuse idiopathic skeletal hyperostosis (DISH syndrome), gout, calcium pyrophosphate dihydrate crystal deposition disease (CPPD), hydroxyapatite deposition disease (HADD), miscellaneous deposition diseases, collagen vascular diseases, juvenile chronic arthritis, and hemophilia. This information allows the reader to look up the multiple bony changes found in a particular disease.

*Arthritis in Black and White* illustrates the hallmarks of arthropathies. For example, the metacarpal shaft of the second or third digit represents overall mineralization; the sum of the two cortices should equal one half the width of a normally mineralized digit. Rheumatoid arthritis can cause erosion and loss of joint spaces uniformly throughout the wrist carpal compartments. Pencil-in-cup erosive changes of the interphalangeal joints can be seen in psoriatic arthritis. A Lisfranc fracture-dislocation is an often unsensed separation at the tarsometatarsal joint in diabetic patients with neuropathic osteoarthropathy. In osteoarthritis there is preferential loss of the medial tibiofemoral compartment of the knee. In septic hip arthritis there is loss of the smooth white cortical line. With chronic rotator cuff tear, the humeral head approaches the acromion and is less than 7 mm. A syndesmophyte is a vertical ossification of Sharpey's fibers bridging two adjacent vertebral bodies; it is the hallmark of ankylosing spondylitis.

The authors have compiled more than 400 plain film radiographs, which are printed with excellent resolution. Many radiographs are labeled with arrows. Some of the other radiographs could use additional arrows to demarcate findings described in the text. The book does not address physical examination or treatment of arthritis. While the book is designed for general radiologists, family physicians, internists, and rheumatologists to use in day-to-day practice, not all physicians read radiographs to this extent. I recommend this book to family physicians who read their own radiographs, have a large geriatric population, or have a special interest in the arthropathies or radiology. It is a well-done reference on the black and white radiographs of arthritic disease.

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**Foundations of Nutritional Medicine: A Sourcebook of Clinical Research.** By Melvyn R. Werbach. 328 pp. Turzana, Calif, Third Line Press, 1997. \$49.95. ISBN 0-9618550-6-1.

The author compiled this interesting desktop reference to "assist health practitioners in integrating nutritional medicine into their practices." It is designed to serve as a companion to his previous volumes on the influences of nutritional factors on specific disorders.

The first chapter lists symptoms that could be caused by a nutritional deficiency or excess and the possible specific nutrients relevant to each symptom. The second chapter provides abstracts of studies selected to describe which populations might be at risk