

## Book Reviews

**Basic Cancer Medicine.** By Maurie Markman. 140 pp. Philadelphia, WB Saunders, 1997. \$35 (paper). ISBN: 0-7216-5824-5.

This short book is intended to provide all generalist physicians caring for cancer patients with a quick reference to the management of malignant disease. The topic is highly relevant to the practice of family medicine. The book is divided into four sections: tumor biology and general principles of therapy (28 pages), information on 36 different types of cancer (72 pages), a miscellaneous section describing unproved therapies and what is on the horizon (9 pages), and a description of various antineoplastic drugs (3 pages). Unfortunately, the considerable amount of white space and numerous blank pages make those numbers misleading. Coverage is extremely abbreviated for most topics, especially antineoplastic drugs, for which insufficient data are given to guide their usage or even to monitor for adverse effects.

Listed at the end of each topic are suggested additional readings, the majority of which are from the *New England Journal of Medicine* or oncology journals, that might have escaped notice by the primary care physician. None is more recent than 1995; an updating would have been useful before the book went to press.

Perhaps the most useful aspects of this book are its quick overview of specific cancer types, including the most common metastatic sites, a staging system, and overall survival rates unique to each cancer. These data would be useful to consult before trying to counsel a patient with newly diagnosed cancer about the expected behavior of their cancer. The shortcomings of the book are its lack of depth in the discussions of treatments and treatment side-effects and its lack of illustrations. When compared with the American Cancer Society *Textbook of Oncology*, ed 2, published in 1995 and distributed to physicians without charge by the American Cancer Society, Markman's book is unable to compete in coverage of most areas reviewed. The different publication dates do not affect the relevance of the information presented. When choosing material for the physician's library, the small amount of additional information added by Markman's text is not sufficient to justify its added expense.

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**Current Diagnosis 9.** Edited by Rex B. Conn, William Z. Borer, and Jack W. Snyder. 1310 pp., illustrated. Philadelphia, WB Saunders, 1996. \$115. ISBN 0-7216-5843-1.

*Current Diagnosis 9* is the ninth edition of a text that has been around for the past 30 years. It is a substantive revision, in that most of the 463 contributors are new, and the number of editors has increased from one to three. There are a total of 203 chapters in 16 sections cover a wide variety of topics.

As stated by the editors in the preface, "*Current Diagnosis* was never intended to be a comprehensive textbook of medicine." Rather, its utility is in "bring[ing] together in concise definitive articles the best available current information on medical diagnosis to assist the physician in arriving at the correct diagnosis as efficiently as possible." Each chapter offers comprehensive information on diagnosis. It specifically does not deal with etiology, epidemiology, pathogenesis, or management. This text is to be used as an adjunct in the library rather than as a stand-alone medicine text.

Even so, *Current Diagnosis 9* is useful. Most chapters are well written and concise, with an emphasis on proper diagnosis. Various diagnostic tools are discussed in each chapter, and the authors give their recommendations as to which methods to use. If you have forgotten the exact timing of cardiac enzyme changes or want a refresher on the latest tests to diagnose systemic lupus erythematosus, this book will have you up to speed quickly and efficiently, even in the middle of a busy practice day. Several chapters offer such subheadings as "Pitfalls in Diagnosis," and "Diagnostic Procedures That Are Not Helpful." I found these discussions particularly useful.

I do have some significant complaints about the text. Of the 463 contributors, only a small handful are family physicians, and the unique perspective of family physicians is not well represented. Some of the authors make statements that suggest a lack of ambulatory care experience, such as when they recommend a Gram stain be done on all patients suspected of having group A  $\beta$ -hemolytic streptococcal pharyngitis or all of these patients should have acute and convalescent antistreptolysin O titers measured. Unfortunately the specialty orientation of the chapters makes many of the suggestions somewhat suspect. None of the chapters is referenced, so it is impossible to follow suggestions back to any sort of research to support them. It is never clear whether the statements are evidence based or simply the result of institutional dogma. Finally, the selection of topics is somewhat arbitrary and not necessarily related to clinical importance. For example, there is a chapter on mumps but not on measles, a chapter on sphingolipidosis but not on metabolic acidosis. I could find out about Marburg virus and Ebola virus but not respiratory syncytial virus.

I used this text for 4 months before writing this review. At times I found it quite helpful, at times it was less so, and sometimes it was not helpful at all, either because the topic I was looking for was not addressed or because the specialty orientation was not useful in my primary care practice (I treat a lot of streptococcal pharyngitis, but I do not measure many acute and convalescent antistreptolysin O titers). Also, the lack of references made me question somewhat many of the suggestions. Given that for \$115 *Current Diagnosis 9*