the office. Each page follows the same outline. Included under the basic information heading are sections providing a description of the disease or illness as well as signs, symptoms, causes, risks, outcome, complications, and prevention. Under the treatment headings are sections on general measures, medications, activity, and diet. Topics range from abruptio placentae to zinc deficiency with most every other common ailment accounted for in between.

After the individual topics is a section on various diets. Discussed are fiber-enhanced, calcium-enhanced, fatand cholesterol-restricted, sodium-restricted, and weight reduction diets, to name a few. There are also pages on infant, pediatric, and pregnancy diets.

Next in the book is an appendix of miscellaneous topics including skin, breast, and testicular self-examinations, as well as Kegel exercises, low-back care, immunizations, and others. Anatomical drawings are provided that can be used to illustrate to patients what is affected with their illness.. Lastly, there is an index.

One nice feature of this edition is that a CD-ROM is included with the book. Users can either photocopy the individual pages or print them off their computers.

Being able to offer a patient an easy-to-read general piece of reference material can make for better overall patient encounters and patient care. This book most assuredly provides that opportunity.

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Office Orthopedics for Primary Care: Diagnosis and Treatment. Second edition. By Bruce Carl Anderson. 326 pp. Philadelphia, W. B. Saunders, 1999. \$42 (paper). ISBN 0-7216-7089-X.

Office Orthopedics for Primary Care has become an increasingly relevant topic to family physicians. A great deal of emphasis on improving curricula of residencies and incorporating principles learned through the more scientific study of sports medicine have led to more conscientious application of treatment principles in musculoskeletal injuries. The author of this text brings 20 years of clinical experience to his care of musculoskeletal problems. He notes the limited experience that many residents receive in the care of musculoskeletal injuries. He intends his text to span his educational gap and provide useful clinical information to primary care physicians in a number of fields.

To facilitate this goal, the author organizes the text into four practical sections. The first is a review of 48 of the most common orthopedic conditions seen in primary care. A second section is devoted to common, manageable fractures and some general guidelines about referring more serious fractures. A third section offers physicians exercise instruction sheets that can be used for patient information. A final section reviews sports braces and casts used for the care of the more common orthopedic conditions. This text organization is a practical format for reviewing primary care orthopedics.

The author states in the preface that this book is intended to be comprehensive. He further states that the book is intended to be more than an injection manual. Unfortunately, on both of these counts the author fails to live up to expectations. Other than clinical experience there is limited substantiation of the author's opinions or treatment approaches. The discussion of common orthopedic problems leaves out much of the information that has been recently reported in similar texts, sports medicine studies, and journal articles. An objective analysis of the risk and benefit of various injections is not provided in the text. Clinical descriptions of how to perform various injections are brief and do not provide enough information to introduce safely an inexperienced clinician to these procedures.

In an era when the emphasis is to increase the evidence-based approach to care, primary care physicians would be poorly served to use as a primary reference a text that relies primarily on clinical experience. The objective evidence that injection, physical therapy, or other types of treatments work should be weighed against alternative forms of therapy before practitioners decide upon a treatment plan. In particular, while injection therapy obviously helps numerous musculoskeletal conditions, this text suggests that injection therapy can be used almost universally. The author fails to note that no studies point to a long-term benefit (greater than 12 weeks) of cortisone injections.

While the general theme of this book appeals to almost any busy primary care practitioner, the depth of discussion, superficial nature of diagrams, and limited description of examination does not create a text that fills a useful niche for any specific group of primary care practitioners. Numerous comparable texts give a more complete discussion of the various orthopedic conditions and provide readers with a more useful approach to the care of their patients with musculoskeletal injury.

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## Correction

In the July-August 1999 issue of the *JABFP* in the the Book Review section (Volume 12, Number 4, page 32) the name of the reviewer for *Psychiatric Dimensions* of *Medical Practice* was spelled incorrectly; it should be Ralph E. Berggren, MD. We regret the error.