

with many clinical case examples and liberal use of charts and tables. Not only do chapters have references for further reading, but some list books to recommend to parents and patients as well. One editor, Dr Levine, a recognized authority on learning disorders, has contributed three chapters on this subject in which he describes the many different entities lumped under this heading and provides detailed guides for helping students with the various conditions.

The editors state a dual mission of providing a definitive reference work for subspecialists in developmental-behavioral pediatrics and a guide to generalists who want to foster optimal behavioral adjustment and development in all children. They seem to have amply succeeded. The additions to this third edition include an update on pharmacology and new sections on emergencies, motor coordination weaknesses, and so-called "unpopular" children. For any clinician who deals with the developmental and behavioral problems of children, this reference is most helpful.

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**Conn's Current Therapy 1999: Latest Approved Methods of Treatment for the Practicing Physician.** Edited by Robert E. Rakel. 1340 pp, illustrated. Philadelphia, WB Saunders, 1999. \$59 (paper). ISBN 0-7216-7224-8.

This 51st edition, true to its predecessors, is an excellent resource for any provider. Eighty-five percent of the chapters in this edition are written by new authors, and 15% of the chapters have been updated from the last edition. New topics include cat-scratch disease, cystic fibrosis, trypanosomiasis, and inflammatory bowel disease. Once again, this text accomplishes its intent to "focus on problems frequently encountered in practice and those less common conditions that could have serious consequences. . ." and to provide "up-to-date information on recent advances in medicine in a concise. . . manner."

This edition maintains the successful format implemented in previous editions. The book is divided into 18 sections: 10 on organ systems, 1 on a symptom-oriented approach, 2 on infectious diseases, and 1 each devoted to obstetrics and gynecology (including neonatal resuscitation and care of the high-risk neonate), allergy, psychiatric disorders, and physical and chemical injuries. There are 295 chapters, and the reader can still depend on thorough yet concise coverage of all the topics. Each chapter contains readily accessible and easy-to-use quick-reference tables or algorithms that contain valuable information the busy practitioner can use without wasting valuable time reading through the extraneous content common in other textbooks. The layout of the index is well thought out and user friendly. In addition, the appendix has an exhaustive yet helpful section on normal laboratory values.

I have a few criticisms with this edition. Every chapter lacks references for the evidence-based data the authors use to validate their approach. The editor encourages the

reader "to compare the treatments presented in previous editions. . ." with the treatment approaches presented in the present edition "to see how different experts manage the same problem." Unfortunately, this pursuit can lead to treatment strategy bias. The editor has included "full institutional affiliation of each contributor. . . if additional information or follow-up is needed" by the reader. Such an approach could dishearten those readers who are looking for a more evidence-based approach to evaluation and treatment.

Second, the section on skin and nail disorders is still lacking graphics. This section could be strengthened by the addition of photographs (black and white, or color plates) to enhance the readers' recognition of these conditions.

Lastly, I wonder whether it is possible for one text to "be all" for every discipline in medicine. I believe that most of the chapters on medicine do meet this expectation, but some fall short and are weak. This failing is most evident with the obstetrics section.

Despite these shortcomings, I must admit that I continue to love this reference text and would recommend it to busy practitioners who want the answers to their questions at their fingertips. This is the book I would want if I were stranded on a deserted island (and still had to practice medicine!). No medical library should be without it.

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**AIDS Therapy.** By Raphael Dolin, Henry Masur, and Michael Saag. 884 pp. Philadelphia, Churchill Livingstone, 1999. \$150. ISBN 0-443-07592-1.

The rapid evolution of therapies for human immunodeficiency virus (HIV) infection and acquired immunodeficiency syndrome (AIDS) make the writing of a textbook on these topics a formidable task. It is a certainty that any book will be out of date before it can be published simply because the publishing process takes a long time. *AIDS Therapy*, succeeds, however, because of its format and the quality of its contributors. The contributors are clearly expert and primary investigators in the areas about which they are writing.

Antiretroviral therapy is well covered by an authoritative chapter on each currently approved antiretroviral medication. The section on antiretroviral treatment strategy suffers somewhat from the rapid evolution of practice, lacking for instance the latest data on the value of resistance testing, but it remains an excellent review of the fundamental theories driving current approaches. The sections on specific opportunistic processes and approaches to clinical syndromes are of high quality and include well-designed and useful algorithms. The editors have paid special attention to the pharmacologic aspects of the treatment of HIV infection, including strong sections on drug administration and serious interactions of both antiretroviral drugs and other AIDS-related medications.

The most conspicuous shortcomings result from new information. Studies regarding the usefulness of resis-

tance testing, the use of nevirapine in pregnancy, the lipodystrophy syndrome, and issues concerning coinfection of hepatitis C and HIV surely would have been included had they been available. The editors have anticipated the discovery of new information and have included a chapter on HIV-related Internet resources that will allow the rapid reference to the latest information for both physicians and persons living with HIV infection and AIDS.

This text would be a useful reference for family physicians caring for HIV-infected patients, particularly in residency programs and other teaching environments. Its comprehensive nature and high quality overcome the inherent limitations in writing about such a rapidly changing topic. The addition of the most current guidelines about antiretroviral therapy from the IAS-USA or the Department of Health and Human Services to *AIDS Therapy* would constitute a concise but complete reference source for care of HIV-infected patients.

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**Primary Care: 20 Common Problems.** Edited by Barry D. Weiss. 592 pp., illustrated. New York, McGraw-Hill, 1999. \$45 (paper). ISBN 0-07-069609-8.

Patients with undifferentiated complaints are among the most challenging problems faced by primary care physicians. The editor has attempted to address this area through the five most common reasons for visits to primary care clinicians in four different settings. The authors include distinguished family physicians and family medicine educators who offer succinct insight into 20 common problems.

This book is divided into six parts: major killers, respiratory problems, behavioral problems, aches and pains, other common problems, and prevention. An intriguing first chapter provides a review of cigarette smoking and its effects on patients' health. Other common problems include a review of hidden problems, including domestic violence, alcoholism, and literacy.

Regardless of the number of authors, the format for each chapter remains constant. Each chapter begins with an outline of several key components: the cause of the complaint, why the complaint is important, principal diagnoses and differential diagnosis, the typical symptoms and signs, history, physical examination, and ancillary tests. An algorithm directs the evaluation and treatment of the complaint, and a description of treatment strategies follows. An innovative component of each chapter includes education and family approach, common errors made by physicians when diagnosing the cause of these complaints, controversies associated with the topic, and emerging concepts. In addition to the algorithm, many of the chapters include figures and tables that consolidate material in an easily digested way.

Choosing effective strategies to approach an undifferentiated complaint is an ongoing challenge for providers at all levels of training. For that reason, students, resi-

dents, and practicing physicians would benefit from this book. Students involved in ambulatory family medicine clerkships, where these problems will certainly be encountered, would find this book especially useful. The consistent content, supplemented by the illustrations and tables, makes this book easy to review. Overall, this reference is a solid addition to the thoughtful physician's library.

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**Anxiety and Depression: Your Questions Answered.** By Cosmo Hallstrom and Nicola McClue. 214 pp. Edinburgh, Churchill Livingstone, 1998. \$19.95 (paper). ISBN 0-443-04939-4.

Anxiety and mood disorders rank as the most common psychiatric disorders. The incidence of major depression in primary care patients approaches 10%, with up to 30% of primary care patients having depressive symptoms. Approximately 16% of the general population has had an anxiety disorder, although the average patient might see up to 10 physicians, for example, before the symptoms of a panic disorder are correctly distinguished. The authors have recognized the degree to which these disease states are being managed at the primary care level and the need to create a dialogue between the psychiatrist and the primary care physician regarding the practical realities of diagnostic and therapeutic focus. They have designed the work to supplement the basic clinical knowledge of the general practitioner or family physician, trainee psychiatrist, psychologist, and other allied health professionals.

The text, designed in a simple question-and-answer format, is admittedly not a standard textbook on the subject. There are 11 discussion sections highlighting diagnosis, manifestations, and contributing factors; information as it applies to special population groups; pharmacotherapy, psychotherapy, complementary medicine treatment regimens; and issues related to suicide and general management. Typical questions include, What are the core symptoms of depression, and how are the physical symptoms of anxiety best treated? The chapters also feature several clinically useful anxiety and depression assessment scales (the Hospital Anxiety and Depression Scale, the Hamilton Depression Scale, and the Postnatal Depression Scale), a Mini-Mental Status examination, a sleep questionnaire, and charts of therapeutic profiles of common antidepressants.

Generally, the text is readable, although at times the discussions are somewhat basic; there are no specific reference citations to journals or other academic works, and only limited references to the *Diagnostic Manual of Mental Disorders-IV* classifications. The American reader might be frustrated by the natural inclination of the British authors to include locally available resources. For example, all future reading references (except one) are British publications; and useful addresses and telephone numbers for agencies or organizations dealing with the care of the depressed and the anxious are solely located in the United Kingdom. Additionally, several medications discussed are not available in the United States.