Book Reviews

Practical Strategies in Outpatient Medicine. Second edition. *By Brendon M. Reilly. 1320 pp., illustrated. Philadelphia, W.B. Saunders, 1991. $115. ISBN 0-7216-2821-4.*

Twenty-two of the most frequently encountered symptom areas in primary care medicine are addressed in this excellent hard-covered textbook. Reilly approaches each broad area by first introducing it with a detailed overview and summary, which provide a thorough subject review. A clinical case is then presented around which is constructed a well-devised strategy to develop an appropriate differential diagnosis. The case is further enhanced with complications and variations, which take the discussion into a comprehensive mode—a real power of the text.

Familiar clinical problems presented include the sore throat, common eye complaints, headache, respiratory tract infections, shoulder pain, hypertension, low-back pain, diarrhea, and genitourinary infections. Each area contains 30 to 100 pages of extensive text boasting numerous practical "pointers" for clinicians; recent, annotated references; and superb illustrations, charts, algorithms, graphs, and tables.

The strength of this work lies in the author's thoughtful clinical approach to the analysis of each problem, which is additionally supported by pertinent academic references. His use of clinical cases concentrates each chapter into a tight unit. Recent areas of medical interest, including acquired immune deficiency syndrome, are covered in generous detail.

The reader will realize quickly that certain areas in primary care, such as dermatology, obstetrics, fracture care, and pediatrics, are not emphasized.

In all, this text is extremely useful in office practice because of its focus on common medical problems. The clinician can review a particular diagnostic and treatment area quickly and, if desired, can later return to the chapter to explore the topic comprehensively. The book belongs in the primary care office.

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Guide to Clinical Preventive Services: An Assessment of the Effectiveness of 169 Interventions. Report of the U.S. Preventive Services Task Force. *Edited by Michael Fisher. 419 pp. Baltimore, Williams & Wilkins, 1989. $25 (paper). ISBN 0-683-08507-7.*

Every once in a while a truly "must have" book is published, and it has such relevance and comprehensiveness that it becomes an indispensable reference. The U.S. Preventive Services Task Force's *Guide to Clinical Preventive Services* is such a book. Sixty topics are reviewed, ranging from coronary artery disease to abnormal bereavement, from fetal distress to unintended pregnancy. One hundred sixty-nine potential interventions for these conditions are considered, and they follow a uniform analysis that includes the impact of the condition on the individual and society, the efficacy of the proposed intervention (screening, counseling, immunization, prescription), and the efficacy of early intervention in cases of positive screening results. Recommendations of other authoritative bodies are also noted.

The *Guide* is a succinct and clearly written summary of a massive effort headed by 20 nationally recognized scholars of preventive care and primary care, assisted by 16 senior advisers and more than 300 expert reviewers. The analytic structure established in the 1970s by the Canadian Task Force on the Periodic Health Examination is followed. It considers the quality of available studies, as well as the conclusions, and most recommendations are classified on a 5-point scale ranging from good evidence supporting the maneuver to good evidence refuting the maneuver. The conclusions, written in a manner similar to the Canadian Task Force, are conservative. Many common interventions—including the teaching of breast self-examination and screening of stool for occult blood—fall into the middle category in which poor supportive evidence is noted and the decision to intervene is left to clinical judgment. The result, rather than a rigid checklist of what to do at each year of a patient's life, is a discussion of the merits and limitations of each intervention and specific risk categories in which the intervention is relatively more supportable. Primary prevention through counseling about risk reduction and through immunization is encouraged, whereas many aspects of periodic examination and screening are not recommended.

Age-specific tables summarizing the recommendations are provided, with liberal use of footnotes to emphasize high-risk groups. A concise evaluation of published studies and of patient education and counseling techniques is also included. References are copious and pertinent, and cross-references to related discussions within the *Guide* are helpful.

This text can be of great value to any practitioner involved with preventive health care. I find it is among the books I turn to most frequently when I need a quick answer while the patient is in the office. It has also proved valuable for more leisurely reading to plan preventive care strategies. I believe every family physician should have ready access to this book.

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