Cardiac Emergency Care. Fourth edition. By Edward K. Chung. 428 pp., illustrated. Philadelphia, Lea & Febiger, 1991. \$29.95 (paper). ISBN 0-8121-1421-3.

This book is written by a well-known cardiologist with an established reputation for effective and articulate bedside teaching. The book is relevant to the family physician both in the office and the emergency department. It covers issues ranging widely from the basic understanding and treatment of common conditions, such as heart failure and digitalis intoxication, to less common but such clinically important states as Wolff-Parkinson-White syndrome and the sick sinus syndrome. All subjects in the 22 chapters are dealt with logically and in a clear language, making for easy readability. The text is complemented by the liberal display of user-friendly tables, electrocardiograms, and illustrations that provide pertinent ready-to-implement information.

This book should find a place in the library of the busy practitioner. I also recommend that it be placed in family medicine residency program libraries, not only for quick reference in clinical practice but also as a source of solid theoretical principles to use when managing cardiac emergencies.

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Cecil Textbook of Medicine. 19th edition. Edited by James B. Wyngaarden, Lloyd H. Smith, Jr., and J. Claude Bennett. 2544 pp., illustrated. Philadelphia, W.B. Saunders, 1992. \$99. ISBN 0-7216-2928-8.

This 19th version of Cecil's textbook, a perennially popular "jumbo" internal medicine volume, announces a major revision. One-third of the book reflects changes in authors, and added now are many discussions centered about medical issues of contemporary interest.

More than 500 internal medicine topics are presented in this textbook, each in comprehensive depth and detail. The editors have divided the book into 27 traditional sections, including cardiovascular diseases, respiratory diseases, renal diseases, and so forth. To these sections they add other subjects of current interest, such as human growth and aging, personal health care, nutrition, immune system disease, zoonoses, human immunodeficiency virus (HIV) infection and associated diseases, and occupational medicine. Each section is presented as a unit that incorporates a host of relevant topics. A meticulous index consisting of about 100 pages coordinates the use of this text. Every imaginable disease, symptom, syndrome, medication, and laboratory test is considered.

The text itself follows a traditional format. Etiology is discussed first, followed by epidemiology, pathogenesis, clinical manifestations, diagnosis, differential diagnosis, treatment, and prevention, as applicable. Most of the text is easy to understand and is enhanced by clear tables, graphs, and plates. The basic sciences are smoothly integrated into the discussions, especially in the case of biochemistry. Because it is extremely well organized, *Cecil* benefits greatly those who want a detailed analysis of most internal medicine subjects. To take advantage of this type of depth, the reader will need to allocate time and concentration — this manual is not designed to assist the clinician at a busy office practice.

The refreshing new areas are represented by a major effort in HIV-associated illness (70 pages) and transplant medicine, as well as excellent sections on aging, dying, and physicians' health.

It is difficult to imagine a single volume that could offer additional concentrated internal medicine interwoven with a strong basic science foundation and complemented by such innovative chapters as, Medicine as an Art, Clinical Ethics, and Internal Medicine and Today's Internist.

Cecil continues to develop in a manner highly responsive to the needs and goals of today's students and clinicians.

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Cholesterol Treatment: User Guide to Lipid Disorder Management. Second edition. By David A. Leaf. 181 pp. Durant, Oklaboma, Essential Medical Information Systems, 1992. \$12.95 (paper). ISBN 0-929240-44-8.

This is the second edition of this convenient little handbook on cholesterol and its clinical relevance in medical practice. Only $4^{1}/_{4} \times 7^{1}/_{2}$ inches and containing 181 pages, it provides much practical information about cholesterol and its importance to coronary artery disease.

In this concisely written compendium are 28 readable chapters that include a working definition of hypercholesterolemia based on the most recent and popularly quoted prospective trials, a description of the metabolism and a determination of the various lipoprotein classes and the various dyslipidemias, and guidelines for drug therapy and the application of the commonly used lipid-lowering medications and other second-line therapeutic drug interventions, as well as commonly acknowledged dietary and nondietary measures. Special attention is also given to the clinical issues affecting children, the elderly, and women.

This handbook was not intended to provide an exhaustive review; yet, I would have appreciated a bit more discussion on the pathogenesis of cholesterol and coronary artery disease, as well as on epidemiology. A major frustration is the lack of an index. Admittedly the Table of Contents and its twopage center index identifying each chapter do point the reader to the subtopics in general, but they do not make up for the lack of an index. A very attractive feature of the center index is its black imprinted tabs at the edge of each page. This directs the reader quickly to the concomitant black-tabbed page highlighting the chapter.

This book does not add or even replace the discussion of this subject in most standard internal medicine texts, but it might prove useful in the libraries of family practice and internal medicine residency programs and the offices of family and other primary care physicians who would wish a quicker way to find information on the diagnosis and management of the common dyslipidemias. It is not intended for those who need an in-depth understanding of these disorders or their management.

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Clinical Epidemiology: A Basic Science for Clinical Medicine. Second edition. By David L. Sachett, R. Brian Haynes, Gordon H. Guyatt, and Peter Tugwell. 441 pp., illustrated. Boston, Little, Brown, 1991. \$32.50 (paper). ISBN 0-316-76599-6.

Clinical epidemiology is a growing and evolving discipline of great interest to family physicians both in academia and in clinical practice. In the Preface to this edition, the authors state that each had learned there was in fact a "science to the art of medicine" and that "their common conviction is that the important acts we carry out as clinicians require the particularization to the individual patient, of our prior experiences (both as individual clinicians and collectively) with groups of similar patients." Clinical epidemiology, as discussed by the authors, is therefore the study of clinical medicine using quantitative methods derived from epidemiology, although the authors' own definition, "what clinical epidemiologists do," is a bit more prosaic.

The book is organized around three vital functions of the practicing clinician: diagnosis, management, and keeping up to date. The diagnosis section, which is well written, includes a chapter on how clinical decisions are made, as well as a particularly well-written chapter on the clinical examination, which has many unique insights into why this important component of data gathering often produces conflicting or inaccurate information. A chapter on interpretation of diagnostic data, including clinical decision analysis, is covered in considerable depth and with increasing levels of sophistication. A final chapter on screening discusses this important topic admirably.

The section on management addresses prognosis, deciding on the best therapy, helping patients follow the treatments prescribed, and deciding whether treatment has done harm. This section is also well written and includes many relevant examples.

The last section is in some ways the best because it includes valuable insights into how to keep up to date, a substantial challenge for all physicians after they complete their training. It includes chapters on how to review one's own performance, to track down evidence to solve clinical problems, to survey the medical literature to keep up to date, to read reviews and economic analyses, and to get and give the most from continuing medical education.

Perhaps the greatest strength of this volume is the writing style, which is practical, interesting, and conversational (as opposed to pedantic). Few other texts are as easy to read or as much fun. It is directed to the clinician in a straightforward style. The illustrations and photographs also contribute to the clarity of the text.

I would recommend this text for all practicing family physicians. The approach described on to how to provide up-to-date care is excellent and of considerable value. Occasional digressions into areas that might be overlooked by the busy practitioner, such as N-of-1 studies or doing one's own decision analyses, are of considerable interest to those in academia.

This book would be especially useful for secondor third-year residents who can incorporate this information while they are developing and expanding their body of medical knowledge. Faculty members should be aware of these topics, which could considerably enhance discussions on teaching rounds. Medical students are still probably best served by the text *Clinical Epidemiology* — *The Essentials* by Fletcher, Fletcher, and Wagner. Those who are eager for a more comprehensive discussion of issues raised in this book should also consult *Clinical Epidemiology: The Architecture of Clinical Research* by Alvin Feinberg, which covers the first two sections of this book in a more comprehensive fashion.

Many of us with an interest in clinical epidemiology look forward to the day when these topics are taught to all medical students as "a basic science for clinical medicine" and the concepts are routinely discussed in practice. Unfortunately, few of us were exposed in depth to this important aspect of medicine during our medical training. This text is an excellent starting point to gaining knowledge in this area.

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