

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 two-page 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. Sackett, 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 second- or 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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