Allergy: Theory and Practice. Second edition. Edited by Phillip E. Korenblat and H. James Wedner. 608 pp., illustrated. Philadelphia, W.B. Saunders, 1992. \$95. ISBN 0-7216-7244-2.

The fields of allergy and immunology have experienced a tremendous explosion of information during the last 10 years, and keeping up with the new information can be quite difficult. *Allergy: Theory and Practice* is being marketed as a clinically relevant book to update the nonallergist physician on the latest in allergy and immunology. Such a book should be quite useful given the frequency with which primary care physicians see allergy-related problems. According to the publisher, this second edition (printed 8 years after the first) contains 75 percent new information. For reasons that will be discussed, however, I do not believe this book is adequate for primary care physicians.

The book consists of 35 chapters divided into the following categories: Basic Allergic Mechanisms, Evaluation of the Allergic Patient, Manifestations of the Allergic State, Treatment of Allergic Diseases, Allergic Lung Disease, and Allergies to Specific Agents. The chapters, written by different authors, are of varying quality. The first quarter of the book consists of an extensive review of basic allergic mechanisms and includes a chapter on molecular immunology. The rest of the book is more clinical, emphasizing management of specific allergy-related diseases using pharmacologic, immunologic, and environmental interventions. Included is a good discussion of the various tests used to diagnose allergies, although there is some conflicting opinion among authors as to the value of each test. An extensive section on pharmacotherapeutics contains detailed and generally excellent chapters on each of the classes of medication used to treat allergic disease. Unfortunately, some information in the pharmacology chapters is already out of date, such as the availability of ophthalmic cromolyn and the use of theophylline as a firstline prophylaxis for asthma.

The major fault of the book as a primary care text is its specialist orientation. With the exception of a single family physician who helped with the chapter on indoor allergens, the authors are all universitybased academic specialists and subspecialists. The resulting text has a high-technology bias that will likely frustrate most family physicians. For example, the book suggests that chronic sinusitis should not be treated until a computed tomographic scan of the sinuses has been done and that acute sinusitis should not be treated until cultures are obtained by means of an antral sinus puncture. (It does say that broadspectrum antibiotics have been used empirically in cases where sinus puncture was not performed.) The diagrams showing surgical approaches to the sinuses are not useful and simply add to the cost of the book while detracting from its credibility as a primary care text. Many controversial areas, such as proper management of otitis media or when to refer for polyethylene tube placement, are treated quite dogmatically with few references given to support conclusions. Because most patients with allergy-related disease never see university-based specialists, one could argue that these specialists are not the best ones to be writing a text for primary care physicians.

Perhaps the underlying problem with this book is that no specific audience is targeted. There is no Foreword or Introduction explaining for whom the text is written or even the purpose of the book. The chapters on allergic mechanisms and immunology are detailed enough for an allergy fellow, whereas the chapters on specific diseases are not. Some of the chapters are heavily referenced literature reviews, whereas the chapter on cutaneous allergy ends with a single reference from 1923. The promotional brochure suggests that the book is meant for primary care physicians, yet the text has a strong antiprimary care slant. My guess is that the target audience is the medical student taking an allergy course, which would explain the subspecialist orientation and the mix of the overly detailed with the overly simplified.

This book is expensive at \$95, just \$4 less than *Cecil's Textbook of Medicine*. Although parts are readable, informative, and useful, they are not enough to justify the expense, given the major flaws discussed above. I would recommend that primary care physicians or students thinking of primary care spend their \$95 elsewhere.

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Cardiology. Sixth edition. By Desmond G. Julian and J. Campbell Cowan. 416 pp., illustrated. Philadelphia, W.B. Saunders, 1992. \$32.50 (paper). ISBN 0-7020-1644-6.

This easily understood review of basic cardiology serves best the medical student embarking on a career in any area of medicine. It not only emphasizes the central principles in basic cardiology, but it also highlights the recent technological advances in the field — an essential update for most practitioners. As noted in the Preface, this edition has been thoroughly revised to document the progress in cardiovascular science accomplished during the past several years.

The book reads quickly, and for this reason should be considered an exceptional review instrument for the generalist. Accentuating the text are 147 key illustrations of pertinent rhythm strips, angiograms, radiographs, and diagrams. The Appendix summarizes frequently utilized medications and includes their indications, contraindications, and dosages, as well as side effects. Even though the index is brief, it is clearly effective.

Although the full range of cardiac physiology, anatomy, and pathophysiology is addressed early in the text, the primary emphasis of the book is on clinical cardiology. The sections reviewing cardiac emergencies, dysrhythmias, and hypertension proved exceptionally helpful with their concise and factual presentations. An outstanding example is the discussion on the identification and treatment of tachyarrhythmias, which have always been somewhat perplexing in the acute clinical situation. Other topics covered that are worthy of praise include radiologic investigations, coronary artery disease, congestive heart failure, and systemic diseases and the heart.

Lipids and the dyslipidemia syndromes are discussed briefly and are accompanied by a succinct summary table. It is refreshing to find a presentation of cholesterol screening that uses logic rather than emotion in the selection of candidates for screening and treatment. The section describing emergencies is quickly navigated and presents pointed information rapidly. Angioplasty, radionuclide studies, and acute thrombolytic therapy have updated presentations, and by the end of this book I felt I had assimilated a sweeping picture of contemporary cardiology.

The risk of such a concise and well-organized brief review is, of course, oversimplification. This is not a problem for the audience interested in the basics of clinical cardiology or in a quick reference for emergency cardiac care.

The student of medicine and the generalist interested in a rapid review of the fundamentals of cardiology (the book can be read in its entirety in several hours) make up the ideal audience for *Cardiology*. Others, including nurses and physicians' assistants involved in the care of patients with cardiovascular diseases, will also find this text to be an excellent overview.

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Conn's Current Therapy 1993. Edited by Robert E. Rakel. 1312 pp., illustrated. Philadelphia, W.B. Saunders, 1993. \$55. ISBN 0-7216-6745-7.

I like a reference text to be accurate, accessible, and reasonably priced. Conn's Current Therapy 1993 fulfills all those criteria. Although it is hard to imagine any textbook being the perfect reference for the busy practicing family physician, this one certainly covers much of what is encountered in everyday practice.

Rakel's text is relatively comprehensive without being overwhelming. There are 18 major sections, each of which has between 2 and 28 chapters. Although I expected the sections presenting infectious disease, cardiovascular system, and metabolic disorders, for example, I was pleased to find sections on obstetrics and gynecology, psychiatric disorders, and physical and chemical injuries. These additions broaden the content well beyond the standard medical reference text. Nevertheless, the text maintains its roots in medicine. Leprosy is covered in 5 pages, whereas dysfunctional uterine bleeding is covered in 2 pages. There is no section on pediatrics or orthopedics.

Individual chapters are well organized, timely, and, in general, concise. A brief review of pertinent pathophysiology accompanies each chapter, and the tables scattered throughout each chapter are superb. A convenient table of reference values, in both conventional and SI units, for commonly used laboratory tests is provided inside the front cover. The chapter that addresses management of the patient with HIV and the 4 pages on premenstrual syndrome are outstanding.

While preparing this review, I left my copy with an explanatory note in our precepting room. The book was used by both supervising faculty and residents, and the universal opinion was that we should purchase a copy. Several outside preceptors mentioned that they were going to order a copy for their offices. Every practicing family physician would find this text useful.

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Dermatology, Volumes 1 and 2. Third edition. Edited by Samuel L. Moschella and Harry J. Hurley. 2784 pp., illustrated. Philadelphia, W.B. Saunders, 1992. \$295. ISBN 0-7216-3263-7.

Moschella and Hurley have recently edited the third edition of *Dermatology*, a two-volume set of almost 3000 pages. The scope of the book is such that every common and most uncommon conditions are addressed. In addition, there is a nice section on dermatologic surgery.

As with any text prepared for the practicing subspecialist, several sections of the book are less relevant to generalist practice. The detail on some of the rarer diseases and more specialized procedures is less helpful for day-to-day care. Other chapters, however, such as those on mucocutaneous manifestations of HIV disease and atopic dermatitis and other eczemas, are well written with helpful material on the differential diagnosis and treatment.

The chapter on dermatologic surgery is well organized and well written and teaches much about the range of dermatologic procedures. Sections on wound healing and dressings, surgery of the nail, and cosmetic surgery are all helpful. Even though many of the procedures, such as liposuction, hair transplants, and collagen injection would not be performed by most family physicians, the information provides a good reference for advising and assisting patients considering such a procedure who come to their family physician and ask for advice.

These volumes do have one major drawback for practicing physicians. Although the organization and readability are excellent, dermatology is primarily a