

and nutrition-associated diseases. There are practical guides to identifying parasites, insects, mosquitoes, nematodes, and arachnids; tables describing vaccines for travelers and the expected duration of protection; and a variety of helpful hematologic values such as the prevalence of anemia by geographic region and age-sex category. The 204-page appendix includes a section on radiology and imaging services in the tropics as well as basic laboratory diagnostic procedures for the clinician working in remote areas.

Although this book is also intended for the primary care worker, much of the material might be too detailed. It would be preferable to have a text specifically oriented to those providers who are the backbone of health care in many developing countries. In view of the global increase of the aging population, a section on geriatrics would strengthen the text. The chapter on surgery and obstetrics could be improved by providing more information on dealing with emergencies, and a quick reference of country-specific disease prevalence would be useful to the busy physician.

Manson's textbook is especially suited to physicians who provide health care to recent immigrant populations or travelers and to physicians or medical students planning to practice or train in tropical countries. Its price is relatively modest considering its voluminous coverage and superb handling of the subject matter of tropical medicine. Although this book is not likely to find its way to the bookshelf of every family physician, it is an invaluable resource and should be available in an easily accessed reference library.

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Cardiac Drug Therapy. Fourth Edition. By M. Gabriel Khan. 426 pp., illustrated. Philadelphia, WB Saunders, 1995. \$39 (paper). ISBN 0-7020-1996-8.

The title is straightforward, and the text delivers what it promises. Printed in a compact and economical handbook form, this useful reference serves as a single source for a variety of types of information related to medical management of a variety of adult cardiac diseases. It would not only prove useful to the practicing internist or family physician but would also be a welcome resource on the telemetry and cardiac care areas of the hospital.

The 15 chapters take on two major and two minor themes. Chapters 1 through 4 and chapter 13 review specific classes of cardiac drugs. Mechanisms of action, dosage, indications and contraindications, and precautions are discussed. Where the book contributes to an understanding of specific pharmacology, pathophysiology is also reviewed. Chapters 5 through 12 deal with the management of specific disease entities in cardiology—from hypertension and hyperlipidemia, to ischemia and infection, to disorders of rhythm and func-

tion. Whereas drug therapy is the emphasis of the text, decision points and indicators for diagnostic evaluations and other therapeutic modalities are appropriately included. The final two chapters review cardiac drugs in pregnancy and lactation and the effects of drug interactions.

This book is written to be used by most of the English-speaking world. This lofty objective certainly intersects some interesting perspectives; it also creates some potential problems. As we are all aware, considerable regional differences in practice are not uncommon. When spanning oceans and borders, practice differences are also encountered. Specific examples of variance include recommendations for management of unstable angina. The author discusses studies of the use of heparin in this condition, but no recommendation is made. Throughout most of the United States, such treatment with heparin is considered dogma. In general terms the Canadian and British experience with nationalized health systems is evident: costs are not directly discussed, but the recommendations reflect their consideration, and invasive diagnostic tests and therapies are recommended mostly as a final resort. The use of international trade names and inclusion of medications not available in the United States might confuse the American user.

The text is clear, readable, well organized, and supported by charts, algorithms, and tables that contribute to our understanding. It will be valuable in assisting in day-to-day patient management decisions.

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Health Promotion and Disease Prevention in Clinical Practice. Edited by Steven H. Woolf, Steven Jonas, and Robert S. Lawrence. 618 pp., illustrated. Baltimore, Williams & Wilkins, 1996. \$35 (paper). ISBN 0-683-09270-7.

Health promotion and disease prevention are logical public health strategies but have not been a part of the national health policy until recent years. Certainly it is more effective, from both societal and personal perspectives, to prevent diseases or detect them early in their natural history than to bear the tremendous costs for treatment of chronic disease and for intensive care for late-stage conditions. The paradigm shift precipitated by managed care also calls for the physician to embrace and provide health promotion procedures and counseling within his or her practice. *Health Promotion and Disease Prevention in Clinical Practice* offers a timely and critical reference for the clinician. It reminds us of the need to provide health promotion amidst practices of medicine that often seem episodic and discontinuous.

This extremely well-written text is divided into three major sections. The first section discusses gathering information about risk factors during the history and physical and laboratory examinations. Included are particularly practical offerings such as how to ask

screening questions, specific explanations of screening examination techniques, and descriptions of common laboratory screening tests, with comparisons of guidelines from such organizations as the American Cancer Society, American College of Obstetrics and Gynecology, the American Academy of Family Physicians, the American College of Physicians, the United States Preventive Services Task Force, and the Canadian Task Force. The second section focuses on what to do with the information that is gathered, providing specifics of office organization for targeting specific risk factors, such as tobacco abuse, immunizations, and self-examinations. The last several chapters address the development of health maintenance schedules and organization of a practice for the delivery of preventive services. Key discussions include reimbursement strategies and the ethics of health promotion and disease prevention.

Nearly all of the many chapters offer resource lists with mailing addresses, telephone numbers, and current literature references. The tables, graphs, and photographs are complementary to the text material, with examples ranging from samples of personal preventive records to CPT codes for preventive medical services to an abridged version of the recommendations of the United States Preventive Services Task Force.

This work is critical reading for any physician, physician-in-training, or allied health professional. By acknowledging the importance of lists of health promotion and disease prevention topics but disregarding their implementation, the medical profession will miss the opportunity to make its greatest contribution. Both primary care and specialist physicians will be vital to this transition in health care philosophy.

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Cutaneous Medicine and Surgery—An Integrated Program in Dermatology, Volumes 1 and 2. Edited by Kenneth A. Arndt, Philip E. Leboit, June K. Robinson, and Bruce U. Wintroub. 916 pp. (vol 1) and 1899 pp. (vol 2), illustrated. Philadelphia, WB Saunders, 1996. \$250. ISBN 0-7216-4853-3 (vol 1), 0-7216-4854-1 (vol 2).

Family physicians treat patients on a daily basis for various dermatologic problems. It is important to be able to diagnose and treat primary skin disorders, as well as to recognize the cutaneous manifestations of systemic

diseases. Family physicians are more apt to be the first physician a patient consults about a dermatologic problem, especially in the advent of managed care. In these lengthy, hardcover, glossy-paged, easy-to-read, detailed references on dermatology, the family physician will be most able to find answers to dermatologic questions.

This two-volume set, divided into 13 sections for a total of 184 chapters, is written by numerous contributors. The sections include, but are not limited to, such topics as fundamental knowledge of the skin; disorders of inflamed skin; blistering diseases; infections and infestations; alteration in skin color; environmental and physical trauma to the skin; benign and malignant diseases; disorders of hair, nails, and sweat glands; and a section on cutaneous manifestations of internal disease including a short section on pediatric dermatology. Chapters are generally divided into well-demarcated (by red print) sections on the definition, clinical description, pathology, diagnosis and differential diagnosis, pathogenesis and etiology, treatment (both medical and surgical when appropriate), and prognosis of various skin disorders.

Numerous tables and illustrations are found throughout the two texts. There are two short sections of color photographs at the beginning of each volume. Although most of the skin disorders discussed have at least one illustrative photograph in its chapter, the pictures are in black and white (which the editors state was done to keep the price down, and they suggest obtaining a color dermatology atlas if so desired).

The editors note that this publication is one component of an educational program they have devised that includes three additional books: *Atlas of Cutaneous Surgery*, *Cutaneous Medicine and Surgery: Self-Assessment and Review*, and *Cutaneous Medicine and Surgery: Pocket Guide*.

In summary, these exhaustive dermatology references have much to offer physicians, although the depth of detail might be more than a family physician would need. Probably the biggest drawback is the limited use of color illustrations. Dermatology is a visual subject, and more color photographs would be a very valuable asset to the written text.

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