

included in this section is a chapter about the special problems of nursing homes, which is perhaps the best written chapter in the entire text. The last section reviews general infectious-disease topics, such as fever and neonatal infections. This is an effort to provide readers with a fairly scientific overview of clinical problems, but little is included about strategies for prevention or control of the various nosocomial infections discussed in this section. Perhaps cases illustrating various clinical infectious-disease problems could have served as well to emphasize that problems might have been prevented if infection-control practices had been followed.

The cover, binding, and printing of the book are not particularly attractive, nor is the content sufficiently appealing to a general audience. For beginning infection-control practitioners, the text is too cumbersome to allow for extraction of salient points. For advanced infection-control practitioners, there are a number of other published texts that deal more effectively with the organization and implementation of infection-control programs. For interested clinicians, at least several currently available texts about the principles and practice of the specialty of infectious diseases are superior to *The Theory and Practice of Infection Control*. Perhaps hospital administrators might find this a useful text for reference; however, specific answers to their individual questions may not be found.

THOMAS F. KEYS, M.D.

Department of Infectious Disease
The Cleveland Clinic Foundation

Polycystic Ovarian Disease, vol 3 of the Clinical Perspectives in Obstetrics and Gynecology series, by Walter Futterweit, New York, Springer-Verlag, 1984, 155 pp, \$49.00.

In his preface, Dr. Futterweit quotes Francis Bacon: "If a man will begin with certainties, he shall end in doubts, but if he is content to begin with doubts, he shall end in certainties." Unfortunately, the author fell into the trap he warned his readers to avoid.

Polycystic Ovarian Disease begins with review chapters dealing with the neuroendocrine control of gonadal function, ovarian folliculogenesis, and androgen physiology. Not until chapters four and five is the reader introduced to the main topic of the book and then only in a minor way. Chapter six is a thorough treatment of the pathophysiology of polycystic ovarian disease (PCOD), and chapter seven contains the first clinical discussion. Differential diagnosis is covered in chapter nine, while the various treatments available are discussed in chapter 10. The volume is exhaustively referenced (1,041 entries) and contains a suitable index. Although adequately illustrated, most fig-

ures have been published previously and should be familiar to many readers.

The main shortcomings of this work include the fact that, in an effort to provide a comprehensive literature review, the author tends to submerge the reader in an overwhelming mass of facts, thus it is often difficult to grasp the key points of each topic. Furthermore, as the clinical aspects of PCOD are not discussed until the last half of the book, it is hard to integrate the exhaustive discussion of normal neuroendocrinology, folliculogenesis, and steroid metabolism with the clinical presentations and pathophysiology of PCOD. As examples, chapter one, dealing with neuroendocrine regulation of gonadal function, attempts to provide a thorough review in 19 pages. Unfortunately, in an attempt to be comprehensive, extraneous material, such as extrapituitary effects of LHRH, was included and the discussion of physiology relevant to PCOD tends to be superficial. Chapter two, entitled "Hormonal Control of Folliculogenesis," has the same defect. Two pages merely listing protein and steroid hormone concentrations in antral fluid, without physiologic correlation, do little to educate the reader. The key chapters likewise become exhaustive citations of previously published studies and neither show how to clearly determine those persons in whom PCOD should be suspected, how to establish the diagnosis, nor how to treat the disease. In chapter seven, the author lists the three most common presenting symptoms of PCOD (hirsutism, menstrual dysfunction, and infertility). The next three paragraphs include discussions dealing with the reported incidence of primary amenorrhea in PCOD, pre-pubertal hirsutism, definition of and genetic factors in hirsutism, the physiologic basis for hirsutism, the effects of elevated circulating androgens on 5-reductase activity, and the potentiation of the effects of testosterone produced by a reduced estradiol/testosterone ratio. Again, the author's desire to be comprehensive results in the obscuring of the salient points. Chapter 10 takes up 24 pages reviewing the published literature concerning 12 possible treatments. Yet, amazingly, the chapter concludes without a single sentence summarizing recommendations or providing specific treatment suggestions.

After reading this book, I doubt that the average clinician would increase his or her understanding of the clinical presentation, pathophysiology, or treatment alternatives for PCOD. The depth of discussion and referencing make this monograph more suitable for the subspecialist. The text does not add significantly to the information contained in other reproductive endocrinology textbooks.

MARTIN M. QUIGLEY, M.D.

Head, Section of Reproductive Endocrinology and Infertility
The Cleveland Clinic Foundation