neoplasia, and physiological principles of preparing a patient for surgery.

The book goes into great detail about the physiology of the alimentary tract, the cardiothoracic system, the urinary system, the central and peripheral nervous system, the peripheral vascular system, the endocrine system, and the skin and body wall. Finally, there are special sections devoted to burns, pediatric surgical problems, geriatric disease, and morbid obesity.

The writing is generally clear throughout. The illustrations are well done, and the layout of the text contributes to its easily read format. The reference lists are current but not so numerous as to overwhelm the casual reader. For younger surgeons, there are many practical tips on surgical procedures, and at the same time, there is a nice update on advances in physiology for the older surgeons who have been out of training for several years.

Physiologic Basis of Modern Surgical Care is highly recommended to anyone who wishes to have a greater understanding of physiology as it is applied to modern surgery.

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DIAGNOSIS AND MANAGEMENT OF DIABETES MELLITUS

by O. Charles Olson
Raven Press

Day-to-day management of type I or type II diabetic patients is emphasized in this book's 32 readable and understandable chapters. The book begins with the National Diabetes Data Group classification scheme and the etiologies of diabetes, including immunology and genetics. Routine care and management of diabetic complications are also discussed.

Step-by-step approaches to diabetic ketoacidosis, hyperosmolar coma, hypoglycemia, self-glucose monitoring, and end-organ complications are presented. Recent developments such as human insulin, second-generation oral hypoglycemic agents, and pancreatic transplantation are summarized, and an evaluation of future tools of diabetes care, including islet cell transplantation, the artificial pancreas, and somatostatin analogues, is provided.

The author has written this book for the medical student, house officer, and primary care physician. He includes a limited bibliography, and admits that numbered references have "purposely been omitted," believing the practicing physician would "not bother to look into [them] anyway."

Many controversial aspects of diabetes care are discussed, but the reader must rely on the author's interpretation of recent literature, as the actual references frequently are not cited. Furthermore, recent attention on the issues of blood pressure management and angiotensin-converting enzyme inhibitors for diabetic nephropathy is virtually ignored.

Some areas of disagreement are likely to occur in any attempt to describe this rapidly advancing field. Dr. Olson is able to draw on over 30 years' experience, summarizing available data and presenting helpful clinical pearls. The strength of the author's presentation far outweighs minor shortcomings. He provides an informative guide for the physician faced with providing daily care and support of diabetic patients.

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CURRENT THERAPY IN HEMATOLOGY AND ONCOLOGY—3

Edited by Michael C. Brain and Paul P. Carbone
BC Decker

The editors of this third edition of the Current Therapy series intended to provide current knowledge of diagnosis and therapy for most hematologic and oncologic diseases, and they have done an excellent job compiling materials from broad areas of interest into a readable text.

Dr. Brain edited 38 chapters for the hematology section, and Dr. Carbone edited 49 chapters for the oncology section. The book represents contributions from 110 authors, and as might be expected when dealing with many authors, there is some duplication. Bladder cancer is described in two separate chapters, and the newer classification of non-Hodgkin's lymphoma is repeated in two successive chapters on prognosis of lymphomas.

It is encouraging to see subjects such as pain control, psychiatric complications, cancer prevention, and cancer in the AIDS patient included in a general text. Many authors chose to include elements of another newer area—critical-care oncology—in their chapters, and this resulted in some redundancy. A separate chapter was devoted to hypercalcemia, which might have been included with the critical-care chapter.

The eight-page discussion of acute lymphocytic leukemia of childhood is not in keeping with the usual four-to-five-page limit for most topics. Otherwise, space