ATUL C. MEHTA, MD, EDITOR

TREATMENT OF CARDIAC EMERGENCIES (5th Edition)

By Emanuel Goldberger, MD, and Myron W. Wheat, Jr, MD
CV Mosby

This is a new edition of a book first published in 1974. It is organized in three parts. Part One defines the various presentations of syncope, cardiac arrest, cardiogenic shock, arrhythmias, acute myocardial infarction, hypertensive emergencies, acute dissection, and acute cardiac tamponade. It describes briefly the etiology, differential diagnosis, and pathophysiology of these entities. It also provides practical details of the emergency management of these conditions, although the approach to treatment shows a tendency toward more conservative forms of therapy that may not be universally accepted.

Part Two describes temporary and permanent cardiac pacemakers as well as defibrillation and cardiac monitoring. This part is more technically oriented, and devotes about 50 pages to pacemakers, modes of pacing, and pacemaker insertion. This is followed by a brief description of DC defibrillation and cardioversion with practical hints, and only a small chapter on cardiac monitoring systems.

Part Three covers medications used in cardiac emergencies. Each medication is briefly described with information on pharmacology, indications, side effects and toxicity, interaction with other drugs, dosage and administration, maintenance dose, and preparations. The list is current up to 1990.

The strength of the book is its concise, practical approach. The alphabetized organization of the section on medications is very helpful as a quick reference in treating cardiac emergencies. On the other hand, the book is too large for pocket use in the emergency room. The illustrations could have been more frequent and would have been more impressive in color rather than in black and white.

This is a valuable quick reference book for medical officers handling cardiac emergencies, and for medical students, medical residents, and internists dealing with cardiac emergencies.

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BONE SPECT CASE STUDIES

By B. David Collier and Ignac Fogelman
Mosby Yearbook

This well-rounded introduction to single-photon emission computed tomography (SPECT) of bone and its clinical application also serves as an atlas of abnormal cases, illustrating improved diagnostic accuracy with bone SPECT.

The format is a compilation of cases showing that bone SPECT can display bone lesions that are missed or equivocal on planar bone imaging. Specific pathologic entities presented include spondylolysis, stress or posttraumatic fractures, osteoid osteoma, facet osteoarthritis, focal metastases, osteomyelitis, diskitis, pseudoarthrosis, and avascular necrosis. Various regions of the skeletal system are prone to show as negative or equivocal on planar bone imaging, but as definitely positive on SPECT.

The introductory chapter is well written and briefly discusses the rationale for performing bone SPECT, performance protocols (including quality control and quality assurance) for both SPECT and planar bone imaging, indications for SPECT, and justifications for the increased cost and increased imaging time. There is also a chapter on SPECT in the examination of normal bone and a chapter on pitfalls and artifacts. This is followed by 28 case studies using both planar imaging and SPECT, often correlated with other imaging modalities.

For nuclear physicians who want to incorporate bone SPECT imaging into their laboratories, this is an excellent primer. It will aid the accurate interpretation of cases and the recognition of specific clinical indications for bone SPECT. The seasoned nuclear physician already familiar with bone SPECT will find this text useful as a review of specific disease entities and differential diagnosis.

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RESOURCES FOR PEOPLE WITH DISABILITIES AND CHRONIC CONDITIONS

Resources for Rehabilitation, Inc.

Approximately 43 million Americans live with a major impairment. This book, updated regularly, provides information helpful to anyone coping with the needs of disabled people. It begins with an overview of current thinking about disabilities, laws, education services, and the rehabilitation process. References at the end of each chapter and listings of self-help groups, current publications, tapes, organizations, and assistive devices are helpful.

The remainder of the book covers diagnoses that have a rehabilitative component, including hearing and speech disorders, diabetes, epilepsy, low back pain, multiple sclerosis, spinal cord injury, and visual impairment and blindness. For each entity, the disease process and its effect on patient and family are described.

Health care workers who regularly treat people with disabilities or chronic conditions will find this book a valuable reference to share with their patients and families.

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GUIDE TO CLINICAL TRIALS

Edited by Bert Spilker, PhD, MD
Raven Press

Bert Spilker, physician-pharmacologist at Burroughs Wellcome Company (Research Triangle Park, North Carolina), has produced an unrivaled researcher's desk reference in this, his tenth and most comprehensive book. Spilker includes all details of how to perform clinical trials; however, he emphasizes the intellectual challenge and humanistic purpose of research over the tedium and frustration sometimes associated with it. He covers broad topics concisely and clearly and makes excellent use of figures and tables that are adaptable to a variety of studies.

This book unites and expands upon material from Spilker's well-known previous books and introduces valuable and less-expected topics, such as how to plan surgical trials or trials for evaluating medical devices, the private practitioner's role in research, scientific misconduct, and the role of journals in improving standards of clinical trials. Spilker discusses statistics and data processing nonmathematically, stressing their importance yet advising that they never undermine clinical judgment. Monitoring, auditing, and publishing are covered as well.

Spilker moves from such basics as recruitment and randomization to

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explore numerous human factors that drive or stall research projects. These include management styles; interactions between academic investigators, pharmaceutical companies and regulatory agencies; games that sponsors and investigators play; and a brief section on doctors who should not conduct clinical trials. In addition to these, I would have welcomed discussions of the underrepresentation of women in medical research and the recent changes at the Food and Drug Administration.

Spilker claims in his introduction that this is not a cookbook; nevertheless, he delivers all of the necessary ingredients for professional research in a style free of jargon and, at times, full of delight. He takes the trial out of clinical trials. Investigators, research personnel and subjects, medical writers, students, and others will find essential knowledge here.

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CARDIAC EMERGENCY CARE

Third edition, edited by Edward K. Chung, MD
Lea & Febiger

This is the third edition of this book by the author. It contains 22 chapters relating to cardiac emergency. The writing style is simple, descriptive, and practical. Medical students and junior residents will find it valuable as a quick summary of cardiac emergencies, including etiology, pathophysiology, clinical manifestations, differential diagnosis, laboratory findings, and final diagnosis. The last part of each chapter discusses management and prognosis in a brief and practical way.

The last few chapters deal with less common cardiac-related problems such as endocarditis, myocarditis, cardiac pacing, hypertensive emergencies, digitalis intoxication, pediatric cardiac problems, and surgical cardiac emergency care. In addition, one chapter covers nursing aspects of cardiac emergency care. Two chapters, on coronary angioplasty and cardiac electrophysiologic studies, do not fall into the category of cardiac emergency; however, this additional reading is good as an introduction for beginners in cardiology.

The book's strengths are its simplicity and practical approach to problems. However, it is not a thorough reference: illustrations are few, and the authors do not discuss all cardiac emergencies. This basic summary of the diagnosis and management of the most common cardiac emergencies will be worthwhile for graduating medical students or junior medical residents scheduled to deal with cardiac floors or cardiac emergencies.

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EYE TRAUMA

Edited by Bradford J. Shingleton, MD, Peter S. Hersh, MD, and Kenneth R. Kenyon, MD
Mosby Yearbook

This handsome multi-authored textbook covers virtually all the major issues regarding ocular injury. Besides dealing with anterior segment, posterior segment, orbital, and adnexal trauma, there are separate sections on neuroophthalmic trauma and the evaluation and surgical preparation of the eye trauma patient. The chapters on clinical evaluation, diagnostic imaging, and medicolegal aspects of ocular injury will be valuable for emergency room physicians as well as ophthalmologists.

Certain chapters that are particularly noteworthy deal with alkali burns and traumatic hyphema, and discuss in detail the pros and cons of various therapies including experimental drugs and surgery. There is also an excellent review of the mechanics of corneal suturing.

The overall presentation is detailed yet easy to read. Numerous, clear, line diagrams and color plates complement the text. Checklists and box-charts of management guidelines are also very useful. Though the book is a more-than-adequate source of practical information, it may fall short of satisfying the theoretician as a reference work. However, this is a minor shortcoming, since the numerous up-to-date references provide a wealth of information. This is an excellent book for ophthalmologists in training, specialists, and emergency room physicians.

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REHABILITATION OF THE HAND: SURGERY AND THERAPY (3rd edition)

Edited by James M. Hunter, MD, Lawrence H. Schneider, MD, Evelyn J. Mackin, PT, and Anne D. Callahan, MD, OTR/L
CV Mosby

This book is rightly described in the foreword as a "classic." It is a dynamic educational tool that presents material necessary for patient care. Its many revisions and additions attest to the need for this new edition: 34 chapters are new, 15 chapters completely revised, and 55 partially revised.

The book's 17 major parts cover the spectrum of hand surgery and rehabilitation, including birth defects, trauma, infections, connective tissue diseases, neurologic conditions, vascular pathology, pain, and psychological pathology. Medical students, hand surgeons, and occupational and physical therapists will find valuable information in this text, as will professionals in fields such as psychiatry, pain therapy, neurology, neurosurgery, orthopedics, plastic surgery, general surgery, prosthetics, and worker's compensation. A substantial new section deals with hand problems of performing artists.

Surgical and rehabilitative facets of care are superbly blended throughout. This book provides a great deal of material with fine explanations of the theory behind the information. The shortcomings are relatively minor. For example, the discussion of anatomy and kinesiology uses "laterally" when referring to the ulnar aspect of the hand and "medially" when referring to the radial (page 14); this usage appears to differ from the usual anatomic position. However, later in the chapter this was changed. One therapy section recommends that the first postoperative evaluation of the surgical wound be carried out when the therapist changes the dressing; in my opinion, the hand surgeon and the therapist should work together. Some sections might benefit from expansion: for example, the section on Dupuytren's contracture. The section on evaluation of impairment may benefit from more recent material.

But these are small criticisms of an otherwise superb text. Much of this book should be required reading for specialists involved in hand surgical care. Hopefully, future editions will continue the evolution represented by this volume and will continue to update the bibliography.

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