

BOOK NOTES

Structured abstracts of information on newly published books, computer programs, selected Web sites, and other material are provided in this portion of Medical Writings. "Order phone" numbers can be used to place orders directly with publishers.

Evidence-Based Physical Diagnosis

McGee S. 910 pages. Philadelphia: WB Saunders; 2001. \$45.00. ISBN 0721686931. Order phone 800-545-2522.

Field of medicine: General medicine and medical education.

Format: Softcover book.

Audience: General internists, medical educators, medical students, residents, and medical subspecialists seeking a concise reference on the diagnostic accuracy of many of the physical signs taught and used in bedside diagnosis.

Purpose: To review the accuracy of commonly and infrequently used and taught physical diagnosis maneuvers, thereby providing the clinician with the necessary information to decide which are reliable diagnostic tools.

Content: The book has 12 parts. Part 1 covers a brief review of basic test characteristics, diagnostic decision-making skills, and the reliability of physical diagnosis. Following sections on characteristics of physical diagnostic maneuvers are arranged by application to organ systems. Maneuvers are described and specific test characteristics are listed when possible. The final chapter is a table of all likelihood ratios (and corresponding confidence intervals) given in the book.

Highlights: A single source of the test characteristics of physical diagnostic maneuvers in a readily searchable form is long overdue. Perhaps the most surprising thing is that this book is enjoyable and very readable. The author has made excellent use of tables and figures to summarize key points. All of the reviewed diagnostic tests are well referenced; this is no small feat considering that many of the diagnostic maneuvers were first described many years ago. Whenever possible, the author has provided information on the reconciliation (or not) of traditional physical diagnosis with modern technology.

Limitations: As might be expected, the text provides only a cursory overview of general diagnostic principles. Clinicians well versed in clinical epidemiology have no need for the first section; for others, it is too cursory. Perhaps the greatest limitation of the book is the quality of the studies from which the information on diagnostic accuracy is taken. In most cases, the reader is not given any information about the specifics of the study design or even the author's view about the quality of the primary source.

Related reading: This book provides a much-needed addition to currently available books on physical diagnosis. Bickley and colleagues' *Bates' Guide to Physical Examination and History Taking* (Lippincott Williams & Wilkins; 1999), Seidel's *Mosby's Guide to Physical Examination* (Mosby-Year Book; 1999), and other basic texts provide important "how to" information about physical diagnosis. Orient and Sapira's *Sapira's Art and Science of Bedside Diagnosis* (Lippincott Williams & Wilkins; 2000) complements the basic

texts well (but does not replace them) with historical information and nuances of the examination and is very well referenced. McGee's *Evidence-Based Physical Diagnosis* is the first compilation to give information on the accuracy of physical diagnostic maneuvers with exhaustive references to the primary studies.

Reviewer: Michael Shawn Stinson, MD, University of South Carolina School of Medicine, Columbia, South Carolina.

Sexually Transmitted Infections

Edwards A, Sherrard J, Zenilman J. 104 pages. Oxford, United Kingdom: Health Press Ltd.; 2001. UK £12.00; US \$24.00. Order phone 44-(0)123-552-3233.

Field of medicine: General medicine, family medicine, public health, infectious diseases, sexually transmitted diseases, and urology.

Format: Softcover book.

Audience: Primary care physicians and specialists in infectious diseases seeking a concise overview of sexually transmitted infections.

Purpose: To summarize for the generalist the current thinking on diagnosis and management of sexually transmitted infections.

Content: Sexually transmitted infections are reviewed according to etiologic agents and clinical syndromes, with adequate cross-referencing to minimize repetition. Sections discuss the overall approach to the patient, counseling, and treatment guidelines. Many chapters also deal with the critical issues of infection control and public health.

Highlights: The information presented is up-to-date, very readable, and concise. Particular clinical syndromes and presentations are emphasized with some excellent photographs; summary tables are well thought-out and presented. Treatment guidelines for the syndromes and pathogens discussed are easily accessible and adequately cross-referenced. In addition, important and major Internet sites for sexually transmitted infections are listed.

Limitations: Given the stated goals of this handbook, there are few limitations. The differences in approach and policy between the United States and the United Kingdom are often awkwardly presented and confusing to the reader. In addition, the section on HIV and AIDS should either be expanded or eliminated. It is so brief and superficial that its value to the reader is minimal.

Related reading: The major recent texts, summaries, and Web sites on sexually transmitted infections are considered the "key references." All of these are far more extensive and in-depth than the current handbook. They include Holmes and colleagues' *Sexually Transmitted Diseases* (McGraw-Hill; 1999); 1998 guidelines for treatment of sexually transmitted diseases. *Morb Mortal Wkly Rep.* 1998;47:1-111; and UK national guidelines on sexually transmitted infections and closely related conditions. *Sex Transm Infect.* 1999; 75 Suppl 1.

Reviewer: Edward E. Telzak, MD, Department of Medicine, Albert Einstein College of Medicine, Bronx-Lebanon Hospital Center, Bronx, New York.