



un médecin car une religion, en tant qu'expression culturelle, est une extraordinaire porte d'entrée pour rejoindre l'intimité même de la personne malade. Enfin, tout médecin lira avec intérêt les réflexions, à la fois profondes et simples, d'un de leurs confrères sur l'humilité qui doit habiter le médecin devant la mort.

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Ask the Doctor: Breast Cancer

Vincent Friedewald, Aman U. Buzdar, Michael Bokulich. *Ask the Doctor* series. 136 pp. Illust. Andrews and McMeel, Kansas City. 1997. \$12.50. ISBN 0-8362-2710-7

Overall rating:	Excellent
Strengths:	Clearly written; practical; recognizes importance of emotional experience; encourages patient participation in decision-making and information seeking
Weaknesses:	Technical in places; references more pertinent in the US setting
Audience:	Patients, especially those newly diagnosed, and their families

Written specifically for the woman newly diagnosed with breast cancer, *Ask the Doctor: Breast Cancer* is a clear, comprehensive guide. The authors successfully balance their main purposes: to provide complex medical information that will allow patients to participate in treatment decisions and to provide support and practical guidelines for coping.

The book is organized and readable. There are chapters devoted to diagnosis and to each of the major treatment modalities: surgery, radiation, chemotherapy and hormonal

therapy. A special feature is the use of icons in the margins to highlight areas of interest (e.g., diet, heredity, information to discuss with your doctor).

The profound emotional stress experienced by women in this situation is recognized throughout the book. A second theme is the uniqueness of the breast cancer experience for each woman. One of the book's greatest strengths is the chapter "What is breast cancer?" Difficult concepts such as DNA damage and the role of genes in hereditary predisposition to breast cancer are discussed in an understandable fashion. The "It's your turn" sections at the end of each chapter are also useful, challenging readers to answer questions pertinent to their own situation.

"How are you doing?" gives useful advice regarding diet, exercise and coping with the emotional effects of treatment. Specific attention is given to work issues and to discussing the diagnosis with family, friends and colleagues. Another strength of this patient guide is the chapter devoted to the period following treatment completion. The authors recognize this time as one of the two periods of greatest emotional stress faced by patients.

There are some highly technical sections containing information unlikely to be of interest to the average reader. Other weaknesses are references to several chemotherapeutic regimens no longer in common use and the inclusion of sections related to recurrent or metastatic disease in chapters that deal with primary and adjuvant therapies. An unfortunate limitation of the book is that information on support groups and cancer information services is not generally applicable to the Canadian setting.

Despite these weaknesses, *Ask the Doctor: Breast Cancer* can be highly recommended to most patients with breast cancer. It presents the experience and the treatment decision-making process in a positive light. Pa-

tients will benefit from its practical yet compassionate dealing with what is often a difficult and frightening situation.

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On Call Cardiology

M. Gabriel Khan. *On Call Series*. 343 pp. Illust. Harcourt Brace. 1997. \$28.95. ISBN 0-7216-6848-8

Overall rating:	Good
Strengths:	Compact, clear, well organized, some good tables and algorithms
Weaknesses:	Oversimplification; relationship of drugs and severe toxic reactions not explained
Audience:	Interns, 1st-year residents

Khan has attempted a challenging project: to write a book that is small and portable, yet comprehensive in the area of cardiology emergencies. The target audience is the intern or 1st-year resident with little experience in these problems. The book's strengths are the clarity of presentation and the organization of patient-related problems.

The section on physical examination and electrocardiographic analysis is addressed more to a 2nd- or 3rd-year medical student than to an intern or 1st-year resident. If the reader does not have knowledge in both those areas, this section is inadequate. If this section is merely for review, then a much more limited description of physical signs and ECG findings could have been added to each patient problem area.

There are some errors and oversimplifications. For example, it is stated that cough is produced by amiodarone. The more important statement is that cough occurring in a



patient taking amiodarone should alert the examiner to the presence of pulmonary fibrosis, a very serious complication of amiodarone. Similarly, one of the tables indicates that pericarditis is caused by hydralazine and procainamide or anticoagulants. However, this statement is only valid if the patient presents with the side effect of lupus-like syndrome (or an underlying pericarditis made worse by anticoagulants causing bleeding into the pericardial sack). To imply that these drugs have the same cause of pericarditis as renal failure or viral infections is misleading.

The early use of transthoracic echocardiography could have been stressed in the explanation of the underlying mechanisms in a patient with chest pain, with hypertension or cardiogenic shock, or with suspected pericardial tamponade or pulmonary embolism. The use of short-acting nifedipine in the treatment of hypertension is also a dubious recommendation.

Overall, this book does contain useful information. The final critics, 1st-year residents who have read it, state that it is good.

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The Children of Neverland: The Silent Human Disaster

Gideon Koren. 153 pp. The Kid In Us Publications, Hospital for Sick Children, Toronto. 1997. \$20. ISBN 0-9681801-0-8

Overall rating: Very good
Strengths: Breadth of topics; compelling writing style
Weaknesses: Lack of detail about any one subject, need for more careful editing

Audience: Anyone professionally or personally interested in the welfare of children

Thousands of children born each year will never reach their full potential, trapped for life in "Neverland." In Koren's words, the book is a "human manifesto . . . not a scientific document" and on that level it succeeds.

Using anecdotes, case histories and statistics suitable for the lay reader, Koren describes the many threats to children, arguing that most of these threats are preventable and therefore doubly tragic. Individual chapters address environmental exposures, embryological toxins, medical interventions, poverty, war and ethnic conflict, teenage pregnancy, suicide, poisoning and politics. He cautions us, however, not to draw premature conclusions about risks. He advocates more research involving children as being essential to the prevention of unnecessary abortions and to the improvement of our prevention strategies. He challenges our assumptions about children's ability to make informed decisions, persuasively contrasting them against the major responsibilities we give babysitters.

The strengths of the book are its breadth and Koren's caring, compelling style of writing. Breadth, however, is also the book's principal weakness; the book lacks the detail needed to be a reference for any of the topics. A professional editing might make the text flow more smoothly. Also, it is difficult to evaluate some of the author's statements because of the limited bibliography. For example, given the extensive sex education now in elementary and high schools, at least in Ontario, I am left wondering if more education is really the solution to the high teenage pregnancy rate.

Who would benefit from reading this book? It should be of specific interest to educators and parents on

school councils, health planners, health sciences students and people registering for pregnancy and birthing classes. It may be of particular value as a course book for senior elementary or early high school health classes. Any of us involved in the care of children, however, can afford to be reminded from time to time that while the lives of children are more secure than they were in Charles Dickens' time, there is still much to do.

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Management of Injuries in Children

John F.T. Glasgow, H. Kerr Graham. 440 pp. Illust. BMJ Publishing Group. 1997. Distributed in Canada by the CMA. \$102.95 (\$85.95, members). ISBN 0-7279-0925-8

Overall rating: Good
Strengths: Reads well; many useful clinical pearls
Weaknesses: Some imbalance in coverage of topics; algorithms would be useful
Audience: Emergency physicians, pediatricians, family physicians who work in the emergency department; others who care for injured children

Physicians who provide acute care to injured children are the intended audience for this book. Written by John Glasgow and H.K. Graham from Sheffield and Ulster respectively, the book has a distinctly British flair. (For instance, the authors show a preference for diazepam for acute management of seizures, as opposed to lorazepam.) The same comment applies to syntax; some North Americans might stumble over terms such as paracetamol and pethidine.