

The chapters are short (4 to 8 pages), are packed with good photographs, and follow a clear and systematic approach to the examination of each joint: inspection, palpation, range-of-motion testing, and special joint-specific tests. Each chapter concludes with specific clinical vignettes to help consolidate learning and demonstrate practical application.

The appendices contain good photographs of common articular problems, normal active range-of-motion measurements for each joint, a glossary, and a brief list of suggested reading for more in-depth information on the subject.

One particularly nice feature of the book is that the rationale behind each of the joint-specific tests is explained in a clear and logical fashion so the reader can actually understand (instead of simply memorizing) each of the maneuvers. This is a simple but appreciated touch that is surprisingly absent in many other texts on the subject.

For the student or clinician looking for a quick refresher on the basics of the musculoskeletal examination, this book's brevity and clarity are its strongest points. Those in specialized musculoskeletal disciplines will want to look elsewhere for more comprehensive texts.

—Christopher Watt MD DipSpMed CIME

Dr Watt is a physician in Vancouver, BC.

## Allergic diseases

### *Diagnosis and treatment*

**EDITORS** Phil Lieberman, John A. Anderson

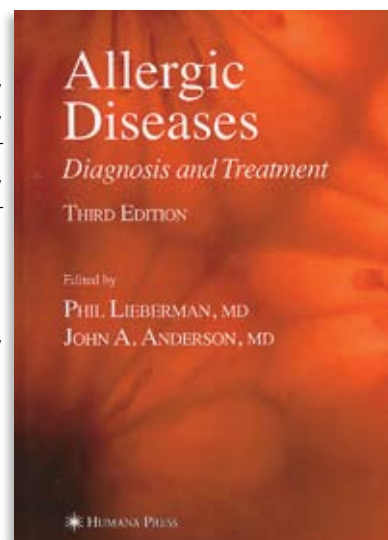
**PUBLISHER** Humana Press, 999 Riverview Dr, Suite 208, Totowa, NJ 07512, USA

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**PUBLISHED** 2007/484 pp/\$99.00 US



This book describes numerous allergic manifestations (eg, anaphylaxis, asthma, rhinitis, conjunctivitis, sinusitis, urticaria, and contact dermatitis), and provides a thorough discussion on diagnostic tests for environmental, insect-sting, and food allergies. Chapters in the book cover a variety of topics, such as pharmacologic agents used for the treatment of allergies, including allergen immunotherapy, children with recurrent respiratory tract infections, and controversies in allergy and allergy-like diseases.

*Allergic Diseases* is a very clinically oriented book. The pathophysiology of each entity is explained in terms of up-to-date immunologic mechanisms, which are complete but easily understandable, such that the rationale for treatments of these diseases can be appreciated. All

**OVERALL RATING** Excellent

**STRENGTHS** Well written; well organized; important clinical points or pearls presented in highlighted boxes

**WEAKNESSES** Written within the context of the United States; therefore, only US epidemiologic data are included

**AUDIENCE** All physicians and health care providers who care for patients with allergies (particularly in primary care and emergency room settings)

the contributing authors do a good job of describing the immunology of allergies in a readable and not overwhelming manner. This book serves as an excellent reference and practical guide to caring for patients with allergic diseases and treating these illnesses. It is user-friendly and easy to read.

—Jane Brooks MD CCFP

Dr Brooks is a family physician and emergency room physician in Middleton, NS.

## Patient-centered prescribing

### *Seeking concordance in practice*

**AUTHORS** Jon Dowell, Brian Williams, David Snadden

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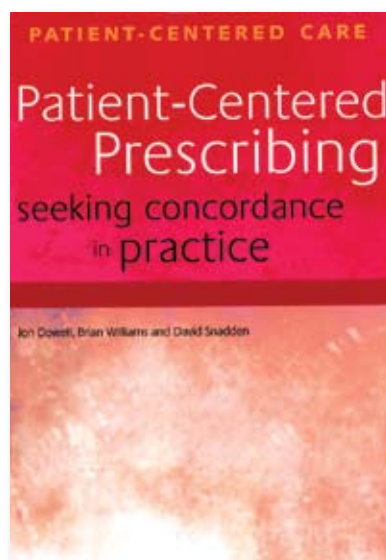
**PUBLISHED** 2007/170 pp/\$49.95 US

**OVERALL RATING** Very good

**STRENGTHS** Thoroughly researched; well organized; interesting suggestions for prescribing

**WEAKNESSES** Diverging focus on clinicians and researchers

**AUDIENCE** Primary care providers and researchers



In the book *Patient-Centered Prescribing*, the authors describe and reframe the process of giving and taking medications. Family physicians are often frustrated by patients' seemingly irrational failure to take recommended medications, which is termed *noncompliance*. This book offers *concordance* as an alternative. According to the authors, *concordance* is agreement on common goals between physicians and patients, with medication-taking included in this agreement.

Seeking concordance (instead of compliance) in taking medications might be a new concept for many of us. The authors present their arguments for a change in practice cogently and in a well-organized manner. The first part of the book presents current knowledge on the problem of noncompliance with prescribed medications. The second half offers new methods of seeking concordance in prescribing

by using a patient-centred method. Patient vignettes are included to help put the recommendations in a practical light. The authors also do a good job of describing the likely barriers to this approach, including the time that is taken in the negotiations between patients and physicians. They offer several suggestions for dealing with challenging patients.

I found their views to be interesting but also challenging at times. For example, consider the following statement: "Concordance has not been achieved if significant disparity exists between the two parties' view of the problem, treatment goals or solution. Where this occurs, the patient's view takes priority unless they are not competent .... This requires the clinician to be prepared to let go. They must be willing to let the patient make what they might consider to be the 'wrong' decision." This could be interpreted as, say, approval for giving a patient an antibiotic for a viral upper respiratory illness should the patient feel strongly enough about it. However, the authors do partially address the problem in chapter 8, "Unresolved Issues."

Overall, this is a useful addition to the patient-centred method. I would recommend this book to family physicians interested in addressing prescribing issues in their practices.

—Michelle Greiver MD CCFP

Dr Greiver is a family physician at North York General Hospital in Toronto, Ont, and an Assistant Professor in the Department of Family and Community Medicine at the University of Toronto.

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