

Book Reviews

Cardiac Pacemakers Step by Step: An Illustrated Guide

S. Serge Barold, Roland X. Stroobandt, and Alfons F. Sinnaeve. Elmsford, NY: Blackwell Publishing; 2004. 341 pp. \$55.00. ISBN: 1-4051-1647-1.

DR. BAROLD, A MOUNT SINAI ALUMNUS, and his colleagues have produced an effective tool for those seeking to learn basic concepts about cardiac pacemakers. The book is geared towards a wide range of learners, from beginners to advanced users of pacing devices including medical students, residents, cardiology fellows, cardiac electrophysiology fellows, implanting surgeons, nurses, sales representatives and anyone who wishes to rapidly gain a comprehensive understanding. It represents a particularly useful alternative for beginners who might be intimidated by less manageable texts on the subject.

Initial chapters present introductory aspects of electrocardiography and electrical impulses as applicable to pacemaker functions. Subsequent chapters clarify basic and advanced concepts in cardiac pacing as applicable to bradycardia and anti-tachycardia pacemakers. The method is also applicable to the same functions in implantable-defibrillators. The final chapters deal with complex problems with pacemakers, such as under- and over-sensing, pacemaker-mediated tachycardias and pacemaker failure.

With almost 300 pages containing color diagrams, the book is sure to appeal to those who benefit from visual aids and dislike reading large tracts of text. Alfons F. Sinnaeve must be complimented on the clarity with which he has visually presented basic as well as advanced concepts in cardiac pacemakers. Both basic pacing concepts (fundamentals of electricity,

normal pacemaker function, electrocardiograms, and radiography) and advanced concepts (pacemaker malfunction, rate response, automatic mode switch, hysteresis, pacemaker-mediated tachycardia, biventricular pacing, and trouble shooting) are clearly presented. While there are the inevitable minor errors in spelling and syntax often found in a first edition text, on the whole this is a comprehensive book that will make a valuable addition to any medical library.

Davendra Mehta, M.D., Ph.D.

Director, Electrophysiology and Pacing Section
Cardiovascular Institute
The Mount Sinai Hospital
New York, NY

Peripheral Vascular Disease for Cardiologists. A Clinical Approach

John A. Spittell. Elmsford, NY: Futura, Blackwell Publishing; 2004. 134 pp. \$54.95. ISBN: 1-4051-0366-3

WITH THE GROWING RATE of diabetes mellitus, obesity, and the metabolic syndrome in our population, cardiologists are paying more attention to the increasing burden of atherosclerosis. Yet in cardiology fellowship training, the common focus in the areas of heart failure, arrhythmia, and primary prevention has been the detection and treatment of underlying coronary artery disease. With so much attention directed to heart and coronary artery disease, cardiologists and fellows-in-training often do not obtain the skills necessary to identify and treat peripheral vascular disease. According to the recent

national cross-sectional survey of Peripheral arterial disease Awareness, Risk, and Treatment: New Resources for Survival (PARTNERS), more than 70% of primary care providers whose patients were screened for this study were unaware of the presence of peripheral arterial disease (PAD) in their patients.

In *Peripheral Vascular Disease for Cardiologists*, Dr. John Spittell describes a wide spectrum of both atherosclerotic and non-atherosclerotic vascular diseases. In addition to PAD, Dr. Spittell discusses a range of topics in peripheral vascular disease, from diseases of the aorta to venous disorders. His intention in writing this book was “to broaden the knowledge base and clinical skills in the recognition and management of common peripheral vascular disorders that occur in cardiologic practice.” As stated in the foreword by Dr. Valentin Fuster, Dr. Spittell has had vast clinical experience in the area of peripheral vascular disease and “has done more to encourage involvement of the cardiovascular community in peripheral vascular disease than any other individual I know.”

Dr. Spittell provides a helpful overview of vascular disease processes that are likely to be seen in any cardiology and primary care practice. But the strongest feature of this book is its author’s emphasis on basics: a complete history, physical examination, and peripheral vascular assessment, especially for high-risk patients with either established coronary artery disease or cardiac risk factors. In current cardiology fellowship training, the focus is on learning the latest technology and tools for diagnosing diseases, with not enough emphasis on the importance and value of a thorough physical examination. Dr. Spittell reacquaints us with basic and advanced physical maneuvers and signs for diagnosing a number of vascular disease processes. For example, the ankle-brachial index (ABI), described in the book, is a simple noninvasive technique that can be performed in any office setting. “The ABI has become the objective standard for [PAD] diagnosis.” It might have been useful to provide the reader with values for normal and abnormal ABIs.

Through the rest of the book, Dr. Spittell covers topics such as aortic dissection, aneurysm, arteritis, vasospastic disorders, venous disorders, and leg and foot ulcers. To accompany each vascular disease topic, he provides excellent images of physical and radiographic findings, and of gross pathology, to illustrate the manifestations of particular vascular disorders. In the next to last chapter, Dr.

Spittell describes physical findings used as reliable “shortcuts” to different vascular diagnoses. For example, he illustrates physical manifestations of infective endocarditis (Roth spots, splinter hemorrhages, Osler’s nodes) and Osler-Weber-Rendu disease (finger telangiectasias). In the final chapter, he provides an excellent discussion on “uncommon peripheral vascular disorders,” such as thoracic outlet syndrome and occlusive arterial disease in the hand due to blunt trauma.

Although Dr. Spittell covers a wide spectrum of vascular diseases, he does not discuss the management of PAD in sufficient detail to reflect the current standard of practice. In describing the management of PAD, he simply states that “in an effort to delay progression of atherosclerosis attention to the controllable risk factors—smoking, diabetes mellitus, hyperlipidemia, and hypertension—is basic.” Dr. Spittell fails to mention that specific types of medication such as angiotensin-converting enzyme (ACE) inhibitors and statins are particularly beneficial for PAD patients. The morbidity and mortality impact that ACE inhibitors and statins have on PAD patients are independent of the risk factor benefits, based on the Hope Outcomes Prevention Evaluation (HOPE) and Heart Protection studies, respectively. It is currently accepted that PAD is a coronary heart disease equivalent and should be (aggressively) treated accordingly.

Dr. Spittell provides a review of peripheral vascular disease processes and discusses the means to examine, test and treat these disorders. His book provides an excellent synopsis of various vascular diseases and a thorough overview of their diagnostic histories. However, it does not cover in sufficient detail the rapid advances that have been made in imaging and therapy for many common vascular diseases, such as PAD. Although intended for cardiologists, this book can surely benefit primary care physicians, fellows-in-training, residents, and medical students. Disorders such as PAD are becoming increasingly prevalent, yet continue to be underdiagnosed and undertreated. This book provides insight into the manifestations of peripheral vascular disease and stresses the need for clinicians to be skilled in examining, evaluating and appropriately treating patients who develop these diseases.

James Jang, M.D.

Division of Cardiology
Mount Sinai School of Medicine
New York, NY

Health Literacy: A Prescription to End Confusion

Lynn Nielsen-Bohlman, Allison Panzer, David Kindig, editors. Washington, DC: The National Academies Press. 2004. 345 pp., index. \$47.95. ISBN: 0-309-09117-9.

THE BOARD OF NEUROSCIENCE and Behavioral Health of the Institute of Medicine of the National Academies was concerned about the apparent lack of health literacy of the general public. Many health professionals and policy makers seem to be unaware of the extent and effect of such illiteracy. The book was written, by a panel of experts, to analyze and clarify this problem and suggest some possible solutions.

The book carefully documents the following factors in health literacy and illiteracy: (a) health literacy correlates with the general literacy and level of education of various socioeconomic groups; (b) the elderly have a diminishing capacity to understand medical information and (partly as a result) to obtain appropriate health care; (c) people with less education tend to get less (and less appropriate) medical treatment than those who are better educated; (d) many medical forms are difficult to complete and tend to confuse patients to some degree; (e) decisions for health care providers are regularly made by personnel with minimum training in medicine; and (f) most national studies with specific recommendations for improving life styles or preventing disease are not implemented by the public.

This book has both strengths and weaknesses. Each chapter is well referenced, but most of the case illustrations are worst-case scenarios and the algorithms and tables tend to be boring and unhelpful. The problems with health literacy are well defined, but an overall prescription to end the confusion is never quite filled.

The work of previous committees and regional studies on health literacy is thoroughly described. And the book presents a number of pragmatic suggestions for newer committees and health care administrators to implement. It is not written for the lay public or the average practitioner, but rather for policy makers and committees trying to make health care forms

and authorization documents more understandable, to implement national studies, and to improve health literacy for senior citizens as well as for economically and socially disadvantaged adults. As such, it at least represents several important steps in the right direction.

Martin H. Savitz, M.D., Ph.D.

Assistant Editor
Mount Sinai Journal of Medicine

Pharmacy Law Digest, 39th Edition

Joseph L. Fink III, Jesse C. Vivian, and Ilisa B.G. Bernstein. Saint Louis, MO: Facts and Comparisons, part of Wolters Kluwer Health; 2004. 1,024 pp. \$62.95. ISBN: 1-57439-202-6.

THE 39TH EDITION OF *Pharmacy Law Digest* is an approximately 1,000-page compilation of pharmacy-related legal issues. The introductory chapter provides general information about the basic types of law (i.e., statutes and regulations), the organization of the judicial system (federal and state courts) and differences in trial procedures (i.e., civil and criminal courts). In addition, the first chapter explains where the law can be found and how to read it.

The next chapter describes in detail the federal Food, Drug and Cosmetic (FD & C) Act, which is the main body of law related to regulation of pharmaceuticals. The history of and various amendments to the FD & C Act are chronicled, and each requirement of the Act is detailed and explained. The importing and exporting of drugs, a topic of recent controversy and debate, is described. Further, the text explains FD & C rules and regulations surrounding the compounding, labeling, dispensing, repackaging and shipping/mailing of pharmaceuticals. Also covered are the FD & C regulations on the marketing of pharmaceuticals and "direct-to-consumer" advertising.

Although the book's presentation of federal rules and regulations is detailed and systematic, it does not (and probably could not) provide the

same type of information for state law. Yet many legal aspects of pharmacy practice are determined by state law. Therefore, readers/practitioners are often referred to their particular state law to determine the legality of a particular issue.

The entire third chapter is dedicated to the Controlled Substances Act, the principal federal law regulating such drugs. The chapter reviews the meaning of each of the schedules, proper labeling practices, procedures for ordering, and record-keeping requirements for controlled substances. Federal rules for prescribing and dispensing controlled drugs, as well as procedures for disposal of excess controlled drugs are presented.

The fourth chapter is about pharmacy inspection by various regulatory agencies (FDA, DEA or municipal agencies). It is a useful section for those individuals who own or operate their own pharmacies, as well as for those in institutional practice who are responsible for regulatory compliance. The chapter also includes useful "Do's and Don't's" for the practitioner faced with a regulatory inspection.

There is also a chapter in the book dedicated to business law. It defines many legal terms related to this topic. The subsection on contract law reviews the fundamentals of contracts and provides the legal meanings of key terms. The subsection on employment law reviews various types of discrimination (e.g., age or gender) and sexual harassment. This chapter of the book is especially useful for the proprietor-pharmacist who may not have knowledge in this area.

The main body of the book contains summaries of hundreds of actual lawsuits. The summaries are about 1 – 1½ pages long. Each case is broken down into four sections. "ISSUE" describes, in one or two sentences, what the dispute was about. "FACTS" is a section several

paragraphs long that describes the chronological chain of events in the case. "RULING" is a one-paragraph section stating how the court ruled and "REASONING" explains how the law was applied to the facts of the case and the court's interpretation of the law. This section is by far the largest in the book and the most interesting, in that the interpretation and spirit of the law is explained. The cases are sorted into subsections within the chapter, by category. For example, all lawsuits related to drug-drug interactions, dispensing, failure to warn (among many others) are grouped together. The latest edition has cases as recent as 2003, as well as many older court cases.

At the end of each of the chapters there are multiple-choice study questions, critical thinking scenarios and case studies to help reinforce and highlight the most salient points of that section (answer keys are also provided, including the rationale for the correct choices).

A useful index of key drug and licensing laws and how they differ from state to state is provided. The 39th edition represents a minor revision as compared with the previous edition. Some of the revisions in the new edition include an updated review of the requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, changes to the Pediatric Research Equity Act, and the latest on Medicare legislation.

The target audience for this book includes prescribers, pharmacists, pharmacy students and pharmacy technicians. The book appears to be factually correct and is laid out in a logical format that explains the subject matter in a simple, easy-to-understand manner.

Peter Paxos, M.S., R.Ph.
Assistant Director of Pharmacy
The Mount Sinai Medical Center
New York, NY