

General Practice: Clinical Cases Uncovered

by Emma Storr, Gail Nicholls, Alison Lea, Martha Leigh and Sheena McMain

Reviewed by **Tana Fishman** FRNZCGP, DO, MS, Director Undergraduate Medical Education, Department of General Practice and Primary Health Care, University of Auckland, School of Population Health, Faculty of Medical and Health Sciences; Chair, Board of Education, Royal New Zealand College of General Practitioners

'Clinical Cases Uncovered' is aimed at senior medical students and junior doctors who might be entering general practice. The authors believe that their learning will be enhanced with 'real-life' characters and also by including the medical, psychological and social problems. There is a casual narrative style that is contemporary and compelling—the aunt or uncle next door, the husband or wife or friends. However, case summaries and boxed inserts provide the official medical complement in a highly succinct 'list' format—the universal language of all medical students and trainees.

The book is divided into three sections: *Basics*, *clinical cases* and *self-assessment*. There is a brief 'how to use this book' in the beginning that smuggles in some important suggestions for learners, such as working individually or in groups, and that the clinical cases may crop up on exams.

In Part 2, there are 36 delicious cases commonly seen in general practice, with a narrative approach of guiding the reader to a final diagnosis and treatment. The cases represent the most common reasons for patients to consult their doctor, as well as the most common presenting symptoms in the GP surgery.

Learning can be self-assessed in Part 3 by the use of MCQs, EMQs and SAQs—a diverse group of test questions. The learner could easily utilise these questions as a pre-test and then focus their attention on the areas of weakness.

One cannot ignore the appendix section of additional information and schedules, albeit quite brief and simple, yet helpful. While the immunisation schedule is designated for the UK, it does serve as an excellent comparison to New Zealand's schedule.

The index of cases by diagnosis found in the back of the book is important for the medical educator—a very keen audience for this creative learning opportunity. Much thought and sound judgement has gone into this compilation of cases for learning—Book 2 of *Clinical Cases Uncovered* is surely in the minds or computers of the authors.

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Cardiovascular Risk Management

Edited by R Hobbs and B Arroll

Reviewed by **Gary Sinclair** BSc, MBCh, MFGP(SA), FRNZCGP, FRACGP, Past Clinical Director Primary Care and CCM, CMDHB, currently DMO, Chronic Disease Management, Remote Health, Central Australia

'Cardiovascular Risk Management' provides a comprehensive, practical and easy reference to the use and implementation

of evidence-based guidelines for the assessment and management of cardiovascular disease, drawing on international as well as key regional guidelines from Australia, Canada, Europe, New Zealand, the United Kingdom and the United States.

This is an ideal reference guide for general practitioners, junior doctors, medical students and nurses, and in

the New Zealand context for clinical governance groups in Primary Health Organisations.

There are currently a plethora of guidelines confronting those in clinical practice and the aim of this book is to provide a practical guide for primary care physicians on the key guidelines on cardiovascular risk management and to illustrate the use of these guidelines.

The book begins by providing an overview of why it is important to prevent and treat cardiovascular risk, how to achieve this and the key cardiovascular guidelines available. It includes core guideline recommendations and areas of discrepancy between guidelines, the different risk calculations, treatment recommendations and emerging risk factors and therapies, as well as treatment plans for individuals with diabetes who are at high risk of developing cardiovascular disease.

The second half of the book provides specific, practical, evidence-based chapters on the management of modifiable risk factors—lifestyle changes to reduce cardiovascular risk, pharmacotherapy for improving lipid profiles, for lowering blood pressure and for lowering blood glucose. The book concludes with a chapter on the long-term management of cardiovascular disease, giving consideration to the barriers and issues

which prevent many patients from reaching guideline goals, and ends with a glimpse into the management of cardiovascular risk in the future where strategies based on consideration of total cardiovascular risk and targeted at high-risk patients with good chronic care management systems in place are likely to prove more effective than the current opportunistic approach of treating individual cardiovascular risk factors.

This book will appeal to many primary care clinicians because it is a short and easy read, with succinct practical advice drawn from an extensive guideline and reference base. The layout is easy on the eye with many large figures, tables, diagrams and a few flow-charts. Each chapter topic can be read as a standalone reference which is particularly useful for the busy clinician who may wish to get to the nub of an issue quickly, and I found the chapters on pharmacotherapy

of lipids, blood pressure and blood glucose particularly useful updates for daily clinical practice.

There are references to the same key regional guidelines in a number of chapters, which may seem repetitious when reading the book in one sitting, but make sense when dipping back into a particular chapter to refresh one's memory or look something up.

This is an excellent practical reference on a very topical issue for all those working in primary care, and I recommend it highly. An essential addition to every general practice library for 2009.

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Australia and New Zealand Community as Partner: Theory and Practice in Nursing

by Karen Francis, Karen Hoare, Ysanne Chapman and Jane Mills

Reviewed by **Dr Lisa Whitehead**,
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Australia and New Zealand Community as Partner', based on the fourth US edition, defines and examines the role of the contemporary community nurse. This easy-to-read text provides exemplars from Australia and New Zealand to present a national context to the theory and policy relating to primary health

care, without losing sight of the international perspective.

Part 2 provides a practical framework for conducting a community assessment, with strong emphasis on working with local communities to address identified health care issues within the Australian and New Zealand environment.

Part 3 explores working with vulnerable groups, including rural and indigenous communities, and provides practical

tools for working with communities to improve health.

Case studies and critical thinking questions are used to good effect and web resources are provided for each chapter. The book is comprehensive, yet highly readable, and I would recommend it to undergraduate nursing students and practitioners alike.

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