

Part IV gives detailed lists regarding meal plans and specific recipes and provides a medical resource guide. The meal plans and recipes are useful and relatively nutritionally sound. However, it would take a very highly motivated individual to stay on this meal plan. The author also provides a reasonable list of Web sites and addresses for foundations, societies, and institutions that can provide useful information on asthma and allergies. He also provides "complementary medical" information Web sites.

Overall, once you pass its misleading title and the undue emphasis on the role of candida in allergies, this book is an excellent overview for asthma and allergy patients. It provides very useful background information on etiology, diagnosis, and treatment. The basic principles of eliminating environmental irritants, getting exercise, losing weight, and following a low-carbohydrate diet are reasonable. Unfortunately, they are the most difficult lifestyle aspects to change. Almost anyone would have improved health if they followed the book's advice on those subjects. The rest of the book's advice should be evaluated on an individual basis, under the care of a licensed professional, especially aspects regarding some food supplements and the treatment of candida.

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20 Common Problems in Respiratory Disorders. William J Hueston MD, editor. (20 Common Problems series, Barry D Weiss MD, series editor). New York: McGraw-Hill. 2002. Soft cover, illustrated, 369 pages, \$45.

At the onset of the influenza epidemic in the winter of 2004, I spent a frustrating half hour searching online medical references for current influenza treatment guidelines, without success. Soon thereafter I settled down to review this book and was delighted to find a well referenced, clear, and directed chapter on influenza, which quickly answered my questions.

My experience in the practice of clinical medicine leads me to agree with the author's assertion that the 20 most common

problems in respiratory medicine are among the most common presenting patient complaints and are what primary care providers will want to read about. This textbook is an excellent introductory text for primary care providers in training, and a quick reference for those already in practice. Though written primarily for clinicians, respiratory therapists and nurses will probably also find this book useful.

The book is well organized and thoughtfully arranged into 20 chapters and 5 parts. Part 1 focuses on common presenting symptoms and their evaluation. Parts 2 through 5 cover upper respiratory infections, lower respiratory infections, noninfectious acute respiratory diseases, and chronic respiratory diseases and their prevention. This book's structure is logical and lends to its easy readability. In addition, highlighted and boxed outlines on the first page of each chapter help to make the information more transparent and quickly accessible. Though not advertised as a pediatrics text, most chapters contain sections on special considerations for children. Pediatric drug dosing and vaccine guidelines and dosing are provided in all chapters that provide that information for adults. In addition, Chapter 10 provides a dedicated discussion of the causes of pediatric cough. The chapter first introduces a framework for evaluating pediatric cough, then discusses croup, epiglottitis, bronchiolitis, and pertussis.

The initial section on respiratory symptoms and their evaluation consists of 3 chapters on cough, dyspnea, and pulmonary function testing. As cough and dyspnea are symptoms rather than disease entities, such a beginning may seem overly broad and basic for the more experienced provider and a sacrifice of an opportunity to discuss 3 other common respiratory disorders in more depth. However, these chapters do lay an important foundation for the novice clinician, as cough and dyspnea are common chief complaints with serious and life-threatening diagnostic considerations. The author's stated aim with these chapters is to offer a guide to the evaluation of these common complaints as well as an approach to pursue when the initial evaluation does not reveal the underlying cause. Each chapter provides a useful discussion of the pathophysiology, workup, and evidence-based treatment of these disorders, and concludes with a clear and succinct algorithmic flow chart.

For example, the chapter on cough briefly discusses the basic cough mechanism and then reviews the differential diagnosis for both acute and chronic cough. Numerous highlighted tables and charts summarize differential diagnoses and emphasize important points, such as red-flag signs and symptoms for potentially life-threatening causes of cough. The chapter includes an especially useful evidence-based review of treatment options for chronic cough.

The chapter on pulmonary function testing is also clearly written, providing important definitions and an introduction to key clinical concepts. The treatment is somewhat superficial, leaving the reader without enough information to interpret the cited studies independently, though a flow diagram at the end of the chapter presents a useful algorithm.

In Part 2 there is a chapter on pharyngitis, which, like the earlier chapters, is symptom-driven rather than focused on a specific disease entity. The result is brief, paragraph-long discussions on selected causes of pharyngitis, followed by a more satisfying discussion of group A streptococcus pharyngitis, which includes a table that highlights the modified Centor Strep score. This chapter may have been better had it focused instead on Group A streptococcus or perhaps mononucleosis, covering those topics in greater depth while limiting the discussion on influenza and rhinovirus, which have their own chapters.

The chapters that focus on specific diseases, including the common cold, sinusitis, otitis media, otitis externa, and influenza, are detailed and well written. The chapter on the common cold provides a lively discussion and literature review on the overuse of antibiotics for this viral illness—an important topic that is echoed in the chapter on acute bronchitis. Appropriate therapeutic alternatives are discussed, with reference to efficacy studies. Herbal and homeopathic options are also described, though not in great detail. The chapter on influenza is remarkable for its clarity and brevity while retaining clinically pertinent details. Tables highlight the characteristics that distinguish influenza from the common cold, differences in presentation by age group, and comparisons of the 4 antiviral agents available for influenza, including cost considerations. The thoughtful use of tables and graphs is consistent throughout these chapters. However, the coverage of clinical points is not as consistent. For example, the chapter on sinus-

itis exhaustively summarizes the various studies in tables but does not provide basic clinical reference tables, such as treatment options and doses.

The book includes a useful chapter on special considerations in geriatric and immunocompromised patients. This chapter is particularly well structured, thoroughly addressing questions that typically arise in the management of respiratory conditions with these patients. Information is provided on differences in presentation, laboratory and radiographic studies, differences in infecting organisms (with an emphasis on epidemiologic risk factors), empirical therapy, and disposition. A useful algorithmic flow diagram is included, though the algorithm may be overly aggressive in its workup: do all patients suspected of having a lower respiratory tract infection need an arterial blood gas analysis as well as a chest radiograph? Obtaining an arterial blood gas sample is painful, and pulse oximetry is often a reasonable alternative. Though the basic approaches outlined in this chapter are adequate, finer points of therapy must be obtained from more detailed references, such as the use of adjunctive corticosteroids for patients severely hypoxic from pneumocystis pneumonia.

Section 4, on noninfectious acute problems, contains 2 brief chapters: one on pulmonary embolism and the other on lung cancer. They provide enough information to understand the basic pathophysiology, terms, and relevant diagnostic studies, but they lack the detail and tables found in prior chapters. In addition, the algorithm for pulmonary embolism emphasizes the use of ventilation/perfusion scans, though spiral tomograms are frequently used nowadays in the initial evaluation. Also, the recently-published clinical prediction rules for deep vein thrombosis and pulmonary embolism are not discussed.

In Part 5, on noninfectious chronic conditions, the book is back to its best form, offering satisfying detail, clinically relevant tables, and pictures of clinical findings on the topics of allergic rhinitis, asthma, and chronic obstructive pulmonary disease. The chapter on immunizations provides information on disease burden, vaccine efficacy, usage guidelines, and adverse reactions, which providers will find invaluable when discussing these vaccines with their patients. The final chapter draws appropriate attention to the health threat of cigarette smoking, which is the leading cause of prevent-

able death in the United States and a contributor to all respiratory ailments.

This book is not without flaws, though they are generally minor. In addition to the shortfalls already noted, the book suffered some internal inconsistencies by allowing different authors to handle the same subjects. For example, a discussion of influenza in the chapter on pharyngitis uses a definition from a review article from 1976 and is somewhat at odds with the information found in the chapter that is specifically about influenza, which used more recent citations.

We highly recommend this book to all health care providers in training, as well as to experienced clinicians and ancillary staff who want a concise reference. The information is generally current, evidence-based, and exceedingly relevant. The book is attractive, well organized, and overall an enjoyable read.

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Chemokines in the Lung. Robert M Strieter MD, Steven L Kunkel PhD, and Theodore J Standiford MD, editors. (Lung Biology in Health and Disease series, Volume 172, Claude Lenfant, executive editor). New York: Marcel Dekker. 2003. Hard cover, illustrated, 399 pages, \$195.

The highly regarded book series Lung Biology in Health and Disease, under the executive editorship of Claude Lenfant, has added a new volume entitled **Chemokines in the Lung**, edited by Robert Strieter, Steven Kunkel, and Theodore Standiford. These outstanding experts have compiled a comprehensive review that is in keeping with the excellence of the series. This volume, like others in the series, will be of interest primarily to investigators and physicians interested in lung cell biology, but some others will find it of interest as it relates to the

roles of chemokines in specific diseases and their potential roles in therapy.

The book has 3 introductory chapters on general characteristics of chemokines, chemokine receptors, and intracellular signaling mechanisms. Two additional interesting chapters discuss the role of chemokines in lymphocyte trafficking and genetic models of chemokine biology in the lung. The remainder of the chapters are devoted to specific conditions and diseases, including asthma, chronic obstructive pulmonary diseases, cystic fibrosis, infectious disease, human immunodeficiency virus, acute lung injury, granulomatous lung inflammation, pulmonary fibrosis, lung allograft rejection, lung cancer, and pleural disorders.

Each chapter is written by experts in the field, and each stands alone as an excellent topical disease-oriented review. The primary literature cited is comprehensive and accurately and critically presented, with extensive references for readers interested in more in-depth research. Although there are predominant chemokines in certain diseases, there is considerable overlap in chemokines related to many disease processes, so there is some overlap in discussion of chemokines in the context of specific diseases. Rather than viewing this as a weakness, I think this overlap helps emphasize the complex nature of chemokines and their complex, interacting roles in the pathogenesis of diverse conditions.

One current problem in chemokine biology is the movement away from acronyms that have been commonly used for chemokines, such as MCP-1 (monocyte chemoattractant protein) and IP-10 (interferon- γ inducible protein). A systematic chemokine ligand naming system, which is based on their receptors, was recently adopted, so MCP-1 is now known as CCL2, and IP-10 is CXCL10. By and large the authors and editors dealt with this nomenclature transition effectively by using tables, both terms, and the preferred new systematic name after defining the common acronym.

I found the chapter on lung allograft rejection (by Belperio, Keane, Ross, and Strieter) to exemplify the high quality of the reviews. The authors draw on an extensive literature on skin rejection, cardiac allograft rejection, and renal allograft rejection, and they integrate diverse investigations into a comprehensive overview and relate the findings to acute lung allograft rejection and bronchiolitis obliterans syndrome. Much of the lung allograft data are from human stud-