
The discovery of *Helicobacter pylori* and its link to the pathogenesis of several major diseases of the upper gastrointestinal tract has revolutionized the thinking and management of these disorders. Over the past several years, more than 500 abstracts have been presented at the annual American Gastroenterology Association meeting alone, attesting to the explosion of information being discovered about this pathogen and its clinical consequences. Given this quantity of information, only gastroenterologists and pharmacists with an interest in gastroenterology would want to keep abreast of all that is current in the area. Dr Heatley, a gastroenterologist and contributor to other, more comprehensive texts on *H. pylori*, has produced this handbook on the same subject for the generalist.

This 64-page publication (the page count includes the index) is very reader friendly. Its wide margins contain key phrases summarizing the information on each page, and 46 figures and tables provide a useful visual summary of many important topics. The information is broken up into almost 50 subsections on a variety of relevant topics, from history of the bacterium and epidemiology of infection to clinical management and consensus guidelines.

Because the book is meant for the generalist physician or pharmacist practitioner, the text is not referenced, but it is indexed. The 1998 publication date obviously precludes inclusion of recent data on new diagnostic tests being developed and clinical trials in non-ulcer dyspepsia. The author does not state in his introduction whether another edition is forthcoming.

This handbook would be appropriate for practitioners with an interest in the area as well as for libraries and drug information centres.

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The **Handbook of Palliative Care**.

This book provides a broad overview of issues specific to palliative care. It covers a wide range of topics, from the history and principles of palliative care, communication skills, and ethical issues, to the specific symptoms experienced during terminal illness. The discussion of symptom management focuses on the care of patients in the terminal phase of cancer. However, 2 chapters address symptoms related to acquired immunodeficiency syndrome (AIDS) and motor neurone disease (such as amyotrophic lateral sclerosis). There is also a chapter on palliative care in children.

The chapter devoted to medicines management in palliative care attempts to define the role of the pharmacist as a key team member. The considerable discussion around the issue of providing medicines for terminally ill patients in the community is applicable to the Canadian health-care system. Availability of medications upon discharge from hospital can be a significant problem for many patients receiving palliative care, and the authors provide some helpful suggestions for bridging the gap between hospital and community. The review of compliance aids is also useful. However, the discussion about prescribing and dispensing controlled drugs applies only to the National Health System in the United Kingdom.

I found that the chapter on communication skills presents an excellent overview, although it appears to have been
written primarily for physicians and nurses. It provides some helpful suggestions for dealing with specific issues that frequently arise when communicating with a terminally ill individual. The chapter dealing with adapting to death, dying, and bereavement should assist pharmacists in understanding some of the psychological and social issues that dying patients face. The ethics chapter is of interest but focuses primarily on the question of euthanasia (both active and passive) and covers other issues only in a superficial manner.

The chapters dealing with specific symptoms generally provide helpful information regarding medication choices and dosing ranges. Most chapters have diagrams to explain the pathophysiology of each symptom and illustrate an algorithmic approach to treatment. The only difficulty is that some of the medication choices are specific to the United Kingdom.

Generally, hospital pharmacists working in palliative care or oncology will find this book a useful addition to their current references. It should complement, but not replace, other references in this area.

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**Drug Treatment Protocols.**
Hardcover, 457 pages. US$100.

This book offers 44 disease-based treatment algorithms in an easy-to-use format that can be used for quick reference. The protocols are intended for use by pharmacists and other health-care providers in decisions related to drug therapy. Each algorithm is presented in a decision-tree format and is intended as a general guideline. Each decision point is accompanied by explanatory text, including some tables listing drug options. Most of the content is probably most applicable to community practice. These protocols were initially published quarterly between 1996 and 1998, and the intent of this book is to collate them for easy use.

The algorithms cover diseases related to the cardiovascular, endocrine and metabolic, gastrointestinal, and respiratory systems, as well as infectious, pediatric, and psychiatric problems. In addition, there is a section on self-treatable conditions and one on complications related to venous access devices.

The guide is practical, but there are some limitations to its use. In some sections, such as the one on infectious diseases, very few conditions are covered. Also, because information related to therapy can change quickly, some components may already need to be updated. For example, for hypertension, the recommendations are primarily based on the sixth report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (known as JNC-VI). Yet information from newer trials (such as the UK Prospective Diabetes Study) should also be considered by practitioners making therapy decisions. The protocols usually recommend treatment by drug class, leaving the practitioner to determine the basis for selection of particular agents. In some of the self-care sections, herbal therapies are included, supported primarily with textbook references. It would be useful to state the level of evidence for these recommendations. In using this guide, the practitioner will also have to consider the difference in availability of some drugs in Canada and the United States. With respect to laboratory parameters, imperial units (such as milligrams per decilitre) are used without conversions to SI units (such as millimoles per litre).

Overall, this is a well-laid-out, easy-to-use reference that would be a useful guide for community practitioners. Hospital pharmacists working within ambulatory and outpatient clinics will also find it helpful. Students and residents may find this a quick review of treatment for common conditions. With the