ASHP’s Clinical Pearls


The Clinical Pearls presentations at the ASHP Midyear Clinical Meeting are popular and typically well attended. This book represents an attempt to translate the success of this Midyear staple to the print medium. The editor asked 15 Clinical Pearls presenters “to capture the essence of their presentations” for inclusion in this book. The contributors were also asked to expand on their original content and provide more detail, the rationale being that the 5-minute oral presentations are often too brief to cover the topic appropriately.

The book is organized into 15 sections, one for each clinical pearl. The pearls do not appear in any obvious order. Rather, a diverse range of topics is covered, from migraine prophylaxis in adolescents to hyporesponsiveness to erythropoiesis-stimulating agents.

The strengths of this book are that it is generally well written by people who seem to have a good grasp of their subject matter. In addition, a few of the sections come across as bona fide clinical “pearls”, for example, the sections on N-acetylcysteine in severe acetaminophen toxicity and use of succinylcholine in critically ill patients. These are brief and to the point, providing a reasonably succinct take-home message.

Unfortunately, in my opinion, one of the main premises of this book is off the mark: that is, the decision to expand on each topic and provide greater detail. Clinical pearls have been variously described as “short, straightforward pieces of clinical advice” and “not common knowledge . . . often anecdotal in nature . . . relevant to patient care”.

A common theme in these definitions is brevity. Many of the “pearls” in this book are too long (up to 15 pages in length), tending to be especially heavy on background material. Ultimately, the “pearl” is obscured by a sea of information.

A second criticism is that rather than imparting wisdom that may be more anecdotal or derived from experience (as clinical pearls have historically tended to do), many of the sections simply summarize a topic (e.g., “Pharmacy Proofs: CICR ≠ GFR” and “Celiac Disease: Dangers of Gluten in Medications”) or review the evidence (e.g., “Glycemic Control in the ICU: How Low Should We Go?”). Topic summaries would probably be more easily located in a recent review article or a textbook. Medical evidence becomes outdated quickly and is more logically obtained by searching electronic databases of the literature to answer specific clinical questions.

Finally, the target audience for the book is unclear. Presumably, the volume is intended for any clinical pharmacist, but most books that clinical pharmacists keep on their shelf are used for periodic reference. This book would not serve that purpose well, since it lacks a particular topic focus; other reference sources or databases would be more appropriate for this purpose. However, this book could conceivably serve as basic or companion reading material for a pharmacy resident or student.

In summary, ASHP’s Clinical Pearls contains a number of good summary-type sections on a diverse range of topics. However, it fails to deliver’s clinical “pearls” in the classic sense, most of the sections being too long and lacking a sense of the wisdom wrought from experience. Much of the information in this book could be more easily located elsewhere.

References

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The Travel and Tropical Medicine Manual, 4th Edition


The Travel and Tropical Medicine Manual is a comprehensive reference that provides the clinician with the fundamentals of travel and tropical medicine. As international travel becomes more commonplace, health care providers need to be informed about the prevention and treatment of communicable diseases and must also know how to counsel their patients on travel-related health issues.

In this manual, 49 contributors cover a broad range of topics related to travel and tropical medicine. The 45 chapters are
divided into 7 main sections (Pre-Travel Advice, Advice for Special Travelers, Fever, Diarrhea, Skin Lesions, Sexually Transmitted Diseases, and Worms). Each section is colour-coded, and the content is well-organized, succinct, and effectively highlighted by illustrative figures, tables, and images. The compact size makes this an ideal pocket reference, although the font size of the text could have been larger.

The manual provides practical and instructive information for counselling travellers before they leave home. This includes details on preventing communicable diseases, as well as discussion of travel health issues such as time-zone changes, air pollution, altitude illness, and diving medicine. In addition, comprehensive guidance for the treatment of post-travel conditions is provided. Some key chapters are those covering vaccinations, malaria prevention, traveller’s diarrhea (prevention and self-treatment), HIV infection, tropical dermatology, and sexually transmitted infections.

Each chapter begins with a concise preamble and background for the topic. In sections where an infectious process is the main focus, a description of the pathogenesis and disease is provided, including the history and clinical manifestations required to make a diagnosis. The content uses medical terminology intended for health care providers. Pertinent material is effectively summarized in tables, and colourful maps are used to highlight the prevalence of specific diseases.

The pharmacological management of infections (drug, dose, duration of treatment, and common adverse effects) is generally summarized in tables. Details of the drugs are also given in the text, but in brief, general terms. For more comprehensive drug information, readers may need to refer to other resources. A useful feature is the list of reference articles provided at the end of each chapter.

Other practical information in the manual includes a table on the use of melatonin to prevent jet lag and another on potential drug interactions between HIV antiretroviral therapy and travel-related medications. In addition, there is a list of online resources where readers can find up-to-date travel information.

In summary, The Travel and Tropical Medicine Manual is a good reference for clinicians who wish to review the concepts of travel and tropical medicine and those who require a resource for specific clinical indications. The target audience consists of infectious disease physicians, primary care physicians, and other health care practitioners who specialize in travel medicine. Pharmacists who wish to broaden their knowledge in travel medicine and those who are avid world travellers would benefit from this book.

The Pharmacist’s Guide to Evidence-Based Medicine for Clinical Decision Making


In the 1990s, the term “evidence-based medicine” (EBM) was introduced to the lexicon of most health care professionals by pioneers such as David Sackett and Gordon Guyatt. This paradigm shift in the clinical decision-making process incorporated not only a clinician’s experience, but also patients’ values and relevant evidence as a way to improve patient care.

The purpose of the book under review is to describe for pharmacy students and practitioners a 5-step process for clinical decision-making. It is meant to be an easily digested “how to” guide for pharmacists. Interestingly, its contents are based on a required course in the Doctor of Pharmacy program at the University of Missouri—Kansas City. The book is arranged in 3 sections: interpreting trial data, the 5-step EBM process, and applying the EBM process to patients. Peppered throughout the book are concise tips, called “key ideas”, which remind the reader of important points to consider or places to find information.

Essentially, this guide does provide a basic level of information about the EBM process and its application to patient care. It outlines a strategy to identify, obtain, evaluate, and assess the literature so as to make informed clinical decisions. But readers should not expect this text to be a comprehensive EBM resource like Evidence-Based Medicine: How to Practice and Teach EBM, now in its third edition (Churchill-Livingstone, 2005), or the Journal of the American Medical Association users’ guides, which were published in a series of articles in the journal (starting in November 1992) and are now maintained online by the Centre for Health Evidence (http://www.cche.net/usersguides/main.asp).

This text has 10 well-written chapters appearing in a logical sequence. There is also a helpful glossary of commonly used EBM terms. In addition, a brief (4-page) section in the book entitled “EBM tools” has some useful tables and forms. Of special note, there is a chapter devoted to applying EBM principles to therapeutic decisions about dietary supplements.

According to the authors, “the busy practitioner” could “read through the text in an evening or two and immediately apply the 5 step EBM process to his or her practice setting”. Although it may be possible to apply parts of the process immediately, I think it would be unrealistic for those unfamiliar with EBM concepts to apply them on the basis of this resource alone. Some limitations of this guide are the limited information on trial design and biostatistics. Although the section on searching the literature would be useful for some, I don’t believe the suggested approach is the most efficient or fruitful. I would have also liked to see more references to other available EBM resources. Strengths include the concise, easily comprehensible nature of the book and the chapters about asking clinical questions and applying trial results to patients.

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