BOOK REVIEWS


The fifth edition of this handbook, affectionately referred to as the “Teddy Bear” book, represents a significant expansion of the 1993 edition. The book comprises 145 monographs prepared by 22 authors and 42 reviewers, all leaders in the field of pediatric clinical pharmacy.

Each monograph appears on its own page. The monographs are consistent in format, so that after using the book a few times, the reader knows exactly what type of information to expect. The book is arranged alphabetically by generic name, and brand names are also listed. Other information given for each drug includes maximum dosage, concentration for administration, maximum concentration, IV push rate, duration over which an intermittent infusion should be run, rate for continuous infusion, cautions, and comments. One strength of this book is that almost every fact is referenced — the reference list has 1848 items. The appendices include nomograms for determining body surface area and for estimating ideal body mass in children.

This text would be a valuable addition to the pharmacy department of any hospital offering pediatric care. The monographs are clear, straightforward, and concise. The information they contain is highly specific to pediatrics and is often not readily available anywhere else. The text, however, would best be used in conjunction with other specialized references (such as Handbook on Injectable Drugs, by L.A. Trissel, and Pediatric Dosage Handbook, by C.K. Takemoto, J.H. Hodding, and D.M. Kraus), as well as the relevant product monograph.

Work on the sixth edition has now begun, and the new edition promises to be a significant expansion of the current edition.

David Knoppert, MScPhm
Liaison Neonatology
St Joseph’s Health Care
London, Ontario


Loyd V. Allen Jr is professor emeritus of pharmaceutics at the College of Pharmacy, University of Oklahoma, Oklahoma City. He is also editor-in-chief of the International Journal of Pharmaceutical Compounding. Professor Allen states that the purposes of this book are to provide a basic foundation of knowledge to enable pharmacists to “sharpen their skills” in compounding, to serve as an educational tool for pharmacists who did not receive instruction in compounding, and to be a textbook for current students. In most regards, the book succeeds.

This volume is well organized and clearly written. It covers general requirements and guidelines for extemporaneous compounding, with good detail on equipment and facilities, documentation, calculations, formulation, and quality control. In addition, there are chapters devoted to 14 specific dosage forms. For each dosage form, the author reviews types, historical use, application, formulation ingredients, preparation methods, physicochemical considerations, packaging.

Continued on page 280
labelling, storage, stability, and patient counselling requirements. At the end of these chapters, the author provides a few sample formulations with directions for their preparation. This book provides a handy reference for the more familiar dosage forms, such as oral suspensions, solutions, creams, and ointments, as well as for less common products such as lozenges and gels. Biotechnology products and veterinary dosage forms are also covered. Each chapter is designed to stand alone, a feature that inevitably results in some repetition.

The author emphasizes the responsibilities of the compounding pharmacist, including the necessity to review the available literature for information to support the product’s use, preparation, and stability. In particular, he emphasizes the need to provide a reasonable and rational expiry date. Unfortunately, these principles are not fully illustrated. Factors affecting stability, packaging, and storage are outlined in the chapter for each dosage form, but the sample formulations that follow do not mention appropriate packaging, storage, or expiry dates.


There is increasing interest in pharmaceutical compounding to meet unique patient needs. This book is certainly recommended for pharmacists who require a comprehensive general reference.

Susan Stansfield, BScPhm
Manager, Resources
Department of Pharmacy
The Hospital for Sick Children
Toronto, Ontario

References

Drugs of Choice: a Formulary for General Practice, third revision.
Softcover, 334 pages. $24.95. [also available on diskette]

Drugs of Choice is intended as a problem-oriented prescribing guide for primary care physicians. Organized by body system, from cardiovascular to respiratory, it lists what the authors have determined to be the most appropriate drug therapy for 194 clinical problems managed in the ambulatory care setting.

One of the strengths of this reference book is the manner in which the information is organized. The clinical problems are presented as subheadings within each body system. For each problem, an initial section entitled “Drugs of choice” lists the relevant drugs (along with the usual adult dose), presented by generic name and grouped by therapeutic classification. A comparison based on the daily cost of the average dose is included. For situations where there are only 4 therapeutically equivalent drugs, the authors have elected to list all 4 drugs; for clinical problems for which there are more than 4 equivalent drugs, only the 3 least expensive drugs are listed. The next subheading, “Second-line therapies”, is organized in the same manner. The authors have also established levels of evidence for their recommendations, another helpful guide for the user. The A and B levels of evidence are based on the strength of supporting literature or other documentation. Level C recommendations are based on the opinions of experts in the field. “Additional instructions and notes” follow the drug therapy listings, and each subsection concludes with the cited references.

There are several limitations to this formulary. Drug classification terms, such as “dihydropyridine”, are sometimes employed in the “Additional instructions and notes” section without being mentioned in the drug therapy tables. The use of “and” and “or” in the recommendations is sometimes confusing. Because this is a 1998 text, newer drug therapies are missing, such as the atypical antipsychotics. The attempt at brevity sometimes means that useful information is omitted. An example of this situation occurs in the list for hyperlipidemia, where elevated low-density lipoprotein is not defined and the user is referred to two 1996 references. No pharmacist was included among the authors and editors, an omission that is particularly evident in the