



BOOK MANAGER'S CHOICE



Bellevue Guide to Outpatient Medicine. Edited by Nathan Link and Michael Tanner. BMJ Books. September 2001. R495.

Combining critically appraised evidence with the experience of doctors working with outpatients in one of the busiest American clinics, this is a unique tool for all health care providers working in primary care settings. The guide delivers the most necessary information on over 40 major conditions from congestive heart failure to domestic violence. Treatment recommendations are presented in a unique two-column format, with the relevant evidence and references given alongside. For over four years this has been an essential evidence-based resource for more than 100 primary care physicians at Bellevue Hospital Center, New York. Now fully revised and published by BMJ Books, it will be a valuable tool for physicians worldwide.

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DESIGN AND IMPLEMENTATION OF HEALTH INFORMATION SYSTEMS*

Edited by Theo Lippeveld, Rainer Sauerborn, Claude Bodart.
Pp. xi +270. Sw. fr. 70/US\$63. WHO. 2000. ISBN 92-4-156199-8.

Information systems are fundamental to any health system. This is true whether the information is required to monitor the continuity of care for individual patients or to evaluate the infant mortality rate of a country.

This book gives a detailed overview of such systems and components with emphasis on developing countries. The contents include a chapter on the need for information systems and how they can be used in making decisions.

Other general issues such as how information should be translated into indicators, and the value of collecting routine as well as non-routine data at health facilities through surveys, specific research and surveillance, also have their own chapters.

The contents are comprehensive and besides more general issues are also quite specific topics such as the resource requirements for information systems, the hardware and software requirements for computerisation, and geographic information systems.

The text is supplemented by figures and case studies from developing countries around the world, although at 270 pages it could have been improved with some pruning.

The book draws on wide experiences and lessons. With South Africa being in the midst of reforming its health information systems in the public sector, this book has many insights that will be useful to health managers and public health practitioners.

At 49 Swiss Franks (about R240 at the time of going to press), it is not cheap, but I would recommend it for all postgraduate public health students and for managers of health systems at various levels.

Peter Barron

INTERNATIONAL CLASSIFICATION OF DISEASE FOR ONCOLOGY*

Third Edition. Edited by A Fritz, C Percy, A Jack, K Shanmugaratnam, L Sobin, DM Parkin, S Whelan. Pp 240. WHO. 2000. Sw.fr.60/US\$54. ISBN 92-4-154534-8.

It seems appropriate to begin by giving some historical background to International Classification of Diseases for Oncology (ICD-O). This classification system has been used for nearly 25 years for coding both the topography (site) and the morphology using a system of T and M codes for neoplasms.

A coding system for the morphology of neoplasms was published by the American Cancer Society in 1951 as their manual of tumour nomenclature and coding. Since this time, the coding system has become progressively more complex, moving from a two-digit code to a complex system that allows documentation of the behaviour of neoplasms.

In the 1960s, the College of American Pathologists developed a classification for all pathological entities (not only tumours) published as the Systemised Nomenclature of Pathology (SNOP). In addition, the College of American Pathologists incorporated the ICD-O system into the Systemised Nomenclature of Medicine (SNOMED) as the system of classifying the morphology of neoplasms.

The classification of tumours has greatly expanded in recent years and the second edition of International Classification of



Diseases for Oncology was published in 1990 and now this third edition has been published in 2000.

Anatomical pathologists and tumour registrars will welcome this new version. There are over 400 changes, some relatively minor ones to sort out slight irregularities, but most of them additions of new histopathological types of tumours, particularly in the field of lymphomas and leukaemias where new codes have been assigned.

The new edition includes codes for lymphomas as categorised by the Revised European-American Lymphoma (REAL) classification and also the terms used by the French-American-British system (FAB) for leukaemias. In addition, a number of other welcome additions include those for histological subtypes of tumours relating to skin adnexa, breast, soft tissues, and the neuro-endocrine system.

The layout of the book is excellent and it is extremely user-friendly. Guidelines for the use of the code book are included, and there is also a detailed explanation of the differences between ICD-O and the previous ICD-10. Of particular value are the appendices, which outline in detail the new codes that are added in the third volume, the changes to T and M codes, and terms that have been deleted from the third edition.

The addition of ICD-0 is an essential requirement for tumour registrars in all parts of the world. Anatomical pathologists will also find this volume invaluable in terms of morphological coding for tumours.

The price is reasonable for such an essential but specialised book.

Pauline Hall

ULTRASONOGRAPHY IN UROLOGY: A PRACTICAL APPROACH TO CLINICAL PROBLEMS*

Edited by E Bluth, P Arger, C Benson, P Ralls and M Siegel. Pp xi + 204. Illustrated. DEM 199. Thieme. ISBN 1-58890-050-9.

As stated in its title, this book is indeed a good practical approach to the clinical problems in urology. It is definitely not an imaging textbook on ultrasound but does put the exact position of ultrasound in the correct context of practical urology problems. It is divided into chapters according to the different problems encountered in urology.

One such chapter is the approach to lower abdominal pain in a woman. The pathology is discussed in short with all the investigations necessary to make a diagnosis as well as the place of ultrasound. There is even a chapter on erectile dysfunction with a practical approach on all the special investigations necessary to handle this problem.

The book itself is not an imaging textbook, but would help a

general practitioner and possibly a urologist to request the appropriate investigations and it clearly explains the value of ultrasound.

CS de Vries

IN MEMORIAM

WILLIAM BEZUIDENHOUT

Dr William Morrison Bezuidenhout, one of the best known and loved GPs of Boksburg, was finally released from a long and painful but bravely borne illness in August, at the age of 74.

After qualifying in medicine at Edinburgh University, he joined his father, Dr Heilet Bezuidenhout, and Dr Rocco Engelbrecht in practice.

He was a courteous gentleman who always showed no effort was too much for his patients, who adored him, or when his colleagues needed assistance or advice. He was legendary at intubating patients when called upon to help in a difficult situation.

He was a kind and generous colleague, though reluctant to accept thanks or praise for his good deeds. For example, when an elderly and impecunious nursing sister retired from Boksburg's Benoni Hospital, he funded the anonymous purchase of a refrigerator for her.

He served the East Rand branch of the Medical Association in the capacities of secretary, treasurer and president. This meritorious service earned him the Association's bronze medal.

In the early 1970s, when I first got to know him, Dr Bez (as he was commonly known) was a keen golfer who befriended popular players such as Denis Hutchinson and the Henning brothers.

This hobby was cut short by a prolapsed disc, but he was such an intrepid sportsman that he altered course and became passionate about horse racing. He became steward and later on chairperson of the Benoni Race Club and eventually chaired the combined Benoni and Germiston race clubs.

Being a spectator was not enough. He was also keenly involved in aviation and enjoyed the social life of the Brakpan flying club.

At home he was a loving and greatly loved family man with integrity. He will thus be immensely missed by his wide variety of colleagues and patients of Boksburg, as the capacity crowd at his funeral service testified.

The only consolation for his wife, four children and six grandchildren, is that his intense suffering is now over. To the family we express our sincere gratitude for the wonderful way in which they cared for and comforted Dr Bez. We extend our sincere condolences to them for suffering such a huge loss.

WK Andrew