

BOOK REVIEWS

Drug Information Handbook: A Comprehensive Resource for All Clinicians and Healthcare Professionals, 15th Edition

By Charles F Lacy RPh PharmD FCSHP, Lora L Armstrong RPh PharmD BCPS, Morton P Goldman RPh PharmD BCPS, and Leonard L Lance RPh BSPHarm. Published by Lexi-Comp, Hudson, OH, 2007. ISBN 978-1-59195-203-9. Paperbound, 2148 pp. (23 × 11 cm), \$56.95. Members \$55. www.lexi.com

Therapeutic Area/Content: This book is an up-to-date compendium of concise drug information monographs.

Format: Serving as the annually updated print version of the Lexi-Comp ONLINE (Internet-based) and Lexi-Comp ON-HAND (Personal Digital Assistant) products, all of this handbook's information is derived from the Lexi-Drugs database.

Audience: The *Drug Information Handbook* is intended to be a handy quick reference for all clinicians and healthcare professionals.

Purpose: Key clinically relevant information on commonly used drugs is presented in a succinct, user-friendly format that is intended to be useful to healthcare providers at the point of care so that they can make more informed decisions, reduce adverse drug events, and deliver better patient care.

Content: The book is organized into 4 sections: introduction, drug monographs, appendix, and pharmacologic drug class index. Comprising the vast majority of the book, the drug monograph section is arranged alphabetically by generic drug name; each monograph contains up to 33 standardized fields of key information. Being a concise, quick reference, the book does not include information on every therapeutic agent available, nor does it provide detailed information or references for each monograph. The appendix contains a wide variety of treatment guidelines, comparative drug charts, nomograms, and reference tables that may be useful in providing patient care.

Usability: The book is easy to use and well organized. In the monograph section, the alphabetical listing of drugs allows for quick retrieval of information without accessing an index. The use of page headers, bolded text, and a standardized format allows the user to identify specific information rapidly. In the appendix, an index allows for retrieval of the desired nomogram or guideline. Furthermore, extensive cross-referencing between the monograph and appendix section helps facilitate use of the appendix.

Highlights: Of particular interest is the wide variety of practical information found in the appendix.

Limitations: As mentioned above, this book is not intended to be all-inclusive and should not take the place of standard comprehensive drug reference texts. Although the appendix provides much practical information, the average user is not likely to fully utilize this information without first studying the content of the appendix to ascertain what is available.

From a practical standpoint, with all of the information it now contains, the *Drug Information Handbook* has become quite unwieldy; weighing nearly 3 pounds and measuring 2 1/4 inches thick, it is no longer realistic to carry this book in the white coat pocket. Lastly, the print version is only updated annually, in contrast with the electronic versions, which are updated with new content daily.

Comparison with Previous Edition or Version: The 15th edition includes 30 new drugs and many drug monograph updates. In addition, US black box warnings are now highlighted within the monographs and many combination products have been added. Lastly, the appendix has been updated with new information on comparative drug charts, immunization recommendations, malaria treatment, antiretroviral therapy for HIV infection, and antibiotic treatment of adults with infective endocarditis.

Reviewer's Summary: Overall, this is a well-written book that provides succinct information and guidance for clinicians, pharmacists, and students. It is of greatest benefit to the practicing clinician who desires a quick drug reference at the point of care and prefers a print publication. For medical reference libraries, the *Drug Information Handbook* does not replace more comprehensive drug information references that are also available either in print or online, such as *Drug Facts and Comparisons* or *AHFS Drug Information*, but could serve as a complement for quick retrieval of key information.

Reviewer: Noelle K Hasson PharmD, Pharmacy Benefits Manager, Veterans Affairs Palo Alto Health Care System, Palo Alto, CA

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Pharmacovigilance, 2nd Edition

Edited by Ronald D Mann MD FRCP FRCGP FPPM FISPE Hon Member ISoP and Elizabeth B Andrews MPH PhD. Published by John Wiley & Sons, Ltd., West Sussex, England, 2007. ISBN 978-0-470-01803-3. Clothbound, xviii + 686 pp. (25.5 × 19.5 cm), \$315.00. www.wiley.com

Therapeutic Area: This book is a comprehensive overview of the growing field of pharmacovigilance—the “study of marketed drugs examined under the practical conditions of clinical use in what are usually large populations.”

Format: *Pharmacovigilance* is a hardcover volume written by 98 contributors from academia, governmental agencies, industry, and private consultancies. The book, consisting of 5 parts and a total of 52 chapters, is supplemented with numerous data tables and occasional figures in black and white.

Audience: The book's first edition was apparently written for those involved in pharmacovigilance practice and research at all levels, and the current edition would clearly serve the same audience.

Purpose: The purpose of this edition is to update the original book with respect to some of the important international developments in pharmacovigilance that have occurred in the past several years, including regulatory and legal changes, pharmaceutical risk management, and increased regional monitoring. Particular attention is paid to the recent events and controversies surrounding the use of selective serotonin-reuptake inhibitors (SSRIs) in children and adolescents, as well as the safety of hormone replacement therapy (HRT) and of cyclooxygenase-2 reductase (COX-2) inhibitors.

Content: The 5 parts of this text are: Part I, “The Basis of Pharmacovigilance” (11 chapters, including legal, ethical, and international is-

sues and case examples); Part II, "Signal Generation" (20 chapters on signal detection, monitoring and reporting mechanisms, statistical methods, and databases); Part III, "Pharmacovigilance and Selected System Organ Classes" (11 chapters on adverse drug reactions [ADRs], including those affecting the skin, with 9 color photographs of cutaneous ADRs; gastrointestinal tract and liver; hematologic system; eyes, kidneys, and cardiovascular system; as well as issues in children and the elderly); Part IV, "Key Current Topics" (5 chapters on risk management, HRT, COX-2 inhibitors, and an introduction to pharmionics); and Part V, "Lessons and Directions" (4 chapters on teaching and other specific issues, including pharmacogenetics and ADRs).

Usability: Although not a handbook, the book is organized in a clear and concise manner and it is easy to find information on a particular topic from the table of contents or the index. The chapters are reasonably well referenced and up-to-date.

Highlights: This edition remains an excellent and comprehensive overview of the field of pharmacovigilance. The original topics covered are all informative ones, and the chapters on monitoring and databases are particularly useful in identifying and assessing approaches to signal detection. The history and description of the pharmacovigilance program in the Netherlands (Chapter 22) will be of particular interest to pharmacists, as the profession has played a major role in the initiation and advancement of the Dutch system. In addition, there is the valuable inclusion of a chapter on pharmionics (Chapter 48), a new field that investigates the factors and outcomes associated with patient adherence and exposure to prescribed medication. Finally, the chapters on the recent cases involving SSRIs in children and adolescents, HRT, and COX-2 inhibitors (Chapters 45–47) are valuable contributions, as these cases provide important lessons for the future.

Reviewer's Summary: This is a must-have resource for professionals involved in pharmacoepidemiology and pharmacovigilance practice and research. In Chapter 49, the case is also made for the importance of educating medical and pharmacy practitioners on the need and methods for pharmacovigilance and the roles they can play. This book would also serve as a useful reference text for those wishing to develop a formal course for undergraduates or graduate students.

Reviewer: Marc Levine PhD, Professor, Faculty of Pharmaceutical Sciences, The University of British Columbia; Associate Member, Department of Pharmacy, Children's and Women's Health Centre of British Columbia.

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Patient Compliance with Medications: Issues and Opportunities

By Jack E Fincham PhD. Published by Pharmaceutical Products Press, an imprint of The Haworth Press Inc., Binghamton, NY, 2007. ISBN 978-0-7890-2610-1. Paperbound, xiv + 232 pp. (21.5 × 15.5 cm), \$32.95. Also available clothbound (ISBN 978-0-7890-2609-5; \$59.95). www.HaworthPress.com

Therapeutic Area: *Patient Compliance with Medications* reviews the extensive literature on patient adherence, specifically addressing key issues and discussing the opportunities for health professionals to assist their patients in achieving optimal drug use.

Format: This book contains 12 chapters and an index.

Audience: Oriented to health professionals and students, the text is primarily (though not exclusively) directed at the pharmaceutical profession.

Purpose: The author's goal is to "...present the means for health professionals to assume ownership of the issue of noncompliance with medications for the patients for whom they provide care." The focus is on examining opportunities for health professionals to improve adherence and enhance patient care outcomes.

Content: A very brief introductory chapter states the text's purpose and provides a general argument for the need to become involved in improving patient adherence. Chapter 2 presents an overview of the scope of nonadherence and issues related to it. It essentially outlines the content of the remainder of the text. Chapter 3, entitled "Drug Therapies Leading to Noncompliant Activity," also covers patient-related and health professional factors, as well as health system barriers and constraints. The costs of nonadherence are discussed in Chapter 4, and the definitions of adherence and its measurement are covered in Chapter 5. Chapters 6 and 7 describe models for evaluating adherence and methods for improving it. Concordance, the new term for compliance, and other definitions are discussed in Chapter 8. Chapters 9, 10, and 11 consider ethical issues, describe the role of health professionals, and present an adherence case study on disease state management in older persons with hyperlipidemia. The concluding chapter discusses future considerations of patient adherence to medications.

Usability: As an introductory text on patient adherence, the most appropriate audience would be health professionals and students with inadequate knowledge of and experience with patient nonadherence issues. Practitioners and students who are already familiar with this problem and who have had experience in helping patients to improve their medication use will find this text of limited value. The book's price is reasonable.

Highlights: Chapter 6 presents 5 primary models or theories on which to evaluate patient adherence, from the Health Belief Model to the Transtheoretical Model. The importance of a theoretical framework for engaging in work related to patient adherence cannot be overstated. Advances in improving adherence are dependent on the development, testing, and use of such models and theories. In Chapter 3, the author has created a number of very useful tables on adherence rates by disease state. They emphasize the relative importance of specific predictors of nonadherence and adherence.

Limitations: The obvious limitation of this text is the manner in which material is organized. Topics concerning definition, measurement, barriers, and methods for improving adherence are primarily in one chapter, although they are also discussed in other chapters. Most readers would think that definitions should be presented in an initial chapter and information on how to measure adherence would be in a chapter soon after. But most of the definitions are in Chapter 5, and the term *concordance* is given a chapter of its own 3 chapters later. A third term, *adherence*, is defined and used earlier, in Chapter 3, but other chapters remain consistent with the book title, using the word *compliance*. Adherence measurement is covered in Chapter 5 but entails only a 5 page discussion. Advantages and disadvantages of each type of measurement and the use of various measures in research versus practice are not discussed. Various adherence improvement strategies could have been described in greater detail. The Directly Observed Therapy strategy that has shown success in improving adherence in tuberculosis and HIV/AIDS patients, especially in developing countries, is not even mentioned.

Comparison with Other Related Books: This book joins a crowded field of textbooks, guidebooks, and reference books on patient adherence. Fincham's *Taking Your Medicine: A Guide to Medication Regimens and Compliance for Patients and Caregivers* covers some of the same material but does not target health professionals. Compared with books that do target health professionals and students, such as O'Donohue and Levensky's *Promoting Treatment Adherence*, or more comprehensive reference books, such as Christensen's *Patient Adherence to Medical Treatment Regimens*, Fincham's text provides a resource of no lesser or greater quality than resources currently available.

Summary: For more than 50 years, strategies and interventions to improve patient nonadherence have been developed and tested, health professionals and students have been exposed to this issue in their coursework and clinical experiences, and thousands of articles and books have been written about it. Thus, it is troubling that over those same 50 years, rates of patient adherence have not improved much. Perhaps this book will motivate some health professionals and students to seriously gain ownership of the problem in order to better serve their patients.

Reviewer: Michael Montagne PhD, Senior Associate Dean, Massachusetts College of Pharmacy & Health Sciences, Boston, MA

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Cardiac Drug Therapy, 7th Edition

By M Gabriel Khan MD FRCP FACC. Published by Humana Press, Totowa, NJ, 2007. ISBN 978-1-58829-904-8. Clothbound, xiii + 420 pp (26 × 18.5 cm), \$99. www.humanapress.com

Therapeutic Area: This publication focuses on cardiac pharmacotherapy.

Audience: The intended audience for this text includes cardiologists, internists, and medical residents.

Purpose: The author's intent is to help physicians understand the pharmacotherapy of various diseases and the differences within cardiovascular drug classes that impact drug selection.

Content: A total of 22 chapters deal with cardiac pharmacotherapy. Ten chapters are organized according to disease (eg, hypertension), and 9 are organized according to drug class (eg, calcium-channel blockers). The drug therapy chapters that do not deal with controversies are organized like a pharmacology textbook. The disease state pharmacotherapy chapters that do not deal with controversies are organized like a therapeutics textbook.

The chapters on β -blockers, angiotensin-converting enzyme inhibitors, calcium-channel blockers, hypertension, heart failure, and dyslipidemias are followed immediately by chapters on controversies associated with these drugs (eg, "Calcium Channel Blocker Controversies") or diseases (eg, "Hypertension Controversies"). The 6 chapters devoted to clinical controversies are new to this edition and are structured as follows: a controversial statement is made (eg, "Beta-blockers are not a good initial choice for hypertension: true or false?"), followed by the author's opinion stated in a brief paragraph or bulleted text.

Two of the last 3 chapters focus on effects of drugs on pregnancy and lactation and effects of drug–drug interactions; the third discusses hallmark clinical trials and is a compilation of annotated bibliographies of trials that have most impacted the author.

Usability: The references, appropriately cited at the end of each chapter, are reasonably updated and predominantly use tertiary sources.

Highlights: Information is presented in sections about either a drug class (regardless of disease state) or disease state pharmacotherapy, which allows drug-related information to be presented in a variety of contexts. This helps reinforce concepts and allows for in-depth assessment.

Limitations: There are instances, especially in the chapters on clinical controversies, when the author is overly critical of people who have stated opinions that are different from his. In the controversy about whether β -blockers are a good initial choice for hypertension, he lambastes a meta-analysis for including "randomized controlled trials with poor methodology." However, the studies with which he disagrees actually were not of poor quality but used atenolol rather than other β -blockers. In the author's subsequent attempt to prove that β -blockers have clinically relevant pharmacologic differences, he cites heart failure studies showing differential effects. He attributes the differences to differences in the drugs rather than to the more likely scenario: differential recruitment of African Americans in the trials.

Comparison with Other Related Books or Products: This book has many useful observations and more drug information than most physician-written books. However, it is inferior to the Pharmacotherapy Self-Assessment Program, which is a module in cardiology for practicing pharmacists, published by the Accreditation Council for Pharmacy Education. *Cardiac Drug Therapy* is not as balanced in presentation, the

information is not as relevant for a pharmacy audience, and it was written by a single author rather than by content experts for each chapter.

Reviewer's Summary: This is an interesting book that provides decent clinical and clinical trial observations, but it does not offer a definite advantage over standard pharmacist-written cardiovascular textbooks.

Reviewer: C Michael White PharmD FCP FCCP, Associate Professor and Director, University of Connecticut/Hartford Hospital Evidence-based Practice Center, Hartford, CT

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BOOKS RECEIVED

Attention-Deficit/Hyperactivity Disorder in Children and Adults.

By Annette U Rickel PhD and Ronald T Brown PhD. Published by Hogrefe & Huber Publishers, Cambridge, MA 2007. ISBN 978-0-88937-322-8. Paperbound, viii + 80 pp. (25.5 × 18 cm), \$24.95. www.hhpub.com

Chemistry for Pharmacy Students: General, Organic and Natural Product Chemistry.

By Satyajit D Sarker and Lutfun Nahar. Published by John Wiley & Sons Ltd., West Sussex, England, 2007. ISBN 978-0-470-01781-4. Paperbound, xi + 383 pp. (24.5 × 17 cm), \$55. www.wiley.com

Clinical Handbook of Psychotropic Drugs for Children and Adolescents, 2nd Revised Edition.

By Kalyna Z Bezchlibnyk-Butler BSc(Pharm) FCSHP and Adil S Virani BSc(Pharm) PharmD(A) FCSHP. Published by Hogrefe & Huber Publishers, Cambridge, MA, 2007. ISBN 978-0-88937-309-9. Ringbound, 346 pp. (25.5 × 20 cm), \$69. www.hhpub.com

Clinical Malignant Hematology.

Edited by Mikkael A Sekeres MD MS, Matt E Kalaycio MD FACP, and Brian J Bolwell MD. Published by McGraw-Hill, New York, NY, 2007. ISBN 978-0-07-143650-2. Clothbound, xxii + 1201 pp. (28.5 × 22.5 cm), \$195. www.mcgraw-hillmedical.com

Drug Transporters: Molecular Characterization and Role in Drug Disposition.

Edited by Guofeng You PhD and Marilyn E Morris PhD. Published by John Wiley & Sons, Inc., Hoboken, NJ, 2007. ISBN 978-0-471-78491-3. Clothbound, xvi + 889 pp. (24 × 16 cm), \$150. www.wiley.com

Handbook of Pharmaceutical Public Policy.

Edited by Thomas R Fulda and Albert I Wertheimer PhD. Published by Pharmaceutical Products Press, an Imprint of The Haworth Press, Inc., Binghamton, NY, 2007. ISBN 978-0-7890-3059-7. Paperbound, xxii + 681 pp. (21.5 × 15.5 cm), \$89.95. www.HaworthPress.com

Homeopathic Prescribing Pocket Companion.

By Steven B Kayne PhD MBA LLM MSc DAgVetPharm FRPharmS FCPP FIPharmM FFHom MPS(NZ) FNZCP and Lee R Kayne PhD MRPharmS MFHom(Pharm). Published by Pharmaceutical Press, an Imprint of RPS Publishing, London, UK, 2007. ISBN 978-0-85369-697-1. Paperbound, ix + 189 pp. (18.5 × 10.5 cm), \$39.95. www.pharmpress.com

Marketing for Pharmacists, 2nd Edition.

By David A Holdford RPh MS PhD. Published by American Pharmacists Association, Washington, DC, 2007. ISBN 978-1-58212-106-2. Paperbound, xi + 333 pp. (23 × 15 cm), \$52. www.pharmacist.com

Peripheral Brain for the Pharmacist. Published by the American Pharmacists Association, Washington, DC, 2007. ISBN 978-1-58212-116-1. Features 29 durable laminated cards, drilled and shrink-wrapped with a metal ring (18.5 × 10 cm), \$9.95. www.pharmacist.com.

Arranges 30 core reference materials on lab coat pocket-sized, durable cards. Reference items include pediatric dosages, body surface area equations and nomograms, treatment guidelines, lab test values, drug–herb interactions, and more.

Pharmacy Compounding Accreditation: A How-To Manual.

Published by the American Pharmacists Association, Washington, DC, 2007. ISBN 978-1-58212-115-4. Paperbound, xiii + 144 pp. (28 × 21.5 cm), \$125. www.pharmacist.com

Spirituality in Patient Care: Why, How, When, and What, 2nd Edition. By Harold G Koenig MD. Published by Templeton Foundation Press, West Conshohocken, PA, 2007. ISBN 978-1-59947-116-7. Clothbound, 264 pp. (20.5 × 14 cm), \$21.95. www.templetonpress.org

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