

Book Reviews

PATHOGENESIS AND THERAPY OF DUCHENNE AND BECKER MUSCULAR DYSTROPHY. 1989. First edition. Edited by Byron A. Kakulas and Frank L. Mastaglia. Published by Raven Press. 287 pages.

This monograph is a summary of the proceedings of a "Workshop Symposium on the Etiology, Pathology, Diagnosis, and Possible Therapeutic Interventions Arising from the Recent Discoveries in the Molecular Genetics of the XP21.2 Muscular Dystrophies" (i.e., Duchenne and Becker dystrophies) held at Perth, W.A. in February, 1989.

The first section of this volume describes the molecular genetics of XP21.2 muscular dystrophies and the cell biology of dystrophin. In Sections 2 and 3 of the book, the contributors consider the pathogenesis and pathology of Duchenne and Becker muscular dystrophies as well as previous therapeutic trials and current research on interventional strategies for these disorders in the context of the recent discovery of dystrophin deficiency. In addition to the annotated discussions which follow each individuals section, Section 4 summarizes the "Round Table" discussions of the symposium. Major conclusions and recommendations for future research are highlighted in the final section (Section 5).

The editors of this volume have achieved an enviable compilation of current investigations and opinions of the leading world authorities in both clinical and basic molecular aspects of Duchenne and Becker dystrophies. The time constraints for individual presentations imposed by the workshop format is suited ideally to concise, clear formulation of current research interests of individual investigators. The Round Table discussions by the experts represent an invaluable aspect of this book which permit less structured discussion of the more speculative aspects of current research. As such, they provide glimpses of the possibilities for future directions of research which should provide an invaluable stimulus to other scientists and molecular geneticists using recombinant DNA technology to investigate neuromuscular disorders. Furthermore, these panel discussions serve to clarify major points for the clinical neurologist who may be involved in the care of such patients, but who may be less familiar with the complex aspects of molecular genetics. However, it is possible that minor difficulties may be experienced by more clinically-oriented readers of this volume. Thus, Section 1 requires such a high level of specialized knowledge of molecular genetics that it may be somewhat overwhelming for the more clinically-oriented reader. However, perseverance is well worthwhile, in that the later sections focus principally on the clinical applications of this genetic technology.

In summary, this volume is recommended highly. It is written well in a readable style and will undoubtedly appeal to a wide readership, which should include basic scientists and clinical neurologists as well as others who are involved in the care of patients with muscular dystrophy. It provides an excellent discussion of the current understanding of dystrophin deficiency,

which undoubtedly represents one of the major medical breakthroughs of this decade.

*Alan Hill
Vancouver, British Columbia*

THE MEDICAL INTERVIEW: THE THREE-FUNCTION APPROACH. 1991. By Steven A. Cohen-Cole. Published by Mosby Year Book Inc. 197 pages.

Communication with patients is an art form which has scientific objectives. It is the most important aspect of a physician's interaction with patients. Yet so often it is assumed that medical students and graduate clinical trainees are competent in their communication skills, and much more attention is paid to training of scientific aspects of diagnosis and treatment. It is well known that poor communication with patients is the most frequent underlying fault in complaints against physicians. Text books of this type help physicians to learn that a satisfied patient is as important as a medically improved patient.

The author of this brief text is a psychiatrist who points out that medical interview techniques can be considered in three separate and important categories namely data gathering, rapport and support of the patient's emotions, and counselling or education of patients regarding their illness. The work "doctor" derives from Latin usage, meaning "teacher". Teaching our patients about their illnesses generally does less harm, has fewer undesirable side effects and certainly costs less than most pharmacological forms of management.

Dr. Cohen-Coles' book outlines the three domains of medical interviewing, and provides structure and wording for questions relating to past medical history, family history, review of systems and mental status evaluation. Four chapters are of particular value in dealing with the emotional responses of patients, difficult interviews with histrionic patients, hostile patients, and other commonly encountered "difficult" patient interviews.

The target readership for this book is said to be the medical student. Some of the text is at a very fundamental level of communication, but other aspects are likely to be appreciated only by physicians who have been in practice for some time, for example sections on countertransference and patient motivation. Inevitably, the background of the author produces a text of interest to psychiatrists, and perhaps of some value in clinical neurology. Physicians in organ-specific or technical specialities are likely to be disappointed in the limited attention paid to medical interviewing techniques in their specialities.

Most undergraduate medical students will find a more concise and helpful guide to medical interview methods in the standard clinical skills textbooks. This book would be of greater value to junior residents in one of the clinical neurosciences. Physicians who have been in practice for a few years would undoubtedly benefit from reading this book, in helping them reflect on their own interviewing techniques, be they for estab-