FAMILY MEDICINE

BOOK AND MEDIA REVIEWS

medicines take particular notice. Downing argues that with the “Future of Family Medicine” report, the agenda of the specialty was redefined as standardized problem management rather than curing or promoting wholeness. He questions the roles of information management and “mastery,” medications, electronic records, and preventive medicine—not on their merits as individual biomedical tools but rather for what they have become as part of a system that seeks to bring all elements of health under comprehensive surveillance and control. In short, he argues that this vision of family medicine is an artificial system that “has displaced whatever natural systems we used to be part of.”

*Biohealth* will make you pause, reflect, and perhaps reconsider. Possibly you will reconsider the assumptions on which you base your notions of health and your recommendations to patients for testing and treatment. Possibly you will reconsider your reaction to the trends in society that identify medicine with technology and pills. And perhaps, as you teach learners about family medicine, you will reconsider what exactly it means to be a family doctor.

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**Geriatrics: A Resource Guide for Primary Care**

Melissa Stiles, MD

University of Wisconsin Department of Family Medicine, 2012, 12 pp. (print), 449 MB (file), FREE from iBooks Store, E-book: requires iBooks 2.0 or later on an iPad with iOS 5.0 or later.

*Geriatrics: A Resource Guide for Primary Care* is an electronic, interactive “book” that serves as an innovative means of introducing the reader to the most common geriatric topics seen in primary care. It covers geriatric assessment, polypharmacy, falls, dementia, delirium, and frailty, with links to additional resources and readings for those wishing to pursue more in-depth study. It also includes links to helpful tools for geriatric evaluation of such things as depression, mental status, balance and gait, hearing, and others.

*Geriatrics* uses embedded PowerPoint-style presentations (no audio), podcasts of “interviews” between the author and another physician (both with and without associated slides), as well as movies demonstrating key evaluation techniques and exercises. Given its outline format, topic coverage is basic unless the reader pursues the additional reading links. These links, however, prove quite exhaustive. Other strengths are that each chapter includes a “Goals and Objectives” section at the beginning, as well as a table of “Key Points” at the end. Chapters also include interactive quizzes to allow the reader to assess mastery of the topic and to determine which areas deserve further study. Overall, this book provides a sound and useful introduction to the effective practice of geriatric medicine.

While innovative as it is currently written, *Geriatrics*’ readability as well as its utility as an in-the-moment resource during clinical encounters would be greatly improved if it were a “stand alone” document, not requiring internet access to pursue links to additional readings and resources once downloaded onto the reader’s device. Another recommendation would be to include an effective index or search engine to allow for rapid location of pertinent information needed during a face-to-face patient encounter. Finally, a page-back function, particularly in the PowerPoint sections, would allow for important information to be more easily re-read.

This book is best used as an introduction to geriatrics for medical students and medical residents or for practicing physicians new to geriatrics. Geriatrics will be especially useful as a pre-clerkship or pre-rotation orientation before a planned geriatric experience. The price is definitely right, and the book itself is quickly read (although reading the linked material can prove quite time-consuming). Geriatrics should be a required resource for any educational experience in geriatrics.

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