Book reviews


This is a book of algorithms intended for the evaluation of either symptoms (such as urinary incontinence), clinical signs (such as renal mass), or clinical settings (such as acute renal failure). In the midst of topics on general urological problems are a number of sections appertaining to genitourinary medicine, including algorithms on urethritis, epididymitis, and certain specific sexually transmissible infections. These sections were unfortunately written by authors clearly lacking experience in the management of these conditions. This is demonstrated both by errors of fact but also, more tellingly, by an obvious lack of appreciation of certain basic principles. No mention is made of the importance of a properly taken sexual history, so that in the section on epididymitis the various aspects are divided according to age, whereas the real differentiating factor is recent sexual activity. Thus the algorithm suggests that patients under 20 years of age are not at risk for infection with Chlamydia trachomatis, but rather, should undergo scrotal exploration for suspected testicular torsion. An appreciable proportion of teenagers are sexually active, and therefore the possibility of infection with C trachomatis and other sexually transmissible organisms must be considered.

Other basic principles receive inadequate emphasis. For example, in the section on urethritis, the author writes "(the diagnosis of gonorrhoea) can be confirmed by appropriate culture," instead of must be confirmed by appropriate culture. In the treatment of herpes "topical steroids are contraindicated". This should read "(topical steroids are contraindicated)." A glaring omission, again in the section on urethritis, is the failure to mention the necessity for contact tracing. In the section on syphilis, a single dose of benzathine penicillin is proposed as adequate treatment for latent syphilis. The author also erroneously states that serological tests for syphilis will become negative after treatment. Failure to appreciate that continuing serological positivity is the norm may result in unnecessary repetition of treatment. Bearing in mind the inadequate treatment schedule advocated, however, this may be no bad thing!

Writing an algorithm on prostatitis is a thankless task in that there is little consensus on either the diagnosis or the management of this condition. That said, I must take exception to yet another author advocating prosthetic massage as part of treatment. No one would suggest that massage should be used as an adjunct in the treatment of urethritis or epididymo-orchitis, so why should the prostate gland be subjected to this unpleasant and degrading practice? Similarly, I cannot accept that radical transurethral resection is appropriate treatment of chronic prostatitis, particularly as many of these patients are young and may hope to father children in the future.

As to the rest of the book, there is coverage of a wide range of surgical and medical urology, most of which I would not presume to criticise. I was a little surprised that there was no algorithm on urinary tract infection in men. I would have included this subject before a section on Cushing's syndrome, which incidentally, there is a very poor explanation of how functional tests differentiate between the various causes of the syndrome.

In summary, I cannot recommend this book for anyone seeking information on the management of conditions related to genitourinary medicine.

G Scott


There has been continuous development, particularly in the methods of investigating, diagnosis, treatment, and management of urological patients. Some of the advances have been so fast that many feel they have fallen behind. The book represents an up to date experience and opinions and recommendations for the investigation and treatment of urological patients. The advice regarding the practical aspects is good and covers the topics systematically. The reproduced radiographs are generally good with a few exceptions.