and treatment of related communication deficits, as well as language, voice, and articulation, are discussed. A number of excellent illustrations serves to enhance understanding of complex anatomy and related surgical and dental procedures. The role of the speech/ language pathologist (S/LP) as counselor is also emphasized. The data relating to overall patient development and general communicative functioning are also of particular benefit.

Treating the patient with a cleft palate is a service which demands interaction by a variety of medical and educational specialists, including S/LPs, dentists, prosthodontists, psychologists, plastic surgeons, otolaryngologists, audiologists, and social workers. The authors of *Cleft Palate Speech* highlight the need for a team approach. Since the S/LP is often the case manager of cleft palate patients and many times must field questions from families about care primarily provided by those in other disciplines, he or she should be informed enough to make referrals as needed. Chapters 4–6 and 10 help the S/LP in this endeavor by giving information dealing with services which can be offered by other professionals, particularly plastic surgeons, otolaryngologists, and prosthodontists.

Working with patients who display disorders related to a cleft lip and palate, however, is an experience that only a limited number of S/LPs encounter. Therefore, *Cleft Palate Speech* should also be beneficial for S/LPs who do not work with these patients frequently, but are interested in the topic for review, update, and continuing education purposes. In addition, *Cleft Palate Speech* would be an excellent text for graduate training. This book may be the second-best option to hands-on experience, short of functioning in an area where there is access to extensive cleft palate care.

SUSAN FORSYTHE, M.A., C.C.C.-SP

Department of Otolaryngology and Communicative Disorders The Cleveland Clinic Foundation

Surgical Anatomy of the Heart, by Benson R. Wilcox and Robert H. Anderson, New York, Raven Press, 1985, 141 pp, \$55.00.

This extensively illustrated work is written by a congenital heart surgeon (Dr. Wilcox) and a pathologist (Dr. Anderson). The format is very effective. The photographs are extremely clear and illustrate surgical views as well as postmortem specimens. Along with each photograph is a line drawing in black and white where the salient anatomic features of the photograph are illustrated and carefully identified. This format makes the photographic anatomy extremely clear. The text is supplemental. However, *Surgical Anatomy of the Heart* would be quite a bit more useful if the clear illustrations of anatomic abnormalities were ac-

companied by similar illustrations detailing techniques of repair.

Although the segment entitled "Normal Anatomy" could be useful for planning some operations for acquired heart disease, the primary subject of the book is congenital heart disease. Even the segment dealing with coronary anatomy focuses on congenital abnormalities. Thus, the book is most useful for cardiac surgeons, practicing or in training, with an interest in congenital disease. Surgical Anatomy of the Heart can serve as a useful occasional reference for cardiologists, but will not be commonly used by non-surgeons.

BRUCE W. LYTLE, M.D.

Department of Thoracic and Cardiovascular Surgery The Cleveland Clinic Foundation

Orthopaedic Care of the Geriatric Patient, ed. by Thomas P. Sculco, St. Louis, CV Mosby, 1985, 408 pp, price not given.

The goal of this volume is to demonstrate how the aging process can be accompanied by changes specifically related to the musculoskeletal system and how these changes substantially affect the functional independence of the individual. As is correctly pointed out, this can often lead to great personal and socioeconomic costs. Dr. Sculco wishes to focus the reader's attention on the importance of a comprehensive treatment approach in the maintenance of functional independence and well being for aging patients.

The book is organized into four major sections. The first section deals with the general framework of the aging process into which the care of musculoskeletal maladies is to be placed. Aspects of rheumatologic, neurologic, and anesthetic management, as well as an emphasis on the role of psychological and social environmental effects due to musculoskeletal disease, are ably addressed. The second section of the book describes orthopedic diseases commonly affecting the elderly. The common diagnostic and therapeutic approaches used by the authors to manage musculoskeletal disorders reflect a high level of expertise. The chapters dealing with cervical spine disease, shoulder disease, and hip problems are particularly well done. The third section describes other diseases that have involved work from many disciplines and often are more specifically a problem for the aged. These chapters are clearly written and concise. The fourth section is about the role of support personnel in the successful management of musculoskeletal disorders. As the aged patient population becomes increasingly more functionally limited, the need for appropriate intervention to lessen the impact of such limitations (such as through external supports and orthotic devices) becomes more critical.

While the book does not fully describe each specialist's role in the management of specific problems, *Orthopaedic Care of the Geriatric Patient* will prove useful to orthopedists, rheumatologists, internists, general practitioners, and others involved in supporting services that deal with the aged population on a regular basis. The advantages of this well-organized, comprehensive treatment approach, as practiced at the Cornell University Medical Center and The Hospital for Special Surgery, becomes clear as one proceeds through the book. This reviewer hopes that Dr. Sculco will continue to expand this volume as knowledge of this subject increases.

BERNARD N. STULBERG, M.D.

Department of Orthopedic Surgery The Cleveland Clinic Foundation

Nutrition in Clinical Practice, by Marion Nestle, Greenbrae, Calif., Jones Medical Publications, 1985, 330 pp, \$16.95.

Nutrition in Clinical Practice was written for physicians, medical students, and other allied health professionals who have not taken formal courses in nutrition. The book, which is divided into six sections, covers a wide range of basic and applied topics. Section one reviews basic principles of nutrition. Energy balance and each of the major nutrient classes are discussed. The relationship of food to health is introduced in this section, followed by a brief discussion of dietary recommendations. Nutritional physiology is summarized in section two. Topics include digestion, absorption, and metabolism. The author also discusses the deleterious effects of starvation and illness-induced malnutrition. An overview of nutritional assessment and support are given in section three. Topics include assessment of nutritional status, estimation of nutritional needs, and methods of selection and administration of enteral and parenteral nutrition. Section four covers nutritional requirements and special nutritional problems throughout each stage of the human life cycle: pregnancy, infancy, adolescence, and aging. The role of nutrition in prevention and treatment of specific disease conditions is discussed in section five. The last section reviews the aspects of nutrition that concern consumers and discusses food and drug interactions, exercise, food additives, food toxins, supplements, and vegetarian diets.

The text is well organized, concise, easy to read, and simple to use. It is extensively indexed. The figures and tables are accurate and useful. However, the quantity and quality of the references vary. Certain chapters are referenced extensively while others have only a few sources noted. Although the author states that one of the benefits of this book is that it will help practitioners know when to refer patients to a dietitian, referral is only mentioned three times: for assessment of nutritional status, for nutritional assessment during infancy and childhood, and due to renal disease. The sections entitled "Counseling Recommendations" are, at best, general and do not translate the principles of nutrition science into applied dietary modifications.

Overall, *Nutrition in Clinical Practice* provides an excellent, timely overview of the role of nutrition in clinical practice. The book is an excellent, quick, desk-top reference for the general practitioner.

LAURA E. MATARESE, M.S., R.D. Department of General Surgery The Cleveland Clinic Foundation

Fluids and Electrolytes, by Joha P. Kokko and Richard L. Tannen, Philadelphia, WB Saunders, 1985, 878 pp, \$85.00.

The editors of this well-produced volume have done a fine job in putting together a cohesive account of fluid and electrolyte disorders. The book is for both nephrologists and clinicians in other specialties.

The text is divided into two sections. The first deals with specific electrolyte disorders, and the second with clinical situations. There has been an effort to minimize the overlap between these sections, but, probably inevitably, some repetition of material remains. The first chapter is a useful review of the most frequently encountered fluid and electrolyte disorders which may be revealed by the SMA-6. The remaining nine chapters of this section present excellent reviews of the disorders of potassium, sodium, water, acid-base balance, phosphate, magnesium, and calcium. A uniform and logical layout makes it easy to find relevant material. From the point of view of the practicing clinician, the directions for treatment of specific conditions are most clear and detailed in this section of the book. The second section contains 12 chapters dealing with alcohol-related disorders; renal disorders, including the transplanted kidney; and various other disorders (endocrine, drug-related, surgery, and trauma-related, for example). The book concludes with an overview of renal physiology. This section of the book has some very good chapters, particularly those on alcohol, renal failure and dialysis, acidosis, and starvation. The chapters about drug-induced disorders and the effects of surgery, trauma, and burns provide useful summaries. The protocols for total parenteral nutrition might have been better if expanded, since the brief treatment found in this text is not quite in keeping with the overall style of the book. In the portion of the text dealing with starvation, it would have been helpful to give some guidelines for the care of patients on hypocaloric diets who have cardiac and other diseases.