

BOOKS

Not much to criticise in this edition of Stockley's drug interactions

'Stockley's drug interactions', 6th edition, edited by Ivan H. Stockley. Pp vi+1080. Price £95.00. London: Pharmaceutical Press; 2002. ISBN 0 85369 504 0.

I sometimes wonder where we would be without Stockley's drug interactions. The sixth edition has just been published — 21 years after the first edition.

For hospital and community pharmacists this essential textbook is the automatic first port of call when questions arise about potential drug interactions and how to manage them. From a practical perspective, this issue has become more complex in recent years, largely due to advances in cytochrome P450 research and an enhanced capacity to predict interactions likely to occur with newly introduced drugs. Several recent serious safety issues involving drug interactions come to mind, eg, with bupropion, sildenafil, St John's Wort and terfenadine. To practise effectively, pharmacists need reliable and comprehensive information on drug interactions in an easy-to-use format.

The new edition of Stockley comprises over 2,500 monographs and for the first time is no longer written by Ivan Stockley alone. The publication has now been taken over by the Pharmaceutical Press and has a team of writers and editorial staff involved in its production. Retaining its familiar format, the book is organised as a series of individual drug-drug monographs under the headings clinical evidence, mechanism, importance and management. The introductory chapter gives an overview of the problem of drug interactions and a detailed discussion of the most common mechanisms, followed by 22 chapters covering interactions with specific drug classes (eg, anticoagulants and anticonvulsants). The short section entitled "Before using this book . . ." is worth reading if you are not familiar with previous editions.

The book is straightforward to use with a clear and well laid out index, which is essential for a text covering thousands of interactions. It is also up to date and covers many recently launched medicines. A range of drug synonyms have been used in the text and the index so that it can be used anywhere that English is understood. Monographs are well referenced, so primary literature can be sought if desired. A criticism noted for earlier editions of Stockley was that the advice given on clinical management of interactions was sometimes weak; this aspect has improved greatly over the years and the advice given is now relevant and practical.

I do not believe there is much to criticise about this edition of Stockley. For the next edition it might be worth considering the inclusion of "at a glance" tables summarising differences in the interaction profiles for agents within commonly used therapeutic classes (eg, selective serotonin reuptake

inhibitors, proton pump inhibitors and protease inhibitors). This would certainly be of value in medicines information departments.

For pharmacists, clinicians and other prescribers dealing with drug interaction problems, Stockley's drug interactions is an invaluable reference source, supporting the provision of evidence-based patient care in this rapidly changing area of practice. To that end, the launch of *e*-Stockley is also a welcome development.

Anne Lee

Logical layout, and useful for pharmacists involved in dermatology

'Handbook of systemic drug treatment in dermatology', by S. H. Wakelin. Pp 256. Price £29.95. London: Manson Publishing Ltd; 2002. ISBN 1 84076 013 3.

Although we tend to think of dermatological treatment as being mainly topical, a range of systemic treatments is now routinely used. Many of these, such as immunomodulators and retinoids, are associated with serious adverse effects and therefore require careful monitoring.

This book contains detailed monographs on 32 drugs or drug groups in alphabetical order. Each monograph covers mode of action, indications, presentation, dosage and suggested regimens, monitoring, contraindications, cautions, drug interactions, adverse effects and their management, patient information and use of the drug in special situations (eg, pregnancy and renal disease). In addition, separate chapters deal with prescribing in childhood, pregnancy and lactation, and hepatic and renal disease. Up-to-date references and a list of further reading are included with each monograph. Expert contributors are acknowledged but each monograph helpfully follows a standard format.

Some of the drugs listed do not have marketing authorisations in the United Kingdom for the uses described and in each case this is clearly stated. For these drugs the licensed indications in the relevant countries are listed and references are given.

THIS WEEK'S REVIEWERS

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This book is set out in a pleasing and logical way so that it would be easy to use in day-to-day practice. In this context, the sections on suggested regimens and patient information give particularly useful, practical guidance, rather than merely repeating cautionary statements. It would be useful to any pharmacist involved in the care of patients with dermatological diseases and would be a valuable reference source in any pharmacy library.

Given the pace of developments in dermatology, new and different systemic drugs are likely to be introduced in the short to medium term. We must hope that the author feels inspired to produce a second edition of the same quality and clarity in due course.

Christine Clark

Some pharmacy and industry input would make this a better buy

'The handbook of clinical trials and other research', by Alan Earl-Slater. Pp vi+352. Price £29.95. Oxford: Radcliffe Medical Press Ltd; 2002. ISBN 1 85775 485 9.

Is it a textbook, a reference book, a guidebook or a dictionary? With an alphabetical layout of topics followed by definitions, which are usually quite detailed, it must be a dictionary. This format is well suited to the main role of the book and links to related topics and definitions are provided in bold type at the end of each entry.

Those who, like me, came fresh to clinical trials and research with only the most basic knowledge of good manufacturing practice, find the plethora of acronyms, terminology, regulations and personnel overwhelming and so a book of definitions, roles and responsibilities is overdue — but is this the one we have been waiting for? The publication date is 2002 so I expected to find definitions of the National Institute for Clinical Excellence (yes), the governance arrangements for NHS research ethics committees (GAFREC) (no) and details of the European Union Clinical Trial Directive (yes, but).

Here is the main fault with this book — the description of this important document relates mostly to its effect on ethical and National Health Service issues and hardly at all to those impacting on the pharmaceutical industry in relation to good manufacturing practice, the approval of phase I studies and the abolition of the DDX and CTX process (definitions of these terms are also missing).

I searched in vain for a definition of clinical trials pharmacist or their role in trial preparation or in drug accountability. Definitions of study site co-ordinator and research nurse — the personnel who actually deal with the patients or volunteers — were also missing, along with the current buzzword "fourth hurdle".

This book will disappoint industry personnel — pharmacists will be outraged. It is worth putting on your bookshelf for reference, but a second edition, with industry and pharmacy input, would make this a much better buy.

Alan George