

BOOKS

Highly readable source of information on psoriasis

'Psoriasis — the at your fingertips guide' (2nd edition), by Tim Mitchell and Rebecca Penzer. Pp xi+158. Price £17.99. London: Class Publishing Ltd; 2005. ISBN 1 85959 117 5

Psoriasis is a relatively common condition that affects 2 to 3 per cent of the population. It can have a profound psychological and physical impact upon the sufferer. The word psoriasis comes from the Greek word *psora*, which means "to itch", a rather curious origin given that most textbooks on psoriasis suggest that the condition does not itch — a view which is generally not shared by many sufferers.

This book, now in its second edition, has a structured and highly readable format. Each of the 10 chapters consists of a series of questions followed by answers which have been provided by the authors. The book begins with an introduction to the condition that helps to dispel some of the myths which have grown up around the disease. Psoriasis is not contagious or related to diet and is certainly not an allergic condition. However, there is a genetic component to the disease, which means that children whose parents have the condition might inherit it.

Psoriasis can exist in several different forms and the second chapter describes each of these in a clear and succinct manner. One criticism I would make about this section is the lack of any colour plates or illustrations which would be of benefit to any pharmacists wishing to learn how to recognise the various forms of the disease. The third chapter discusses an important aspect of the disease, namely, the factors which can trigger or exacerbate the condition. Pharmacists would be wise to note the range of medicines that can worsen a patient's psoriasis.

Chapters 4 and 5 would probably be of greatest interest to pharmacists since both describe treatments comprehensively. The authors point to a survey of psoriasis sufferers which revealed that 80 per cent did not consult a GP about their condition over a period of a year. This provides pharmacists with an excellent opportunity to take on an active role in helping to treat patients with this condition. Chapter 5 discusses second-line treatments for psoriasis such as light therapy, methotrexate and ciclosporin, as well as treatments for psoriatic arthropathy. In chapter 6, the authors consider the role of complemen-

tary therapies such as aromatherapy, Chinese herbs and the value of visits to the Dead Sea.

In chapter 8 the psychological impact of the disease and impact on friends and family are considered in some detail. This chapter reveals how psoriasis is, for many sufferers, much more than just a cosmetic problem. It affects personal relationships, and feelings of embarrassment and isolation are experienced by many sufferers.

The book finishes with a useful glossary and three appendices listing contact details for groups such as the Psoriasis Association, publications for patients and health care professionals, and emollients available over the counter and their relative greasiness and cost.

Overall, I think that this book is well laid out and information can be easily accessed. The authors clearly have a great deal of practical knowledge about psoriasis and I would have no hesitation in recommending the book to pharmacists who wish to take a more proactive role in helping patients with psoriasis get the best out of their treatments.

Rod Tucker

This is a comprehensive examination of good laboratory practice

'Good laboratory practice: the why and the how' (2nd edition), by Jurg P. Seiler. Pp xi+436. Price £103.14. Berlin: Springer Verlag; 2005. ISBN 3 54025 348 3

In this book, the author initially rehearses philosophical concepts and attributes of good laboratory practice. These are all useful in the general quality of laboratory output, although some may not be relevant in qualifying for good laboratory practice recognition. This second edition reveals the origin of the 2004 guidelines by the EU Committee for Proprietary Medicinal Products on sample contamination.

The "four pillars" of GLP are totally committed management, independent internal assurance of analytical processes, absolute control for the trial's study director and compliance with national monitoring. There is a salutary example of the positive value of an audit trail in satisfactorily resolving an otherwise trial-threatening aberrant observation. One minor, but persistent, irritation is the frequent use of the phrase "precision and reproducibility" without apparently recognising that, in international statistical usage, the former subsumes the latter.

The second part of the book provides comprehensive guidance and working details: definitions, responsibilities, facilities, standard operating procedures, reporting and archiving. The final two parts of the book address implementation, with helpful examples, and how compliance may be maintained.

This book has relatively few charts, and no graphics or illustrations to lighten the text. The literary style may strike some readers as

wordy, didactic even, but it repays closer study.

The book delivers a comprehensive examination of the critically important regimen of GLP. For laboratory managers it is a "must" for initiating or enhancing laboratory contribution to clinical and environmental studies.

This book is not, and does not intend to be, a vade mecum for laboratory accreditation and deals neither with proficiency testing nor analytical quality assurance. Nevertheless, it does distinguish those equally important areas and contrasts them with the protocol and procedures required for national GLP compliance.

Geoffrey Phillips

A helpful read on the therapeutic management of hypertension

'Best medicine — hypertension: angiotensin receptor blockers', by Bryan Williams, Mark Davis and George Kassianos. Pp 320. Price £13.95. Oxfordshire: CSF Medical Communications Ltd; 2005. ISBN 9781905064991

This book is aimed at patients with hypertension and health care professionals who require an update on its current therapeutic management. The book is nicely illustrated and well referenced. Each chapter contains summaries and key points are highlighted on each page. It is a helpful read for pharmacists who are contemplating development of clinical services for hypertensive patients.

The book opens with an overview covering the epidemiology and aetiology of the condition together with diagnostic criteria according to current clinical guidelines. This information is then translated in an abbreviated section for the lay reader. The next chapter provides a brief overview of the current treatment options for hypertension and, again, there is a section directed towards patients although this is situated towards the end of the book.

The bulk of the text, not surprisingly, focuses on the seven angiotensin 2 receptor antagonists available in the UK. Each chapter follows the same format and, as a result, is slightly repetitive. Although a glossary is available, this book is likely to be challenging read for most patients. All available clinical trial data (phase I to phase IV) are examined together with tables itemising this information; for losartan alone this constitutes 27 pages of tables. It may have been more expedient just to focus on head-to-head trials since the sections on morbidity and mortality for these are undoubtedly valuable and guide the reader to the place in therapy of the individual agents.

The last section of the book concentrates on methods to improve clinical practice, with regard to diagnosis and effective treatment. It has an accompanying patient section.

Fiona Reid

Ron Tucker is a pharmacist in Hull with a special interest in dermatology

Geoffrey Phillips is a pharmaceutical consultant, honorary secretary of the Joint Pharmaceutical Analysis Group and a freelance writer

Fiona Reid is a primary care pharmacist who runs cardiovascular risk reduction clinics in Edinburgh