

Zeitschrift: Acta Tropica
Herausgeber: Schweizerisches Tropeninstitut (Basel)
Band: 44 (1987)
Heft: 3

Buchbesprechung: Review

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Review

K. S. WARREN, A. A. F. MAHMOUD: **Geographic Medicine for the Practitioner.** 2nd edition. Springer-Verlag, Berlin/Heidelberg/New York/Tokyo 1985, XI, 212 pp. Hard cover DM 120.-. ISBN 3-540-96143-7.

About twelve million travellers from industrialized countries are visiting tropical areas every year, and several millions of visitors or immigrants come from developing countries to Europe or North America. Physicians in the developed countries can therefore be faced with the problems of diagnosis and treatment of tropical diseases at any moment.

Warren and Mahmoud, the editors of one of the most renowned textbooks of Tropical Medicine (Warren and Mahmoud: Tropical and Geographical Medicine, McGraw-Hill 1984), offer in their "Geographical Medicine for the Practitioner" a short, easy to read overview of some of the most relevant imported diseases. They give for each disease an introduction to the life cycle of the pathogenic agent and to the epidemiology, describe the most important symptoms, give a plan of investigations with a simple flow-sheet and finally give recommendations for treatment and prevention. In the first chapter some advice to travellers for the prevention of exotic diseases is given.

However, the book does not deal with some of the most important problems of patients returning from the tropics, i. e. the investigation and management of diarrhoea, of fever, of an eosinophilia, of venereal diseases or mycotic diseases. In fact, the reader needs to have already a presumptive diagnosis which can be confirmed by using the diagnostic flow-sheets. Good basic knowledge in tropical medicine is therefore required for the efficient use of the book.

Some of the therapeutic recommendations are not in line with standard treatments generally used: In leprosy, the book advocates Dapson monotherapy instead of multiple drug therapy (p. 41), in tuberculosis, treatment should always start with a combination of three or four and not only with two drugs (p. 57), in leishmaniasis resistant to antimonials, Pentamidine should be considered as an alternative to Amphotericine B (p. 85), and in toxocariasis, treatment with Thiabendazole often gives satisfactory results (p. 121).

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