drug dealers (Raul) and thugs (at least two, with an argument that can be made to include one of the nurses), assisting financiers (Fitzhugh) available for romantic involvement, and patients, of course. Do the patients really receive the ''best'' care, or are they victims of the new system? Are patient records really altered, and why are there empty beds in which patients are supposedly assigned? Who is Dr. Miltown, anyway, and what does all of this have to do with Willie Sutton? When did nurses, technicians, clerks, and secretaries start treating physicians with open disrespect? Are there hospitals that really operate by Law IX (*the only good admission is a dead admission*)?

No one likes to hear about ''bad apples.'' Although physicians are human, we like to envision ourselves as something more than ordinary. Still, there will always be a percentage of physicians who are swayed as easily as anyone else by greed and vice (*e.g.*, drugs, power). Reading about the decay of one or more ''brethren'' is very uncomfortable, engendering distaste and dislike. These emotions make finishing this book both difficult and necessary. The sense of justice at the end is incomplete, but very realistic. The message before the first page, *medicine is a trust, not a holding company,* is proven to be true.

Sutton's Law is worthwhile reading for anyone, but especially the medically oriented. It is the type of book that would be particularly useful to relieve the tedium while traveling during vacation or during trips to and from meetings. The chapters are short; the action is mixed. It is medically accurate, without obvious error in terminology or description. The only down-sides to the book are minor grammatical errors and the occasional repeating of words (*e.g.*, that that, and what what). These are annoying but easily overlooked as the reader becomes involved in the story. It is hoped, however, that these will be corrected before the final printing. The entertainment provided is well worth the cover price.

Terrence D. Bogard, M.D.
Associate Professor of Anesthesiology
Department of Anesthesiology
Wake Forest University School of Medicine
Winston-Salem, North Carolina

Textbook of Pain on CD-ROM. Third Edition. Edited by Patrick D. Wall and Ronald Melzack. New York, Churchhill Livingstone, 1997. Price: $195.00.

The *Textbook of Pain,* editors Patrick Wall and Ronald Melzack, is one of a growing number of textbooks available on interactive CD-ROM. Because the text itself has been reviewed previously, this critique will focus exclusively on the Churchill Livingstone interactive software package and its usefulness for the pain practitioner. I should preface the review by stating that I am neither a novice nor an expert in the use of computers. I am, most likely, representative of most pain practitioners who rely on multiple software packages to accomplish daily administrative tasks but who have precious little time to sit in front of a computer and obtain ''guru'' status in their computer knowledge base.

Following the user-guide instructions, I found the installation process to be very straightforward and easy. For Windows-based personal computers, the minimum system configuration needed to use the CD-ROM is a 386, Intel-compatible processor, (although a 486 processor is strongly recommended), 4 MB RAM with at least a 4-MB swap file, Microsoft Windows 3.1 or higher, file sharing, 5 MB free hard disk space, and a CD-ROM drive. For the Macintosh, the minimum system configuration requires a $6\times\times20$ processor or higher, 4 MB RAM (8 MB recommended), System 7 or higher, 5 MB free fixed-disk drive space, and a CD-ROM drive.

The format is identical to the other CD-ROM texts published by Churchill Livingstone, for example *Miller's Anesthesia,* fourth edition. Included in the interactive software are the *Textbook of Pain* and a MEDLINE database. The MEDLINE database includes a listing of all the references cited in the text and a substantial subset of articles pertinent to the pain field from the MEDLINE database produced by the National Library of Medicine. This database also contains a listing of all articles from key journals in the pain field for the past 5 years. Therefore, when reading the text, reference citations can be double clicked to display title, author, journal, and date. If a MEDLINE icon is present above the reference, clicking the icon opens the MEDLINE database to display the full abstract and details of the journal article, including a MEDLINE identification number. Unfortunately, the number of available abstracts was fewer than I would have anticipated. For example, in Chapter 1, only 185 of 305 references are linked to MEDLINE and have an available abstract. Inevitably, it seemed as though the abstracts that I was particularly interested in were unavailable.

Having a MEDLINE resource with only articles pertinent to pain is an advantage, however this CD-ROM only contains articles current to the end of 1996, limiting its function as a consolidated pain reference database. Those of us who perform regular literature searches are often in need of the most current articles, making a dated MEDLINE database of limited usefulness.

The text and MEDLINE are equipped with a powerful search engine called the ''query'' function. Using the query function, key words, authors, titles of sections, among other things, can be retrieved. The query function has a bit of a learning curve, however. For example, if interested in finding information about a multiword topic, *e.g.*, *cervical cancer,* typing in these two words will yield 23 ''hits.'' However, a hit is any paragraph that contains both the word *cervical* and the word *cancer,* highlighting multiple sections that discuss cancer in conjunction with cervical nerve injury, cervical node biopsy, cervical spine pathology, among others. To find text that specifically discusses cervical cancer necessitates entry of the text in quotes. The search engine will then yield hits with the desired phrase. Although it could be argued that this method of searching is becoming standard, the User Guide and tutorial lacks discussion of this issue, whereas many other basic computer skills are discussed in great detail.

The software also has the capability of allowing one to ''highlight,'' ''bookmark,'' or make notes in any area of the text, customizing the text in much the same way one would with a conventional textbook. The query function can also be used within in this customized text, allowing one to narrow the search or return to these particular pre-marked sections very easily.

Customer service for this product was poor. Calls placed on multiple occasions provided only an answering machine. Several days after leaving a message, the service call was returned, but this was clearly not the prompt customer service that I have experienced with other software vendors.

Is the *Textbook of Pain Interactive CD-ROM* worth purchasing? I believe the digital CD-ROM format provides several advantages over

REVIEWS OF EDUCATIONAL MATERIAL

the paper version. First, portability is much more convenient. Carrying the CD-ROM between computers is far less burdensome than lugging the heavy, 1,500-page text. Second, the robust search engine provides virtually instant access to every word within the text. Third, accessing reference by mouse clicks is much easier and faster than thumbing though the pages to the back of the chapter. However, I am certain that this CD-ROM will not replace the *Textbook of Pain* on my bookshelf at work. The CD-ROM version is limited by the amount of information that can be displayed on the computer screen. Despite poor portability, I also still enjoy the reverence inspired by the crisp, clean pages of a reputable textbook. The limited MEDLINE function will only be used for viewing references within the text because it is far less robust that an on-line MEDLINE link. Finally, poor customer service bedevils a sometimes nonintuitive user interface. Everyone knows how to use a book.

Dawn J. Schell, M.D.
Director
University of Maryland Pain Center
Baltimore, Maryland 21201