## **Drug Treatment Protocols.**

Albrant DH, editor-in-chief. American Pharmaceutical Association, Washington, DC, 1999. Hardcover, 457 pages. US\$100.

This book offers 44 disease-based treatment algorithms in an easy-to-use format that can be used for quick reference. The protocols are intended for use by pharmacists and other health-care providers in decisions related to drug therapy. Each algorithm is presented in a decision-tree format and is intended as a general guideline. Each decision point is accompanied by explanatory text, including some tables listing drug options. Most of the content is probably most applicable to community practice. These protocols were initially published quarterly between 1996 and 1998,<sup>1</sup> and the intent of this book is to collate them for easy use.

The algorithms cover diseases related to the cardiovascular, endocrine and metabolic, gastrointestinal, and respiratory systems, as well as infectious, pediatric, and psychiatric problems. In addition, there is a section on selftreatable conditions and one on complications related to venous access devices.

The guide is practical, but there are some limitations to its use. In some sections, such as the one on infectious diseases, very few conditions are covered. Also, because information related to therapy can change quickly, some components may already need to be updated. For example, for hypertension, the recommendations are primarily based on the sixth report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (known as JNC-VI).2 Yet information from newer trials (such as the UK Prospective Diabetes Study<sup>3</sup>) should also be considered by practitioners making therapy decisions. The protocols usually recommend treatment by drug class, leaving the practitioner to determine the basis for selection of particular agents. In some of the self-care sections, herbal therapies are included, supported primarily with textbook references. It would be useful to state the level of evidence for these recommendations. In using this guide, the practitioner will also have to consider the difference in availability of some drugs in Canada and the United States. With respect to laboratory parameters, imperial units (such as milligrams per decilitre) are used without conversions to SI units (such as millimoles per litre).

Overall, this is a well-laid-out, easy-to-use reference that would be a useful guide for community practitioners. Hospital pharmacists working within ambulatory and outpatient clinics will also find it helpful. Students and residents may find this a quick review of treatment for common conditions. With the



inclusion of more protocols in a future edition, this book has the potential to become a more extensive guide for pharmacists. However, at present, *Therapeutic Choices*<sup>4</sup> is probably a more comprehensive reference, given its more complete coverage of disease conditions and drug therapy.

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## References

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- 4. Gray J, editor-in-chief. *Therapeutic choices*. Ottawa (ON): Canadian Pharmacists Association; 1998.