

Diarrhoea and constipation in geriatric practice

Ed: Ratnaïke RN

Cambridge University Press, The Edinburgh Building, Shaftesbury Road, Cambridge CB2 2RU, United Kingdom
£33.95, pp 236, ISBN 0 521 65388 6

This book was written by a multidisciplinary group of health care workers, including a gastroenterologist, endocrinologist, radiologist, nurse specialist, and geriatricians. The readership targeted is primarily geriatricians, general practitioners, and other health professionals involved in the care of the elderly. It is divided into five parts: defences of the ageing gastrointestinal tract, diarrhoea, non-infectious clinical entities, constipation, and perspectives of altered bowel function.

The first section includes chapters on the non-immunological and immunological defences of the ageing gastrointestinal tract, which are well written. Potential changes in the defence mechanisms of the normal ageing gastrointestinal tract under different pathological/altered physiological states are also highlighted.

The bulk of the book focuses on diarrhoea and different medical conditions presenting with diarrhoea. Several of the chapters, however, are written with a focus on internal medicine rather than geriatric medicine specifically. The authors fail to highlight the unique features of presentation, diagnostic challenges, and therapeutic difficulties in the

elderly. This may be related to a paucity of knowledge and studies in the area.

One unique inclusion in the section on diarrhoea is the issue of nutrition and nursing care for elderly patients with diarrhoea and constipation. The authors highlight the importance of maintaining nutritional balance to avoid complications in elderly patients.

The chapters on constipation serve as an overview of the problem in the elderly. This section is written with a practical approach, containing little in terms of theories or electrophysiology. There is little current research in the area and this is reflected in the references. Overall, however, this book is well written and is particularly valuable for family physicians or general physicians with a special interest in elderly care.

C Lum, FRACP, FHKAM (Medicine)
Medical and Geriatrics Unit
Shatin Hospital
A Kung Kok Street
Ma On Shan, Shatin
Hong Kong

Management of vitreo-retinal disease: a surgical approach

By: Chignell AH, Wong D

Springer-Verlag London Limited, Sweetapple House, Catteshall Road, Godalming, Surrey GU7 3DJ, United Kingdom
HK\$624.00, pp 200, ISBN 3 540 76082 2

Although described early in ophthalmic literature, vitreo-retinal diseases have only recently evolved as treatable conditions due to the development of sophisticated technology. The field of vitreo-retinal surgery is a specialty that is growing day by day; thus, ophthalmologists are required to keep abreast of developments. While earlier it was an area into which few dared to venture, it is now expected that even an ophthalmologist fresh out of training be able to diagnose most and treat at least a few retinal diseases.

Consequently, one is always seeking a textbook that is concise, gives sufficient basic practical knowledge, and at the same time provides a stimulus for more detailed reading.

Management of Vitreo-retinal Disease: A Surgical Approach meets most of the previous requirements. As the

authors state in the preface, it is intended not only as a guide for ophthalmologists in training, but also as a reference for senior ophthalmologists and paramedical personnel who are involved in direct patient care. It begins with introductory chapters on anatomy relevant to the retinal surgeon and techniques for retinal examinations. A few notes on special investigations have also been made. The next few chapters concentrate on rhegmatogenous retinal detachment—its pathogenesis, prophylaxis, choice of management methods and their complications, and reasons for surgical failure. The section on conventional buckling surgery is fairly detailed as is required for the target audience. The final group of chapters is on pars plana vitrectomy and covers most of the traditional and a few of the newer indications and techniques. The book concludes with a bibliography of suggested reading.

The book's size is convenient and the text is presented in a format that is easy to read with highlighted inserts emphasising points of special importance. The line diagrams, flowcharts, and photographs provide accurate descriptions of the relevant points. The illustrations by Tarrant are, as always, a feast for the eye. Although there are the few inevitable typographical errors, the language is simple, scientific, and conveys the message clearly. Finally, there are a few controversial points, but as mentioned by the authors, the techniques emphasised are those that they favour.

This book is recommended as a guide for all trainees and junior ophthalmologists to stimulate their interest in the ever-expanding and fascinating field of vitreo-retinal surgery.

M Bhende
Department of Vitreoretinal Surgery
Medical Research Foundation
Chennai
India

Answers to CME Programme ***Hong Kong Medical Journal*** **February 2002 issue**

HKMJ 2002;8:9-12

A. Diagnosing deep vein thrombosis in the lower extremity: correlation of clinical and duplex scan findings

- | | | | | | |
|---|---------|----------|----------|---------|----------|
| 1 | a. True | b. True | c. False | d. True | e. False |
| 2 | a. True | b. False | c. False | d. True | e. False |

HKMJ 2002;8:26-32

B. Accelerated atherosclerosis in patients with systemic lupus erythematosus: a review of the causes and possible prevention

- | | | | | |
|---|---------|----------|----------|----------|
| 1 | a. True | b. False | c. False | d. False |
| 2 | a. True | b. True | c. True | d. True |
| 3 | a. True | b. False | c. True | d. True |
| 4 | a. True | b. True | c. False | d. True |

Constipation and Diarrhea, What's the Connection? Constipation is one of the most common digestive issues in the United States, affecting roughly 42 million people annually. Diarrhea is similarly prevalent with nearly 180 million cases occurring each year. While they are often independent of the other, that's not always the case. Constipation is defined as less than three bowel movements per week. Common causes include a poor diet (lack of fiber in particular), high-stress levels, routine changes, dehydration, certain medications, and pregnancy. If you're dealing with constipation, you might want to start studying Diarrhea and Constipation. Learn vocabulary, terms and more with flashcards, games and other study tools.

Functional causes of constipation in kids? More common than organic causes; if a child does not want to defecate, they tighten the external anal sphincter by squeezing their gluteal muscles, this can push faeces higher and temporarily reduce the urge to defecate. If the child does this repeatedly, the rectum stretches to accommodate the retained faeces and propelling power of the rectum is reduced. Constipation and, to a lesser extent, diarrhoea, are not uncommon in the elderly and are frequently due to nonorganic causes. Despite this, disturbances in bowel habit always warrant the consideration of possible organic causes. Carcinoma of the colon and endocrine causes are frequently overlooked and rectal examination is mandatory in all patients to exclude rectal carcinoma and faecal impaction. Rectal bleeding, of course, is as alarming a symptom in the elderly as it is in younger people.

ABSTRACT Hong Kong Med J 2002;8:155 | Number 2, April 2002 BOOK REVIEW Diarrhoea and constipation in geriatric practice C Lum Medical and Geriatrics Unit, Shatin Hospital, A Kung Kok Street, Ma On Shan. Medical and Geriatrics Unit, Shatin Hospital, A Kung Kok Street, Ma On Shan, Shatin, Hong Kong. Full paper in PDF. No abstract available. View this abstract indexed in MEDLINE: Copyright © 2020 Hong Kong Academy of Medicine. All rights reserved, unless otherwise noted. Chrome and Firefox browsers Recommended. Journal Home. FIND ISSUES >.