

management of older adults with neuromusculoskeletal conditions. A few of the chapters may be of interest to other health care professionals who work with older adults or who are interested in the management of these people from a chiropractic perspective.

The textbook is divided into three main sections of basic science, neuromusculoskeletal conditions, and prevention and health promotion. Each chapter is well organised into objectives and introduction, followed by the main content of the chapter, a summary or conclusion, and study questions. Interspersed throughout the chapters are clinical notes and useful, simple figures and tables. Much of the information that is provided on the management of older people, however, is based on clinical experience.

The first section on the basic science provides a simple summary of the physical and functional changes that occur with ageing. Unfortunately the psychosocial issues associated with ageing, which are important to the health care management of older adults, are lost at the back of the book.

The second section, which focuses on neuromusculoskeletal conditions, provides separate chapters for the topics of osteoporosis and '*Managing geriatric spine patients*'. The title of the latter chapter is highlighted here for a number of reasons: first, since the textbook is a resource for people in the chiropractic field, a significant amount of time is spent focusing on the spine; second, within this chapter and the one on osteoporosis, there is a mention of high velocity and low amplitude manipulation, which is not usually seen as a conservative form of management; third, it is disappointing to see that the title is not in 'people-first' language. The manner in which we, as health care professionals, describe the people we see reflects the way we think about them. We can use people-first language, for example, by describing clients as older people who have spinal disorders. This reflects a more respectful, sensitive way of referring to the 'geriatric spine patient' and should be adopted by all health care professionals. The remaining chapters in this section deal

with common muscular disorders, upper and lower extremity conditions, and provide an overview of each condition and a summary of possible management strategies. The chapter on upper extremity conditions provides more detailed descriptions of specific manual treatment techniques.

The third section provides information on prevention and health promotion. One of the most useful chapters of the book includes the presentation of a multitude of tools for the comprehensive health assessment of older adults. The descriptions of several of the instruments include reliability testing results and accepted cut-off scores or normal values to help with their interpretation. The following chapter includes assessment of multidisciplinary risk factors for general health problems such as cardiovascular disease, osteoporosis, and depression with sections on 'routine' interventions for older people, including nutritional and pharmacological strategies, smoking cessation, and exercise. The penultimate chapter of the book includes an overview of physical activity and ageing as well as the role of, the effects of, and the guidelines for exercise for the older population. This chapter also offers some examples of exercises for different purposes.

Overall, the textbook is well written and well presented. It provides a comprehensive discussion on the management of older adults with neuromusculoskeletal conditions from the chiropractic point of view. Although the book covers a broad scope of issues, it does not provide adequate depth in many areas. Consequently, this textbook should only be considered as a basic resource for students and clinicians. To more mainstream health care professionals, it may be of passing interest.

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## Ward ethics: dilemmas for medical students and doctors in training

Ed: Kushner TK, Thomasma DC

Cambridge University Press, The Edinburgh Building, Shaftesbury Road, Cambridge CB2 2RU, United Kingdom

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Nowadays, when the behaviour and integrity of doctors are being challenged and judged in the media, there are increasing demands for a higher standard of medical practice both from the general public and within the profession. With the advances in information technology, the public

has ready access to medical materials that were not available in the past. Hence, the expectations for doctors from patients and their relatives are heightened. Together with the uncertainty of their own career prospects, medical students and junior doctors are under extreme pressure to perform

and achieve results. The stress often leads to compromises in decision making and doctors are often not well equipped to face the new challenges.

With limited personal and life experience, medical students and junior doctors are 'thrown in at the deep end'. They face many distressing and difficult dilemmas in the practice of clinical medicine and are often ill prepared to deal with these situations. *Ward Ethics* is an unusual book. It aims to provide a framework for the 'ethics apprenticeship' that is neglected in the traditional medical curriculum. To help students and trainees to direct their thinking in tackling these emotional hurdles, more than 80 cases are presented. All cases are real-life scenarios covering the many difficult dilemmas faced by medical students and trainees. The topics include the responsibility of informing, blaming the patients, deliberate deception, physical and sexual abuse, conflict of interest, and covering up. All cases are common in everyday clinical practice. Examples include "Omit the mis-take", "You idiot! What are you doing in medical school?" and "Should I accept drug company goodies?" To help readers to deal with these situations, a team of international experts provide comments on these cases. The

discussion is not structured to provide definite answers. Rather, it aims to suggest various options that may be helpful to the readers in dealing with these distressing situations. At the end of each section, there are some stimulating questions to stir the conscience. This book is not intended to be used as a textbook. Instead, it should interact with the personal experience of the readers. The book will help readers to raise their awareness and to develop their own decision-making processes.

Many cases from the book sound familiar to me. I wish I had had access to a similar book to guide me at the time when I had to deal with these difficult, and sometimes unpleasant, situations. No doubt I would have made some wiser decisions. *Ward Ethics* will not help students to get a distinction in an examination, but it will prepare them to better face the challenges of real-life clinical practice.

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## Answers to CME Programme *Hong Kong Medical Journal* October 2002 issue

HKMJ 2002;8:318-21

### I. Prognosis of patients with ventricular fibrillation in out-of-hospital cardiac arrest in Hong Kong: prospective study

A	1. False	2. True	3. False	4. True	5. False
B	1. True	2. False	3. False	4. True	5. False
C	1. True	2. True	3. False	4. False	5. True

HKMJ 2002;8:354-8

### II. Sudden unexpected death in epilepsy

A	1. True	2. False	3. True	4. True	5. False
B	1. False	2. True	3. True	4. False	5. True
C	1. True	2. False	3. True	4. True	5. False