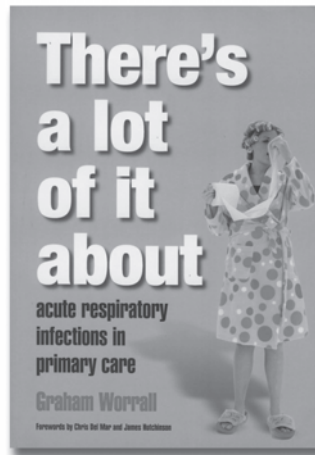


## Better care for respiratory infections

**There's a lot of it about: acute respiratory infections in primary care.** Graham Worrall. Oxford: Radcliffe Publishing, 2006 (136 pp, \$54.34). ISBN 1 84619 084 3.

**ALTHOUGH THERE APPEARS** to have been a decline in attendance to general practitioners in Australia for acute respiratory infections (ARIs), they still account for close to 10% of the GP's workload. The evidence base for their management has never been better defined and yet, given recent research and prescribing patterns, many GPs either find it difficult to, or do not, apply this evidence in practice.

Worrall does not waste any time on trying to distinguish between upper and lower respiratory tract infections but discusses each condition in a separate chapter, starting with "The common cold" and ending with "Bronchiolitis". Each chapter is a concise summary of the available literature and, despite now being an academic in Canada after many years as a GP in the United Kingdom, he limits the number of references he uses. However, as succinct as he may be in conveying the evidence in the text, it will be the summary boxes "Epidemiology and aetiology", "Clinical course and diagnosis" and "Treatment" that many readers will be drawn to. This is a pity because a real understanding of the topic can only be drawn from the studies



themselves and a discussion of their strengths and weaknesses; something the author does very well. The chapter on croup demonstrates this; summary boxes provide simple treatment details, but the text highlights the need for primary care-based randomised controlled trials to determine the best form of management for mild and moderate croup in the community.

The final three chapters highlight the importance of clinical assessment and the lack of decision rules for the majority of ARIs, the relentless battle between bacteria and antibiotics and the potential role in appropriate prescribing of antibiotics in the community has had on emerging bacterial resistance, and finally, evidence-based strategies that GPs can use to change their own and their patients' behaviour for the better (eg, delayed prescribing to reduce antibiotic use being one of the simplest and best).

This textbook offers established GPs an opportunity to revisit and improve their current management of ARIs, and general practice registrars a chance to get it right from the start.

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