

UTMJ Reviews – Family Medicine

Handbook of Clinical Nutrition, 3rd ed.

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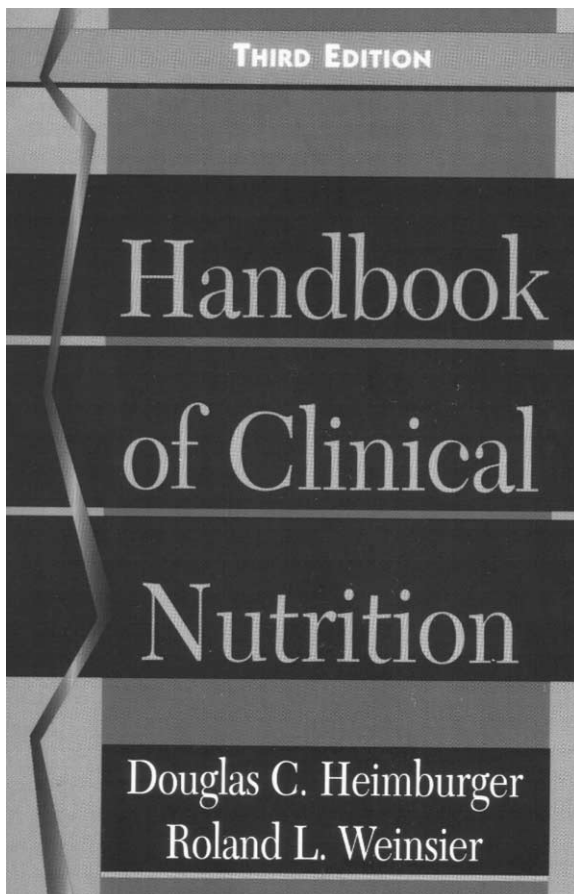
Publisher: Mosby Inc.

Date of Publication: 1997

Number of Pages: 600

Cost: Paperback edition, \$60.95 (CDN)

Strengths: Concise, portable, clinically oriented
Weaknesses: Weaknesses: will not allow physicians to answer the questions of patients interested in promoting their own health through nutrition
Target audience: Residents and practising physicians in both hospitals and clinics



The Handbook of Clinical Nutrition grew out of a 1977 effort at the University of Alabama to give medical students, residents and ward dieticians nutritional guidance in assessing, advising and managing hospital patients. This third edition includes advances of the early '90s in the nutritional sciences, and offers greater coverage of health promotion and preventative nutrition in an era of increasing popular interest in food and health.

The *Handbook* is spiral-bound and pocket-sized for portability and easy reference. Straightforward writing, complete and succinct tables, and uncluttered line-figures present readily accessible information that is well indexed. Familiarity with basic medical terminology must inevitably be assumed, because the book covers a variety of clinical situations in a short space. It contains sections on nutrition in health maintenance, nutritional support in patient management, and nutrition in specific clinical situations.

By its very title, the section on health maintenance betrays a bias towards predominantly reactive, as opposed to proactive, nutrition. This handbook will not supply a doctor with the research surveys needed to help a patient evaluate books such as *The Zone* or *Dr. Dean Ornish's Program for Reversing Heart Disease*,² which differ markedly from conventional dietary guidelines. There are concise tables of vitamin deficiency and toxicity symptoms, but no mention of phytoprotectants such as flavonoids or plant sterols that figure in contemporary

nutrition manuals such as *Human Nutrition and Dietetics*.³ Exposure to fluoride or aspartame, considered in the *Nutrition Recommendations*⁴ of Health Canada is also not discussed. And for want of space, the *Handbook* does not include material on cultural diversity in diet such as can be found in *Nutritional Epidemiology*.⁵ However, the *Handbook* does display an admirable awareness of the social and domestic context of its recommendations. The discussion of geriatric nutrition repeatedly draws the reader's attention to the many seemingly unrelated factors, for example, living alone, poor-fitting dentures and changes in taste and smell sensation that can affect diet in the elderly. The discussion of pregnancy not only outlines increased nutrient requirements but also gives specific recommendations for the nausea and vomiting, heartburn and constipation often experienced by pregnant women, thereby lessening the chance that a patient might seek relief through such risky behaviour as dietary restriction or pica.

The section on nutritional support in patient management is perhaps the forte of this handbook, as it stems directly from of the practical needs of hospital physicians that prompted the first edition. The up-to-date chapter on nutrition support teams lays out with admirable clarity typical responsibilities of various health professions. The practical grounding of this book in a U.S. health insurance environment extends even to a (brief) list of nutritional comorbidity ICD-9 codes for billing purposes. Numerous other tables summarize nutritional assessment, therapeutic diets, enteral feeding formulae, the management of diarrhoea, and drug-nutrient interactions. This handbook provides a practical and up-to-date overview of information covered in considerable depth in manuals

such as *Principles of Nutritional Assessment*.⁶

The section grouped by specific clinical situations allows compact treatment of what took more voluminous form in *Nutrition and Diagnosis-Related Care*.⁷ Oddly enough, much of the *Handbook's* preventative health information is given in the chapters addressing obesity, diabetes, hypertension, cardiovascular disease and cancer, an incidental consequence of a "disease-oriented approach" that allows rapid location of needed information.

The *Handbook* does not entirely fulfil the need for an up-to-date synthesis of health food initiatives, nor does it replace a textbook of nutrition. It does, however, indicate the interventions a doctor should make for the most positive effects and reliable outcomes in keeping with the current standard of care. If pricey at \$60.95 (CDN), it may serve as the single book that allows discharge of a physician's nutritional responsibilities.

References

1. Sears B. (1995). *The Zone* Harper Collins: New York.
2. Ornish D. (1990). *Dr. Dean Ornish's Program for Reversing Heart Disease*. Ivy Books: New York.
3. Garrow JS, James WPT, and Ralph A. (2000). *Human Nutrition and Dietetics, 10th ed*. Churchill Livingstone: Edinburgh. \$117.00 (CDN).
4. Health Canada. (1990). *Nutrition Recommendations: The Report of the Scientific Review Committee*. \$19.95 (CDN).
5. Willett W. (1988). *Nutritional Epidemiology, 2nd ed*. Oxford UP: Oxford.
6. Gibson RS. (1990). *Principles of Nutritional Assessment*. Oxford UP: New York. \$102.50 (CDN).
7. Escott-Stump S. (1998). *Nutrition and Diagnosis-Related Care, 4th ed*. Williams & Wilkins: Baltimore. \$77.50 (CDN).