tive, perioperative, and postoperative workup, and follow-up; and recognizing and treating complications. The programs have a satisfactory complement of videos, which break each procedure into steps that can be reviewed easily. The videos seem to run well and can be compared to any video produced at the time of operation. (The machine I reviewed the disks on was a 200 MHz Pentium processor).

Dr Rosser's wit is evident throughout. A section on danger areas encountered throughout the various procedures is presented as a submarine video game–type encounter, amusing and effective in keeping the attention of the user. Also, there are plenty of ways to navigate the disk at the user's level of sophistication. A test for continuing medical education credit is available from the Yale department of surgery (but not on the disk itself).

The programs are well presented and formatted, basic, and informative—a welcome addition to any surgical library. I enjoyed the various approaches to learning through interesting techniques that Dr Rosser uses. I do not think that the disks can replace a hands-on laboratory to learn the basics or be a substitute for performing the procedures regularly. Surgical residents, interns, and students would benefit greatly by reviewing these disks before encountering the procedures. The review of pathophysiology and complications is excellent for any surgeon practicing the procedures to be updated on their pitfalls. On the other hand, I found the patient education programs tended to be very long. I could not figure out how to skip around the CD but had to listen to the entire program. I think that most patients will not want to sit through it and would rather listen to the physician who will be performing the operation.

I feel that the procedure CDs are excellent additions to any surgical residency program and any library. Surgeons who are performing these operations routinely should have no need for the disks other than curiosity and to see what the new technology can be used for. I personally see no use for the patient education CDs, but a referring physician might feel comfortable having patients review them before considering the procedures, although explaining the procedures to the patient is the role of the operating surgeon.

The programs come packaged with two CDs, one for Windows and one for Macintosh. In addition to the requirements given above, I would recommend a fast processor to avoid any problems running the Quicktime videos. I did not test the Mac CD but am happy to see it packaged as a bundle with the Windows program.

In conclusion, Dr Rosser is a great teacher (as I can personally attest), and I feel that he has done a remarkable job producing the programs in a readily accessible format . I expect to see him produce other media and hopefully more advanced techniques in the years to come.

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The patient education program on Laparoscopic Inguinal Hernia Repair *has recently been issued (ISBN 0-387-14242-8).*—ED

Ophthalmology

CD-Atlas of Ophthalmology, by Sue Ford and Ronald Marsh, one CD-ROM and 8-pp user's guide, requirements: Macintosh: Power Mac or 68040, 8MB RAM, System 7.0 or above, 2x speed CD drive, 2MB hard disk space, thousands of colors; PC: Minimum of 66 MHz 486DX2, 2x speed CD drive, SVGA 16-bit color display, Win 3.x or 95, 2MB hard disk space, minimum 8MB RAM, $285, ISBN 0-7234-2912-X, St Louis, Mo, Mosby, 1998.

"Once seen, never forgotten" applies to ophthalmology as much as to any field in medicine. However, medical students rotating briefly through the department of ophthalmology do not have the opportunity to see the vast majority of eye diseases in real patients. This is partly related to the difficulties in mastering basic examination techniques, such as slit-lamp biomicroscopy and indirect ophthalmoscopy, but mostly to the rarity of many important conditions. An ophthalmology resident in a large hospital might observe grade 4 hypertensive retinopathy less than once a year, papilledema perhaps several times a year, and may never see a case of blue sclera throughout his or her residency. The bottom line is that medical students, as well as ophthalmology residents at the start of their training, must rely on textbook photographs for exposure to most eye diseases. Another large group of physicians who would benefit from viewing ophthalmic images are those engaged in primary and emergency care.

CD-Atlas of Ophthalmology, by Sue Ford and Ronald Marsh, contains numerous high-quality photographs collected over the past 20 years at the Western Eye Hospital, London, England. Each image is accompanied by a short text divided into three to four brief segments: "Summary," "History and Examination," "Investigation," and "Diagnosis." The user can choose to view the photographs grouped by "Regions"or "Disorders."

The 17 eye regions range from pupil and anterior segment to macula and optic nerve. Two additional regional sections are central nervous system and body. There are subsections; for example, the conjunctiva section includes the following subsections: congenital, degenerative, inflammation, infection, trauma, tumors, vascular, and others. Within each subsection one can find images that highlight a wide range of conditions. "Conjunctiva—Congenital," for instance, includes 19 photographs ranging from oculodermal melanocytoma to cystic juxtalimbal nevus and Osler-Weber-Rendu syndrome.

In the alternative "Disorders" view, 15 sections include infectious, immune, toxic, nutritional, hereditary, and endocrine. Within endocrine, the two subsections are thyroid and pituitary. Within the immune section, drug allergy, other allergy, and autoimmune disorders can be found. Each of the images on this CD can be saved to disc or copied to the clipboard (for instance, to be included in a slide presentation).

One minor drawback is the need to double click on each reduced preview image to view it in full and then to click again to view the accompanying text. Having to open (and then close) each photograph slows the process of browsing the images and text. A useful tool is that any number of images from this comprehensive collection can be grouped, producing a "slide show" that can be saved and later viewed on-screen or projected on a wall.

Medical students and ophthalmology residents will find this CD enjoyable to use, visually pleasing, and straight to the point, with concise statements. The images reveal a wealth of clinical material and are of exceptionally high quality, although on-screen images never quite match the quality of slides or printed photographs. A built-in feature enables zooming in on portions of an image.

In conclusion, departments involved in teaching ophthalmology or primary care medicine will definitely find this CD atlas a worthwhile investment. However, individuals interested in owning it will probably find the price tag somewhat of a drawback.

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Received

AIDS

Nutrition and HIV: A New Model for Treatment, by Mary Romeyn, 2nd ed, 425 pp, with illus, paper, $20, ISBN 0-7879-3964-1, San Francisco, Calif, Jossey-Bass Publishers, 1998.

Alcohol and Drug Dependence

Substance Abuse Prevention in Multicultural Communities, edited by Jeanette Valentine, Judith A. De Jong, and Nancy J. Kennedy (*Drugs and Society*, vol 12, Nos. 1/2), 171 pp, with illus, $39.95, ISBN 0-7890-0343-0, New York, NY, The Haworth Press, 1998.