tail is a little variable. If you want a third-generation cephalosporin, for example, you’re in luck, as the antibiotics are well organized. Looking for an SSRI? It’s somewhere in the antidepressant section. Antihistamines are also a single group. You must flip to the main entries should you forget whether a drug is for a runny nose or gastritis. The book does seem to have an internal medicine focus and covers those areas best.

In practice, this book probably will not help doctors choose a drug, but it will assist in the nuts and bolts of writing orders or prescriptions (which explains the book’s subtitle: the Scut Monkey Drug Manual). The appendix also includes tables for common, difficult-to-remember subjects such as steroid and anesthetic equivalents, a list of cardiac drugs, and anticoagulant goals. A benzodiazepine comparison chart would have been nice, but perhaps it will turn up in a future edition.

For its size, this book is a valuable resource. It takes up very little pocket room, and it is an efficient way to recall details about familiar drugs. Of course, one would need to supplement this book with a more comprehensive reference, but for quick prescribing on the wards or in an office, this book will make life a little bit easier.

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How Women Got Their Curves and Other Just-So Stories. By David P. Barash and Judith Eve Lipton. New York: Columbia University Press; 2009. 224 pp. US $29.95 Hardcover. ISBN: 978-0231146647.

Oscar Wilde once wrote, “Women are meant to be loved, not to be understood.” In How Women Got Their Curves and Other Just-So Stories, David P. Barash and Judith Eve Lipton counter Wilde and try to understand the mysteries of women. In the course of the book, they speculate about phenomena such as menstruation, orgasms, and curves. Although the premise of the book is interesting and the writing style inviting, the book suffers from an overemphasis on hot hypotheses at the expense of more logical ones and a general tendency to ramble too much without a cogent argument.

The book’s title derives from Rudyard Kipling’s Just-So Stories, a collection of tales to explain natural phenomena such as how leopards got their spots. Similarly, the husband and wife team of Barash (an evolutionary biologist) and Lipton (a clinical psychiatrist) seek explanations for uniquely female features and functions. As one example, they discuss the role and importance of menstruation, an important question that has received increasing attention recently due to the development of a birth control pill that reduces the number of periods a woman has in a year. Some people have expressed concerns that suppressing menstruation could have long-term physiological consequences (none have been reported so far, aside from an increased risk for blood clotting, while on most forms of birth control). Others, however, have argued that menstruation carries no clear biological benefits for women and it makes sense to dispense with the monthly discomfort. Barash and Lipton present several hypotheses to explain menstruation, but they seem particularly fixated on the possibility that menstruation serves to “cleanse” the reproductive tract of harmful pathogens. While the authors write honestly about the lack of evidence to support this idea, they undermine themselves by admitting that they favor it, despite its flaws. They reject an alternate and more plausible hypothesis, namely that menstruation occurs because it is metabolically inefficient to maintain a thick endometrial lining, because it does not “place the phenomenon [menstruation] itself front and center as the apple of evolution’s eye.” Evolution does not have an agenda, and this statement both misinterprets natural selection and suggests the authors are more interested in being trendy than accurate.

Subsequent chapters on invisible ovulation, the purpose of curves, the orgasm, and menopause follow a similar format with numerous theories being thrown around and discussed, some more substantively than others. Often, Barash and Lipton propose
follow-up experiments that would provide evidence for or against a particular hypothesis. The authors deserve credit for enthusiastically tackling complex and often awkward aspects of human biology and for writing in an accessible style. Unfortunately, though, they take their title too literally and their “just-so stories” end up being as defined: delightful, but empty.

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Ethics and Newborn Genetic Screening: New Technologies, New Challenges. Edited by Mary Ann Baily and Thomas H. Murray. Baltimore: The Johns Hopkins University Press; 2009. 376 pp. US $50.00 Hardcover. ISBN: 978-0801891519.

Ethics and Newborn Genetic Screening addresses the ethical and policy issues surrounding technological advances that have allowed routine testing for dozens of rare diseases. This book describes newborn screening programs with an historical arc, depicting what is at its root a classic case of technology outpacing self-reflection. The arc covers everything from the original controversial screening program for phenylketonuria to the modern ease of checking as many boxes as one wishes without adding any considerable cost or effort. It is sometimes taken for granted that more testing is better, but this book makes a case for rational testing, outlining reasons and practical methods to make it happen at a national level.

The book is a compilation of essays by a wide variety of experts. Each is concerned with a very different aspect of newborn screening. The variety of perspectives weaves a story that is complex and sometimes contradictory, but always thought provoking. Some particularly fascinating chapters are dense overviews of entire schools of thought, almost self-contained primers on public health.

A chapter by editor Mary Ann Baily interweaves the issue of fair distribution of testing burdens and benefits with that of healthcare distribution in general. This exposes one of many odd paradoxes of our healthcare system: our willingness to spend state and federal money to test for conditions that our fragmented system will later allow to go untreated. Our affection for newborns apparently does not extend to the resulting adults.

Scott Grosse writes a terrific overview of cost-effectiveness analysis, using examples of newborn genetic screening as a vehicle to explain this frequently used tool. His views are balanced by a firsthand perspective from an advocate for genetic screening, who is both a concerned mother and geneticist. This could be the most valuable chapter for those of us with a scientific background, as her reasoning is rational yet sometimes contrary to the traditional criteria for good screening tests.

The opening and closing chapters by the editors provide the rationale for the compilation, framing the general issue to be discussed. The theoretical framework complements many of the chapters with narrower, more concrete subject matter. Overall, the book is a well-assembled treatment of newborn screening, sure to spark discussion in medical and bioethical communities.

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Immunology: Clinical Case Studies and Disease Pathophysiology. By Warren Strober and Susan R. Gottesman. Somerset, NJ: Wiley-Blackwell; 2009, 432 pp. US $52.95 Paperback. ISBN: 978-0471326595.

Immunology: Clinical Case Studies and Disease Pathophysiology is a well-written transcript that underscores the importance of understanding basic immunology to translational modern medicine. Using 26 in-depth case studies, the reader is familiarized with immunodeficiency diseases, autoimmunity disorders, malignancies and immediate hypersensitivity, and mast cell disorders. Each case study is presented in a detailed immunological background supported by real data and handy references. The problem set