**Book Review**

**Drugs in Use, 3rd Edition.**


The role of the clinical pharmacist, whether in a community or hospital setting is advancing rapidly. Pharmacists are becoming more involved with prescribing decisions as well as explaining the suitability of prescribed drugs.

*Drugs in Use* contains 32 clinical case studies focusing on the application of generic pharmaceutical skills and knowledge to optimise individual patient care. This third edition contains 5 new case studies in addition to the 27 cases in the second edition. Topics of the new cases include: stroke, dementia, osteoporosis, medication errors and medicines management. All cases from the second edition have been revised to include new treatments and up to date pharmaceutical issues.

Each case is introduced with a detailed history of the patient and questions posed. The history of the patient provided is at a level such that a pharmacist would be able to readily access either by discussion with the team of doctors or via medical notes. The case is unravelled gradually following a set of challenging questions, which can be tackled individually or via group discussion. However, the author does state that the answers are based on clinical opinion at the time of writing the cases. Readers may disagree with some decisions made as new treatments and new information are constantly being discovered.

*Drugs in Use* emphasises on the importance of pharmaceutical care for patients. This can be felt after attempting each case study but also at the end of each case a pharmaceutical care plan has been included.

I have used this book extensively as a teaching aid for undergraduate pharmacy students. For example, I would deliver a lecture on “Epilepsy and Therapeutics” and would allocate time to discuss the epilepsy case study from the *Drugs in Use* with the students. The students found this extremely useful, as they were able to think about the various issues involved with decision-making and were able to apply my lecture material to a virtual real life situation.

I felt that some of the material in *Drugs in Use* might be too advanced for undergraduate level. However, by presenting the cases to the students, it helped them appreciate the issues involved with drug therapy decisions and suitability of treatment. As mentioned before, the beauty of this book is that each case unravels information stage by stage. Thus, when using it as an undergraduate teaching aid, I was able to omit the advanced therapeutics and pharmaceutical issues.

*Drugs in Use* is an excellent book for any practicing pharmacist, whether hospital or community based. Many cases presented in this book are of patients admitted as a hospital in-patient. However, pharmacists in primary care could tackle the pharmaceutical problems where patients are treated by their GPs for the same conditions.

In my opinion, qualified pharmacists, as well as undergraduate pharmacy students and pre-registration pharmacists should use *Drugs in Use*. *Drugs in Use* will help both future pharmacists and qualified pharmacists appreciate and influence drug therapy decisions and are confident when discussing the suitability of drug treatment — skills every practising pharmacist should possess.

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