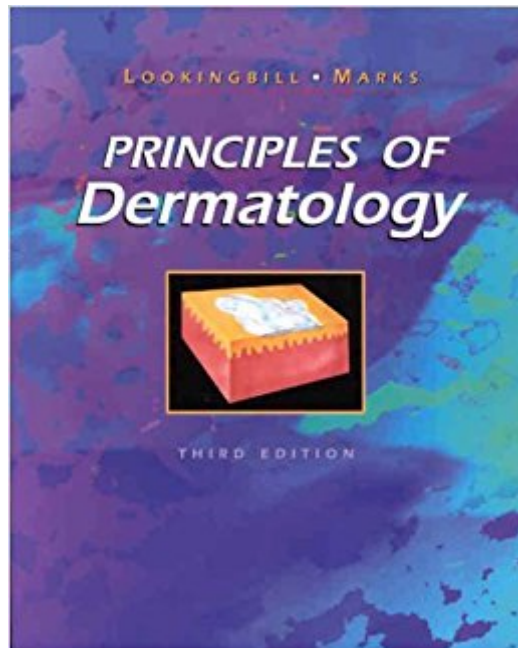




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# Principles Of Dermatology



## Synopsis

This appearance-based guide to dermatology helps clinicians to recognize, diagnose, and treat a full range of dermatologic problems using visual clues. It emphasizes the recognition of primary skin lesions and their clinicopathologic correlations. A logical, algorithmic organization expedites diagnosis\*disorders are first divided into "Rashes" and "Growths", and then further subdivided by specific clinical features. Discussions of therapy options following each entry facilitate treatment.

## Book Information

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## Customer Reviews

"An excellent introduction to dermatology...should be required reading for all medical students or residents participating in dermatology rotations."--Archives of Dermatology -- Archives of Dermatology

Donald P. Lookingbill, MD, Chair, Department of Dermatology, Mayo Clinic Jacksonville, Jacksonville, FL. James G. Marks, Jr., MD, Professor of Medicine-Dermatology, Penn State Geisinger Health System, Hershey Medical Center, Hershey, PA.

Principles of Dermatology is quite accessible and a easy read. However, it would be incomplete when it comes to hair...its an industry from esthetics to athletic...from virulism to ingrown hairs, to the beard and mustache industry. Hair for many is a sign of distress...from perceived beauty, virulism, to ingrown hair, to beard burns, to prickly heat, to sebaceous glands plugging up, to

sebaceous glands causing instead dry skin...to excess hair oil and skip a day or add two shampoos. The hair dye industry is quite immense and still doesn't offer enough on the shelf and the salon industry extensive and often short lived...the epilation and depilation industry a separate industry is also quite extensive. Just with hair alone its incomplete..it is not just decorous when we consider hair makes some look thinner and others look flabby even while being thin and when it comes to the Forefathers and the US Constitution and their affinity for wigs, powder and talcum and hygiene and no beards. Wind direction tells us many things, and hair can help us determine humidity, strength and direction of wind or winds and how dry or humid the day could be...hair is a tool that also creates and changes our looks just like a wig might..and hair also provides such CNS conditions for being alert, fright, happiness etc...the list goes on and on. Athletes do without hair for endurance, hygiene, agility but it neither slows down nor speeds up swimming but often is an advantage when we are dealing with seconds and agility and apparels to be marketed in the athletic sports fashion industry. The format is quite nice and the graphic organizers almost perfect. Its well written. You would think...but it appears to skip over a lot of information to which the author quickly makes a reference...that appears to be disconnected. Clearly you wont be practicing hematology today. The chapters that build the foundation in particular Chapter 3 creates a false positive sense of you learned it prior so for detail refer to the other book....that too is ok...time is of essence but then you are left with gaps in knowledge or I got to remind myself and yes everything is now coming together...GREAT strategy and the amount of knowledge to be learned not to be confused....the reminders are quite cordial and very well organized...better than I've seen in other scientific textbooks and most medical textbooks. It definitely not biochemistry nor pathology so dont confuse it...hehe Yes, the teaching methods quite nice and quite conscice so you get to move on right away to dermatology. Yes, it does appear to be an abridged version of Pathology that is now specialized to address general dermatological conditons and thus is great...in an easy to read format...wish Pathology was that way. Pathology may need to step back and take some lessons in education methods, planning and strategy and author methods, planning and strategy...or not...the quantity and quality of information is just not tenable but the authors and readers must be tenacious. I'm going with 4 stars due to the organization of the book. I do like the clinical and practicum sections where they simply say..unknown...have at it..how would you better diagnose. For Pseudofillicularis, neither text rule in diabetis, squalor, an allergic reaction to a hygiene product or tool or shaving apparatus, nor attempts to classify the skin as dry, oily nor combination...and even nutrition issues nor accanthosis nigricans...is ruled into the differential diagnosis. And well for second starters, a dermatofibroma is like a lentigo....its gotten from inner city living and from shared public spaces.

Once we realize that or rule it out...we can then move on to treatment... And Old method of dealing with Dermatofibrosis manually is called Tricokeracatasillois, in which floss or a similar string is used to dekeratinize the surface browning; a similar method to string eyebrow removal. Perhaps its better of with Nitrogen...but thats an easy test to determine if Liquid Nitrogen can be used minimally. Lentigos will take 10 plus years to go away, and public contact for those whom work really is at about 10% of their time since they are busy with school and work....or occupational engineers are once again unemployed and none know what to do to better serve the public at large en mass. So obviously minimize public contact...and all public contact should be within the context of work and school. Home, school and work need to be Steam Cleaned for about 3 months consecutively...1 or twice per month depending on level of activity. A dermatofibroma is shorter lived than a lentigo. I may disappear within a month or several months. Now what we do know about fungal infections is that over consumption of your daily carbs can and will cause repeated issues...hence RDA: Recommended Daily Allowance. Over consumption can cause misdiagnosis or other dermatoses. Notice most in dermatology skip Nutrition...you may not skip nutrition and you may need to consider the WIC Diet (as in recommendations by a WIC Committee) and The Farmers Diet. I think both are taught across the country but their headquarters might be in New York City...they then can refer you to local representatives. Im going with 4.5 as the final score...just make sure you have other resources.

Great book to learn Dermatology.

Good over all but not indepth enough for what I really wanted, however for the boards it has all of the necessary info.

I am a family medicine resident. My dermatology prof at UCSF recommended this when i was a student. It is a great intro to how to think about skin and guides you through a systematic approach to come up with a diagnosis, and then treatment is included too. Each chapter is based on the main morphological findings (erythematous rash vs. scaling vs. papules vs. pigmented lesions etc) to help you learn to THINK dermatology instead of just pattern recognition, which is what a dermatology atlas does. This is NOT a dermatology atlas (it is better), and once you master the concepts here a dermatology atlas is a good second text to have. good luck, dermatology is my nemesis but this book makes it easier in primary care --

Today I finished the 2nd week of a four week rotation in dermatology, and I have read about 2/3 of the

book. Our derm dept lends the book to us during the rotation, and recommends that we buy it for our own reference afterwards. In my opinion the book is a well written overview of the common presenting derm complaints. The format is clear, and well thought out. The presentation of each condition includes brief sections on incidence, PE, DDx, Tx, and pathology. The pictures are good. The one weakness is that it could have more pictures. I am very happy with the text, and I am hard to please. I don't give it five stars because I never give anything five stars. It is a great book for med students rotating thru derm, and is even a good reference text for gen'l practitioners. Not sure if I'll shell out the bucks for the book though at this point--I still have to figure out how to pay for tuition, which was just raised by 5% for next (my final!)year.

A great book for both med students and residents (derm and non-derm)- provides a practical approach to diagnosis and treatment common dermatoses. Not for those seeking in depth knowledge of esoteric conditions, but perfect for those wanting to build a framework for thinking in a way that will lead to solid differential diagnosis and management.

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