

Microbiology nuts and bolts (Book review)

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Pocket aid for learning the principles and practice of microbiology

'Microbiology nuts and bolts' by David Garner. Pp 282. Price £27.99. Charleston: CreateSpace Independent Publishing Platform: 2013. ISBN 978 1 484 123911

In an age of smartphone apps with unlimited potential resource, a pocket-sized book might seem to be an anomaly. However, this carefully edited pocket guide to all things infection related packs a vast amount of information into a small space, and would be a useful back-up or portable revision aid for any pharmacist dealing with infection.

This book appears to be aimed at prescribers, yet would be of use to a pharmacist trying to understand the rationale for antimicrobial selection and dosing in their patients. Antimicrobial stewardship, and the acknowledged role of pharmacists in ensuring good antimicrobial prescribing, does not appear to be mentioned. There is little information here that could not be found elsewhere.

However, the summation and highlighting of key concepts is rather more the point. This would make this a practical aide-memoire for the busy clinician, akin to the Oxford Clinical Handbook series.

'Microbiology nuts and bolts' consists of a mini-textbook of basic concepts, followed by a section on microbiological testing and how to interpret results, infection control basics, then clinical scenarios and antimicrobials, and infection emergencies. The clinical scenario and antimicrobial sections are likely to be most useful, although most pharmacists would reach for their BNF to check doses rather than rely on a less frequently updated textbook. For instance, vancomycin trough levels are quoted at 5–15mg/L, which is lower than current recommendations. Empiric antibiotic choices are also given. However, as the author acknowledges, one would need to use local guidelines rather than rely on this book, due to variations in local antibiotic sensitivity patterns. Referencing extends to nine citations at the end of the book, two of which are the BNF and BNFC. In short, this may not help us practise evidence-based medicine, but is a good refresher in the principles and practice of clinical microbiology.

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