

## Part 2. Nephrology/ hypertension/fluid and electrolyte disorders

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The following annotated bibliography has been developed for the purpose of providing to primary care physicians a handy source of review articles and major studies in the field of nephrology, hypertension, and fluid and electrolyte disorders. Almost all of the articles are review articles of clinical topics that would be of interest to the practicing physician. *JAOA* will be publishing additional annotated bibliographies in various fields of internal medicine over the next several months. This is the second in the series. Part 1 appeared in the January 1993 issue (93:50-65). Others will appear in forthcoming issues of *THE JOURNAL*.

(Key words: Bibliography, nephrology, hypertension, fluid disturbances, electrolyte disorders)

### Interstitial Nephritis, Cystic Disease of the Kidney, and Congenital Anomalies

102. Revert L, Montoliu J: Acute interstitial nephritis. *Semin Nephrol* 1988;8:82-88.

A brief but good review of the etiology, pathology, and pathogenesis of acute interstitial nephritis.

103. Toto R: Review: Acute tubulointerstitial nephritis. *Am J Med Sci* 1990;299:392-410.

An excellent, thorough review of the classification, etiology, pathogenesis, pathology, clinical spectrum, biochemical features, diagnosis, differential diagnosis, treatment, and prognosis of acute interstitial nephritis.

104. Sutton J: Urinary eosinophils. *Arch Intern Med* 1986;146:2243-2244.

A brief overview of the significance and differential diagnosis of the presence of urinary eosinophils, emphasizing the lack of specificity for acute interstitial nephritis.

105. Benabe J, Martinez-Maldonado M: Tubulointerstitial nephritis associated with systemic disease and electrolyte abnormalities. *Semin Nephrol* 1988;8:29-40.

An excellent overview of the functional disturbances and clinical manifestations of interstitial nephritis associated with systemic disease and electrolyte abnormalities.

106. Gabow P: Autosomal dominant

polycystic kidney disease—more than a renal disease. *Am J Kid Dis* 1990;16:403-413.

An in-depth review of the genetics, extrarenal manifestations and renal manifestations of autosomal dominant polycystic kidney disease, including an overview of the condition in children.

107. Grantham J: Polycystic kidney disease: I. Etiology and pathogenesis. *Hosp Prac* 1992;27:49-57.

A brief but excellent discussion of the pathogenesis, etiology, and implications for treatment of polycystic kidney disease.

108. Bennett W, Elzinga L, Barry J: Polycystic kidney disease: II. Diagnosis and management. *Hosp Prac* 1992;27:59-66.

A brief but thorough discussion of the diagnosis and management of polycystic kidney disease.

109. Kaehny W, Everson G: Extrarenal manifestations of autosomal dominant polycystic kidney disease. *Semin Nephrol* 1991;11:661-670.

An excellent and thorough discussion of the extrarenal manifestations of autosomal dominant polycystic kidney including hepatic cysts, diverticulosis of the colon, cardiac valvular disease, and intracranial aneurysms.

110. Ishikawa I: Acquired cystic disease: Mechanisms and manifestations. *Semin Nephrol* 1991;11:671-684.

A very good review of the clinical characteristics, natural history, mechanisms of development, clinical manifestations, and complications of acquired cystic renal disease occurring in end-stage renal disease.

111. Grantham J: Acquired cystic kid-



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ney disease. *Kidney Int* 1991;40:143-152.

**Nephrology forum with an excellent discussion of the clinical features, structural basis, and pathogenesis of acquired cystic kidney disease in uremic patients.**

112. Herman T, McAlister W: Radiographic manifestations of congenital anomalies of the lower urinary tract. *Radiol Clin North Am* 1991;29:365-382.

**An excellent overview of various congenital anomalies of the lower urinary tract including the embryology, anomalies of the ureter, anomalies of the urinary bladder, urethral valves, hypospadias, urethral duplications, and congenital cysts of the lower urinary tract.**

113. Daneman A, Alton D: Radiographic manifestations of renal anomalies. *Radiol Clin North Am* 1991;29:351-363.

**Excellent, thorough review of the radiographic manifestations of renal anomalies including the embryology, classification, radiographic features, and clinical findings.**

## Acute Renal Failure, Nephrotoxic Agents, and the Kidney in Pregnancy

114. Lieberthal W, Levinsky N: Treatment of acute tubular necrosis. *Semin Nephrol* 1990;10:571-583.

**A very thorough discussion of the pathophysiology, clinical course, and treatment of acute tubular necrosis.**

115. Punukollu R, Gopalswamy N: The hepatorenal syndrome. *Med Clin North Am* 1990;74:933-943.

**Good, readable review of the pathogenesis, pathology, clinical**

**features, diagnosis, differential diagnosis, and treatment of the hepatorenal syndrome.**

116. Cronin R: Renal failure following radiologic procedures. *Am J Med Sci* 1989;298:342-356.

**An excellent, thorough review of radiocontrast-induced acute renal failure, emphasizing risk factors, clinical features, diagnosis, pathology, pathogenesis, prevention, and differential diagnosis.**

117. Dykman D, Simon E, Avioli L: Hyperuricemia and uric acid nephropathy. *Arch Intern Med* 1987;147:1341-1345.

**A brief but practical grand rounds discussion of the diagnosis and management of acute renal failure associated with hyperuricemia.**

118. Conger J: Acute uric acid nephropathy. *Med Clin North Am* 1990;74:859-871.

**A thorough, updated review of acute uric acid nephropathy with discussion of the physicochemical properties of uric acid, renal handling of urate, clinical setting, pathogenesis, clinical and laboratory manifestations, diagnosis, and treatment.**

119. Martinez-Maldonado M: Acute renal failure due to urinary tract obstruction. *Med Clin North Am* 1990;74:919-932.

**A very good, practical discussion of the causes, clinical manifestations, pathophysiology, and treatment of acute renal failure secondary to urinary tract obstruction.**

120. Paller M: Drug-induced nephropathies. *Med Clin North Am* 1990;74:909-917.

**A brief but practical overview of**

**the various types of drug-induced nephropathies, including acute renal failure, acute tubular necrosis, acute interstitial nephritis, and chronic renal failure.**

121. Cooper K, Bennett W: Nephrotoxicity of common drugs used in clinical practice. *Arch Intern Med* 1987;147:1213-1218.

**A brief but thorough overview of the nephrotoxicity of commonly used drugs including antibiotic nephrotoxicity, radiocontrast-induced renal failure, and renal failure associated with nonsteroidal anti-inflammatory drugs.**

122. Bernstein J, Erk S: Choice of antibiotics, pharmacokinetics and dose adjustments in acute and chronic renal failure. *Med Clin North Am* 1990;74:1059-1076.

**A clinically practical guide to the use of antibiotics in patients with renal failure, including a discussion of pharmacokinetics, overview of the use of specific antibacterial agents, antimycobacterial agents, antifungal agents, and antiviral agents.**

123. Narins R, Carley M, Bloom E, Harrison D: The nephrotoxicity of chemotherapeutic agents. *Semin Nephrol* 1990;10:556-564.

**A very good review of the various nephrotoxic effects of chemotherapeutic agents including agents causing prerenal azotemia, postrenal azotemia, and intrinsic renal damage.**

124. Goyer R: Environmentally related diseases of the urinary tract. *Med Clin North Am* 1990;74:377-389.

**A good review of the general aspects of environmentally related diseases of the urinary tract including aspects of epidemiology, metabolism, and susceptibility;**



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mechanisms in pathology, drug and chemical causes of renal disease; and cancer of the kidney and the urinary tract.

125. Abuelo J: Renal failure caused by chemicals, foods, plants, animal venoms, and misuse of drugs. *Arch Intern Med* 1990;150:505-510.

A concise review of the spectrum of various agents inducing renal failure, such as inhaled or cutaneously absorbed nephrotoxins, ingested nephrotoxic chemicals, nephrotoxic foods, nephrotoxic plants, nephrotoxic animal venoms, and drugs given in excessive dose by the physician or misused by the patient.

126. Krane N: Acute renal failure in pregnancy. *Arch Intern Med* 1988;148:2347-2357.

An excellent overview of the various conditions giving rise to acute renal failure in pregnancy, including discussions of the physiologic renal changes of pregnancy, the differential diagnosis of renal failure in pregnancy, renal cortical necrosis, acute tubular necrosis, eclampsia, acute fatty liver of pregnancy, postpartum renal failure, and management of various causes of acute renal failure in pregnancy.

127. Cunningham F, Lindheimer M: Hypertension in pregnancy. *N Engl J Med* 1992;326:927-932.

An excellent and brief overview of the current concepts regarding hypertension in pregnancy including detection, classification, diagnosis, clinical spectrum, pathophysiology, prevention, management, and treatment of both eclampsia and nonpreeclamptic hypertension.

128. Goldberg C, Schrier R: Hypertension in pregnancy. *Semin Nephrol*

1991;11:576-593.

A very extensive state-of-the-art review of hypertension in pregnancy, including classification, clinical characteristics, theories of pathogenesis and pathophysiology, hormonal changes, prognosis, treatment, and differential diagnosis.

129. Silver H: Acute hypertensive crisis in pregnancy. *Med Clin North Am* 1989;73:623-638.

Excellent, readable, thorough review of the management of acute hypertensive crisis in pregnancy with specific discussions regarding individual antihypertensive agents used in this condition.

130. Weiner C: The clinical spectrum of pre-eclampsia. *Am J Kid Dis* 1987;9:312-316.

A brief overview of the clinical spectrum of preeclampsia including clinical manifestations, and differential diagnoses of preeclampsia from other hypertensive disorders mimicking this condition.

131. Grunfeld J, Pertuiset N: Acute renal failure in pregnancy: 1987. *Am J Kid Dis* 1987;9:359-362.

A good, brief overview of the causes of acute renal failure in pregnancy with a brief discussion of the clinical manifestations of each of the conditions.

132. Andriole V, Patterson T: Epidemiology, natural history, and management of urinary tract infections in pregnancy. *Med Clin North Am* 1991;75:359-373.

An excellent and current review of urinary tract infections in pregnancy including epidemiology, natural history, screening for asymptomatic bacteriuria, bac-

teriuria diagnostic procedures, interpretation of culture results, and management.

## Urolithiasis, Urinary Tract Infection, and Disorders of the Urinary Bladder and Collecting System

133. Wilson D: Clinical and laboratory evaluation of renal stone patients. *Endocrin Metab Clin North Am* 1990;19:773-803.

A current, extensive overview of the evaluation of renal stone patients including a discussion of the composition of stones, clinical evaluation, analysis of risk factors, and specific evaluation of various specific types of stone formers.

134. Consensus Conference: Prevention and treatment of kidney stones. *JAMA* 1988;260:977-981.

A brief report of the consensus conference regarding current opinions for the treatment and prevention of the various types of urolithiasis.

135. Smith L: The pathophysiology and medical treatment of urolithiasis. *Semin Nephrol* 1990;10:31-52.

A thorough and extensive state-of-the-art review of urolithiasis, emphasizing classification, pathophysiology, medical evaluation, and treatment of the various causes of urolithiasis.

136. Smith L: Idiopathic calcium oxalate urolithiasis. *Endocrin Metab Clin North Am* 1990;19:937-947.

A brief but very practical overview of the various aspects of calcium oxalate stone formation including the conditions of hypercalciuria, hyperoxaluria, and hyperuricosuria.



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137. Thomas W: Urinary calculi in hypercalcemic states. *Endocrin Metab Clin North Am* 1990;19:839-849.

**A good but brief review of the various manifestations of the conditions giving rise to urinary calculi with hypercalcemia including hyperparathyroidism, hypervitaminosis D, immobilization, myeloma, and malignancy.**

138. Muldoon L, Resnick M: Secondary urolithiasis. *Endocrin Metab Clin North Am* 1990;19:909-918.

**A very good overview of the unusual secondary conditions giving rise to urolithiasis, including infection, structural abnormalities, cystic disorders, drug-induced urolithiasis, and foreign bodies.**

139. Williams-Larson A: Urinary calculi associated with purine metabolism. *Endocrin Metab Clin North Am* 1990;19:821-838.

**A very thorough overview of urolithiasis associated with abnormalities of purine metabolism giving rise to uric acid stones, including the discussion of uric acid metabolism, risk factors of uric acid nephrolithiasis, defects in uric acid metabolism leading to urolithiasis, diagnosis of uric acid stones, and medical treatment.**

140. Singer A, Das S: Cystinuria: a review of the pathophysiology and management. *J Urol* 1989;142: 669-673.

**A brief but current review article of cystinuria emphasizing the pathophysiology and therapeutic regimens.**

141. Banner M: Extracorporeal shock wave lithotripsy. *Radiol Clin North Am* 1991;29:543-556.

**A contemporary review of renal**

**stone lithotripsy including a discussion of patient selection, contraindications, indications, and complications of the procedures.**

142. Ronald A, Pattullo A: The natural history of urinary infection in adults. *Med Clin North Am* 1991;75: 299-312.

**A current review of the natural history of urinary tract infection in adults including a discussion of uncomplicated infections and complicated infections.**

143. Pappas P: Laboratory in the diagnosis and management of urinary tract infections. *Med Clin North Am* 1991;75:313-325.

**A very practical and easily readable review of the use of the laboratory in urinary tract infections including the urinalysis, urine culture, noninvasive localization methods, and office diagnosis.**

144. Johnson J, Stamm W: Urinary tract infections in women: Diagnosis and treatment. *Ann Intern Med* 1989;111:906-917.

**A state-of-the-art extensive review of urinary infections in women including discussion of clinical syndromes associated with acute infections, diagnostic tests, antimicrobial agents, therapy, and posttherapy follow-up recommendations.**

145. Safrin S, Siegel D, Black D: Pyelonephritis in adult women: Inpatient versus outpatient therapy. *Am J Med* 1988;85:793-798.

**A well-designed study of the author's experience with adult women with pyelonephritis with a discussion of patient characteristics, microbiology, therapy, clinical outcome, and cost of therapy.**

146. Lipsky B: Urinary tract infec-

tions in men: Epidemiology, pathophysiology, diagnosis and treatment. *Ann Intern Med* 1989;110:138-150.

**An excellent state-of-the-art review of urinary tract infections in men including a discussion of the epidemiology, pathophysiology, clinical diagnosis, localization studies, causative agents, treatment, and diagnostic workup.**

147. Baldassarre J, Kaye D: Special problems of urinary tract infection in the elderly. *Med Clin North Am* 1991;75:375-390.

**An extensive and excellent review of urinary tract infection in the elderly including the epidemiology, pathogenesis, host defense mechanisms, microbiology, clinical features, laboratory diagnosis, significance of bacteriuria, and management.**

148. Stamm W: Catheter-associated urinary tract infections: Epidemiology, pathogenesis, and prevention. *Am J Med* 1991;91(Suppl 3B):65S-71S.

**A brief and easy-to-read overview of various aspects of catheter-associated urinary tract infections including epidemiology, pathogenesis, prevention, and recommendations for long-term catheterization.**

149. Hutchison F, Kaysen G: Perinephric abscess. *Med Clin North Am* 1988;72:993-1014.

**An excellent current state-of-the-art review of perinephric abscess including a discussion of the mechanisms of infection, factors contributing to the development of abscess, clinical features, imaging techniques, treatment, and an excellent algorithm for the detection and treatment of perinephric abscess.**

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150. Zucchelli P, Gaggi R: Reflux nephropathy in adults. *Nephron* 1991; 57:2-9.

**A brief and easy-to-read overview of the current concepts regarding reflux nephropathy in adults including the incidence, clinical manifestations, pathogenesis, and natural history.**

151. Lerner G, Fleischmann L, Perlmutter A: Reflux nephropathy. *Ped Clin North Am* 1987;34:747-770.

**An excellent overview of reflux nephropathy with emphasis on the pediatric patient including discussions of the clinical presentations, complications, management, and recommended imaging studies.**

152. Skoog S, Belman B, Majd M: A non-surgical approach to the management of primary vesicoureteral reflux. *J Urol* 1987;138:941-946.

**An excellent, extensive study of 545 patients over 10 years, reporting the results of a nonsurgical approach to the management of primary vesicoureteral reflux.**

153. Merenich W, Popky G: Radiology of renal infection. *Med Clin North Am* 1991;75:425-469.

**An excellent but extensive overview of the recent advances in imaging of various types of renal infections with discussion of each specific imaging study, recommended contrast agents, and specific findings and complications in the various types of renal infections.**

154. DeVries C, Freia F: Hemorrhagic cystitis: A review. *J Urol* 1990; 143:1-9.

**An excellent, readable, thorough review of the various causes of hemorrhagic cystitis including a discussion of diagnosis and treatment with a treatment algorithm.**

## Urologic Aspects of Urinary Tract Disease, Malignancy of the Urinary Tract, Renal Imaging

155. Amis E, Blaivas J: Neurogenic bladder simplified. *Radiol Clin North Am* 1991;29:571-580.

**A well-written and easy-to-read review of neurogenic bladder with discussion of the anatomy, neurophysiology, and classification.**

156. Pannill F: Practical management of urinary incontinence. *Med Clin North Am* 1989;73:1423-1439.

**An excellent practical guide to the management of urinary incontinence including the scope and impact, physiology, pathophysiology, urodynamics, etiology, evaluation, and treatment.**

157. Rubin, C: Urinary incontinence in the elderly. *Am J Med Sci* 1990; 299:131-147.

**An excellent and very thorough discussion of urinary incontinence in the elderly patient, including prevalence, morbidity, anatomy, physiology, causes, evaluation, evaluation algorithm, and treatment.**

158. Ng C, Amis S: Radiology of continent urinary diversion. *Radiol Clin North Am* 1991;29:557-570.

**A well-written overview of the radiologic findings of urinary diversion with excellent diagrams and corresponding x-rays of each specific type of diversion procedure.**

159. McDougal W: Metabolic complications of urinary intestinal diversion. *J Urol* 1992;147:1199-1208.

**A very thorough state-of-the-art review of the metabolic complications of urinary intestinal di-**

**version, discussing electrolyte abnormalities, abnormal drug metabolism, calculus formation, nutritional disturbances, growth and development abnormalities, bone disease, and cancer.**

160. Pode D, Caine M: Spontaneous retroperitoneal hemorrhage. *J Urol* 1992;147:311-318.

**A brief but well-written review of spontaneous retroperitoneal hemorrhage including etiology, clinical features, diagnostic aids, and management with a management algorithm.**

161. Amis, E: Retroperitoneal fibrosis. *Am J Roentgenol* 1991;157:321-329.

**A brief but easy-to-read review of retroperitoneal fibrosis including etiology, clinical characteristics, pathology, imaging, and treatment.**

162. Ritchie A, deKernion J: The natural history and clinical features of renal carcinoma. *Semin Nephrol* 1987;7:131-139.

**A short but thorough review of renal carcinoma with emphasis on incidence, evolution of disease, tumor grading, clinical presentation, metastatic pattern, and survival.**

163. Paulson D: Treatment strategies in renal carcinoma. *Semin Nephrol* 1987;7:140-151.

**A very good review of the various treatment strategies to be considered in the management of renal cell carcinoma.**

164. Laski M, Vugrin D: Paraneoplastic syndromes in hypernephroma. *Semin Nephrol* 1987;7:123-130.

**A very thorough discussion of the various paraneoplastic syndromes associated with renal cell carcinoma.**



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noma including nonspecific syndromes, hyperreninemia, erythrocytosis, and hypersecretion of nonrenal hormones.

165. Matzkin H: Paraneoplastic syndromes associated with prostatic carcinoma. *J Urol* 1987;138:1129-1133.

An excellent review on the topic of multiple primary malignant neoplasms in the urinary tract with discussion of the etiology and various clinical presentations.

166. Raghavan D, Shipley W, Garnick M, et al: Biology and management of bladder cancer. *N Engl J Med* 1990;322:1129-1138.

Medical progress review article with a good discussion of the epidemiology, pathology, biology, and current management.

167. Gittes, R: Carcinoma of the prostate. *N Engl J Med* 1991;324:236-245.

A state-of-the-art review of carcinoma of the prostate including biology, epidemiology, diagnosis, staging, and treatment.

168. Matzkin H, Braf Z: Paraneoplastic syndromes associated with prostatic carcinoma. *J Urol* 1987;138:1129-1133.

A very brief but good overview of paraneoplastic syndromes associated with prostatic carcinoma including signs and symptoms, hematologic syndromes, and neuromuscular syndromes.

169. Hartman D, Aronson S, Frazer H: Current status of imaging indeterminate renal masses. *Radiol Clin North Am* 1991;29:475-496.

A current, easy-to-read review of the recommendations for imaging of indeterminate renal masses including simple cysts, renal calcification, abnormal densities,

septations, masses, and multiple cysts.

170. Lang E: An algorithmic approach to the diagnosis and staging of renal neoplasms. *Radiol Clin North Am* 1986;24:683-694.

A very practical article dealing with an algorithmic approach to the diagnosis and staging of renal neoplasms.

171. Cronan J, Zeman R: Renal mass imaging: The internists role. *Am J Med* 1986;81:1026-1032.

A very practical article emphasizing the cost-effectiveness of various renal imaging techniques reviewing the cost, advantage, and disadvantage of each procedure.

## Progression of Renal Disease, Chronic Renal Failure

172. Jacobson H: Chronic renal failure: pathophysiology. *Lancet* 1991; 338: 419-423.

A well-written but brief, practical overview of the pathophysiologic factors responsible for progression of renal disease including morphologic characteristics, molecular factors, and risk factors.

173. Maschio G, Oldrizzi L, Ruggi C: Is there a 'point of no return' in progressive renal disease? *J Am Soc Nephrol* 1991;2:832-840.

A very thorough but simplified discussion of the mechanisms responsible for progression of chronic renal disease including dietary and pharmacologic intervention and clinical tests to predict progression and the response to therapy.

174. ter Wee P, Donker A: Clinical

strategies for arresting progression of renal disease. *Kidney Int* 1992; 42(Suppl 38):S114-S120.

A brief but thorough review of the factors responsible for progression of renal disease including hypertension, protein intake, lipids, and ammonia genesis.

175. Tolins J, Raij L: Angiotensin converting enzyme inhibitors and progression of chronic renal failure. *Kidney Int* 1990;38(Suppl 30):S118-S122.

An excellent review discussing both the experimental evidence and the clinical studies for hypertension as a cause of renal failure with discussion of specific antihypertensive agents that offer renoprotection.

176. Hricik D, Dunn M: Angiotensin-converting inhibitor-induced renal failure: Causes, consequences, and diagnostic uses. *J Am Soc Nephrol* 1990;1:845-858.

An extensive state-of-the-art review of angiotensin-converting enzyme inhibitor usage in renal failure emphasizing causes of renal failure, consequences of therapy, and diagnostic uses.

177. Mitch W: Dietary protein restriction in patients with chronic renal failure. *Kidney Int* 1991;40:326-341.

Nephrology forum with an extensive discussion of the various aspects of dietary protein restriction in the therapy of chronic renal failure.

178. Burke J, Francos G: Surgery in the patient with acute or chronic renal failure. *Med Clin North Am* 1987;71:489-497.

A very practical guide for the physician anticipating surgery in the patient with chronic renal failure with discussion of fluid and elec-



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trolyte balances, hematologic abnormalities, nutritional disturbances, preoperative considerations, intraoperative considerations, anesthetic considerations, and postoperative considerations.

179. Ma K, Greene E, Raji L: Cardiovascular risk factors in chronic renal failure and hemodialysis populations. *Am J Kidney Dis* 1992; 19:505-513.

An in-depth review of the cardiovascular abnormalities present in chronic renal failure and hemodialysis patients including a discussion of hypertension, lipoprotein abnormalities, left ventricular hypertrophy, glucose intolerance, and other factors.

180. Humphries J: Anemia of renal failure. *Med Clin North Am* 1992; 76:711-725.

A brief but thorough overview of the anemia of chronic renal failure emphasizing pathophysiology and therapy with erythropoietin.

181. Erslev A: Erythropoietin. *N Engl J Med* 1991;324:1339-1344.

A brief state-of-the-art review of erythropoietin in relation to use in chronic renal failure with recommendations for therapy and specific dosing.

182. Eschbach J: The anemia of chronic renal failure. *Kidney Int* 1989;35:134-148.

Nephrology forum with an extensive discussion of the anemia of chronic renal failure including a discussion on therapy with erythropoietin.

183. Tzamaloukas A: Diagnosis and management of bone disorders in chronic renal failure and dialyzed patients. *Med Clin North Am* 1990; 74:961-974.

A brief overview of bone disease in patients with chronic renal failure including a discussion of pathogenesis, manifestations, diagnosis, and management.

184. Malluche H, Faugere M: Renal bone disease 1990: An unmet challenge for the nephrologist. *Kidney Int* 1990;38:193-211.

A very thorough discussion of renal bone disease with the major emphasis of the article on anatomic physiology of bone, pathophysiologic effects of renal failure, diagnostic methods, and therapeutic modalities.

185. Holick M: Vitamin D and the kidney. *Kidney Int* 1987;32:912-929.

Nephrology forum with a very extensive discussion of the intricate mechanisms involved in the metabolism of vitamin D in chronic renal failure.

186. Fraser C, Arieff A: Nervous system complications in uremia. *Ann Intern Med* 1988;109:143-153.

A well-written review of the nervous system involvement in patients with chronic end-stage renal failure with a discussion of uremic encephalopathy, effects of uremia on the brain, neurologic complications of uremia therapy, and uremic neuropathy.

187. Coles G: When should chronic peritoneal dialysis be recommended over hemodialysis? *Semin Dialysis* 1989;2:213-219.

A very practical discussion for the primary care physician with specific recommendations to provide to patients regarding whether peritoneal dialysis is preferred over long-term hemodialysis.

188. Jameson M, Wiegmann T: Principles, uses, and complications of

hemodialysis. *Med Clin North Am* 1990;74:945-960.

A very practical and easy-to-read review of the principles, uses, and complications of hemodialysis.

189. Hakim R: Assessing the adequacy of dialysis. *Kidney Int* 1990; 37:822-832.

Nephrology forum with a brief but excellent overview of the description of adequate dialysis for the chronic renal failure patient.

190. Nahman N, Middelndorf D: Continuous arteriovenous hemofiltration. *Med Clin North Am* 1990; 74:975-984.

A brief but very practical overview of the technique of continuous arteriovenous hemofiltration for the treatment of patients with acute renal failure, especially those who are critically ill.

191. Garella S: Extracorporeal techniques in the treatment of exogenous intoxications. *Kidney Int* 1988;33: 735-754.

Nephrology forum with an extensive and thorough discussion of the uses of various types of dialysis to treat poisonings including hemoperfusion and discussion of specific agents that can be treated with extracorporeal techniques.

192. Nolph K: What's new in peritoneal dialysis: An overview. *Kidney Int* 1992;42(Suppl 38):S148-S152.

A brief but practical overview of the current status of peritoneal dialysis with a discussion of new techniques and developments over the past few years.

193. Saklayen M: CAPD peritonitis: Incidence, pathogens, diagnosis and management. *Med Clin North Am* 1990;74:997-1010.

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**An excellent practical review of peritonitis occurring in chronic ambulatory peritoneal dialysis patients with a discussion of incidence, pathogens, diagnosis, and management.**

194. Keown P, Stiller C: Kidney transplantation. *Surg Clin North Am* 1986;66:517-539.

**An excellent and well-written review of kidney transplantation written for the primary care physician. Discussion centers around selection and preparation of the recipient, selection of the donor, perioperative care, immune suppression, graft rejection, and overall results of transplantation.**

195. Hanteo D, Simmons R: Renal transplantation: Clinical considerations. *Radiol Clin North Am* 1987;25:239-248.

**An excellent brief overview of renal transplantation with excel-**

**lent diagrams of the transplantation procedure that can be used for patient education.**

196. Rao K, Anderson R: Liver disease after renal transplantation. *Am J Kidney Dis* 1992;19:496-501.

**A brief but well-written overview of liver disease that occurs after renal transplantation including etiology, pathologic spectrum, and natural history of specific liver diseases occurring in the transplant patient.**

197. Gray J, Kasiske B: Patient and renal allograft survival in the late post-transplant period. *Semin Nephrol* 1992;12:343-352.

**A very practical overview of the discussion of the complications that occur in the transplant patient several months to years after transplantation including cardiovascular disease, infections, neoplasms, liver failure, and graft failure.**

198. Ramos E: Recurrent diseases in the renal allograft. *J Am Soc Nephrol* 1991;2:109-121.

**An excellent review of the renal diseases that recur in the transplanted kidney.**

199. Sharpentier B, Hiesse C, Criaa F, et al: How to deal with the hyperimmunized potential recipients. *Kidney Int* 1992; 42(Suppl 38):S176-S181.

**A practical review of the clinical management of the patient that is hyperimmunized but a potential recipient for renal transplantation.**

200. Rao K: Mechanism, pathophysiology, and management of renal transplant rejection. *Med Clin North Am* 1990;74:1039-1057.

**An excellent review covering all aspects of renal transplant rejection, including mechanisms, pathophysiology, types of rejection, laboratory abnormalities, and management.**