

### Glucosamine for osteoarthritis of the knee

Editor, –The article on glucosamine (Aust Prescr 2004;27:61–3) understated a couple of points. Firstly, that 'both trials were sponsored by the Rotta Research Laboratorium and used that company's formulation of glucosamine sulphate'. Surely this implies some considerable bias. Secondly, because no glucosamine product in Australia has an AUST R rating by the Therapeutic Goods Administration, does this not also imply that the products in Australia may be subject to qualitative and quantitative variations to the product studied and therefore may not produce the same or any therapeutic effect? This point is implied by the author who states 'this formulation may differ from those available in Australia'.

While glucosamine may have a unique mechanism of action, is this not thrown into doubt by the 'poor correlation between structural and symptomatic responses'? Regardless, where are the well-designed comparative trials necessary to show that glucosamine is better than standard therapy? Previous comparative trials were poorly designed, of short duration and involved small numbers.

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*Associate Professor G. McColl, the author of the article, comments:*

Both of the major randomised controlled studies were sponsored by the Rotta Research Laboratorium and this may have introduced bias into the studies. This notion, of course, would also have to apply to the majority of medications available on the Pharmaceutical Benefits Scheme, as the studies supporting their listing would also have been supported by their manufacturers.

The issue of 'qualitative and quantitative' variation in glucosamine products available in Australia is a significant one. In the purest view of evidence-based medicine we should only use the preparation that was tested in the study. As the Rotta glucosamine product is difficult to access in Australia this creates a problem. In practical terms, however, it is reasonable to extrapolate the data from these studies to 'reputable' glucosamine products in Australia, particularly if a therapeutic trial of three months is recommended.

No high quality trial has compared routine therapies such as paracetamol or non-steroidal anti-inflammatory drugs to glucosamine. I agree that this is a deficiency and will hopefully be addressed by a current study sponsored by the National Institutes of Health in the USA.

## Book review

### Australian Medicines Handbook 2004

**Adelaide: Australian Medicines Handbook; 2004.**

**788 pages. Price \$152; students \$99; plus postage**

*Tracy Soh, General practitioner, Canberra*

The Australian Medicines Handbook was developed jointly by the Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists, the Pharmaceutical Society of Australia and the Royal Australian College of General Practitioners. It was designed as a national formulary that would provide concise, up-to-date, independent drug information to facilitate better prescribing and dispensing practice. The contributors to the handbook represent all disciplines and all parts of Australia.

The latest edition is a well presented and simple to use, practical formulary of most of the drugs currently marketed in Australia. As with previous editions, the information is well researched and reflects current and reliable sources. The new edition provides several new sections including HIV, hepatitis B, hepatitis C, tinnitus, macular degeneration, functional dyspepsia and prostatitis.

The handbook is organised broadly according to organ systems and clinical presentations. Each section provides an overview of the clinical problem and the general considerations involved in treatment, including a brief summary of the available classes of medication. It subsequently presents a monograph of each class of medication which includes comparative information between medications within that class and specific practice points. The handbook then details the key features particular to each of the drugs within that class including specific indications and dosage.

The presentation of the information makes the handbook a useful tool for quick reference during clinical practice. The logic and consistency of the format of each section makes the relevant information easy to find and quick to read.

The Preface suggests that the handbook may be used as a learning tool for students – the clinical approach would provide a good structure for students to base their learning upon. However, the information has been well summarised and medical students are likely to need more detailed references.

I found this book to be a useful and practical addition to the available information resources for general practice. Its compact size makes it portable enough to carry to home visits and on the ward. It is a well designed tool to support the practice of evidence-based medicine.