

Preface

"Life is short; and the art long; and the right time an instant."

HIPPOCRATES (460-370 BC)

"It is scant modesty for man, even if he is 'the highest vertebrate' to presume that he can predict the cosmic plan on the intensity of his joy and pain, or cement the stars together with even his highest aspiration."

HOMER SMITH

FROM "FISH TO PHILOSOPHER." BOSTON, LITTLE BROWN, 1953

During the last few decades we have witnessed the development of a true and authentic revolution in diagnosis of disease processes, due to major conceptual and technological advances in cellular and molecular biology, genetics, immunology, chemistry, biochemistry, physics, and bioengineering. This technical revolution has been accomplished by the introduction of diagnostic methods undreamed of even 30 years ago.

Thus, ultrasound, computerized tomography, magnetic resonance imaging, positron-emission tomography, endoscopic techniques, and a remarkable array of laboratory tests such as immunoassays and immunohistochemical techniques using polyclonal antisera and monoclonal antibodies for the demonstration of a variety of gene products and *in situ* hybridization for the analysis of gene transcription in individual cells are examples of this veritable revolution in diagnosis.

These technological and laboratory advances have augmented diagnostic capabilities to an unprecedented degree of accuracy and reliability, especially for the new generations of physicians who were trained after "the booming" of the basic sciences relevant to medicine. However, the availability of this sophisticated armamentarium has inescapably created a number of unique problems in modern medicine.

First, clinical diagnosis based on skill and ingenuity in history taking and on meticulous physical examination may be in decline because of

overconfidence and at least partially because of justified reliance on diagnostic tests. Second, diagnostic and laboratory tests may be ordered without the prior formulation of a working diagnosis and without concern for their real value, sequence, and cost or their depersonalizing effect on the physician-patient relationship.

Third, the need for an integrated approach, that is made more difficult by the organ systems approach due to strict and intense specialization, is now absolutely necessary.

The most outstanding issue of concern, however, is the realization that despite the advances in medical technology, a large number of diseases still defy our diagnostic acumen, especially early in their evolution; chronic pancreatitis and pancreatic cancer are good examples in this respect.

The choice of topics in this issue on "Difficult Diagnoses" is based on my experience in the "Morning Report" which is held daily in a "group think" fashion in this Medical Service, with Faculty and Housestaff from general internal medicine, and the various subspecialties in attendance.

It would appear that despite the technical revolution, human judgment is still the key to accurate diagnosis. In this era of cost-effective utilization of resources, of relentless specialization, and of burgeoning biotechnology, the emphasis should be on the combination of meticulous bedside clinical data gathering and on the judicious and rational use of laboratory tests, imaging, and other available diagnostic procedures.

It is with considerable satisfaction that I have edited this issue of the *Medical Clinics of North America*. This work is enthusiastically dedicated to our patients and to the Faculty, Housestaff and Medical Students in this Medical Service; to the invaluable Nursing Staff and Allied Health personnel in this Medical Center for their dedication to high quality patient care; to the Department of Medicine and Surgery of the Veterans Administration; and to its Research and Development Service for its commitment to improving the care of the sick veterans through basic research and clinical investigation.

Finally, I do hope that the topics discussed in this issue by an outstanding group of authors will be of some value to practicing physicians.

I wish to express my appreciation to my assistant, Hedy Towan, and to my secretary, Sue Beets, for their continuing support and dedication.

MICHAEL C. GEOKAS, MD, PHD

Guest Editor

Medical Service
Veterans Administration Medical Center
150 Muir Road
Martinez, CA 94553