glossary of the terms and notation used. Each chapter ends with a comprehensive list of references, which includes both up to date citations and also the “classics”. A feature, which the authors use to great effect, is the liberal inclusion of both real and hypothetical examples; these help to consolidate new concepts, and are essential for the innumerate in following the statistical procedures. This is a very practical book. Even a novice will be able to use the techniques described in the first section, and to follow, at least conceptually, the procedures described in the second.

As with all books, there are minor irritations: table 6–3 is 11 pages away from its first and only mention; the OPCS has superseded the Ministry of Pensions (p113) as a source of vital status tracing; and the style of English is stodgy in places. Nevertheless, this is an excellent book, which should be on the shelves of every library. It will be invaluable to anyone with an interest in oncological epidemiology, and especially to professionals who do not have ready access to the support of a statistician.

F L R WILLIAMS
O L LLOYD


The role of the human papillomavirus (HPV) in the etiology of cancer of the uterine cervix has been one of the most intriguing epidemiological issues of the last decade. Initiated by the key assertion that the key agent that the key agent had been identified has now been tempered by a realisation that HPV 16/18 can also be identified in the normal cervix and that integration of virus DNA into tumour cell DNA does not necessarily reflect a causal mechanism. Nevertheless, the debate is not yet over, particularly with the continued development of DNA technology and the recognised deficiencies of previous studies, and this book gives an authoritative and readable account (even to the non-specialist) of the story up to last year.

The book is divided into eight chapters: four dealing with the epidemiological evidence, two with DNA hybridisation techniques and the experimental evidence for HPV oncogenicity, and two with clinical issues. Most readers of this journal will turn eagerly to the last chapter, which summarises and tabulates the 30 or so published epidemiological studies and discusses the methodological difficulties encountered. There is also considerable interest for the epidemiologist enthusiastic in the chapter on time trends and on measurement error. But this is not just a book for the expert. I was gratified to be able to read with reasonable comprehension of the chapter on DNA hybridisation techniques: an understanding of the strengths and limitations of HPV identification is as important as an understanding of the methods in assessing the available evidence. The chapter on oncogenicity is more closely written but it is only four pages long and it rewards a little concentration.

This is an ideal sort of book: short, readable, paperback, well referenced and with a good eight page summary. Although it deals with a rapidly changing field, the book


This paper back has been written by a medical doctor with a long track record of work in the Danish national health and environmental protection administration, following a period as a visiting scholar at the University of North Carolina in the USA. The research for the work was carried out in 1982 and the text written in 1983. The work has already formed the basis of a PhD degree and appeared as a supplement to the Scandinavian Journal of Social Medicine.

The book is in four parts, each with one or more chapters. Part 1 comprises a background; part 2 covers various aspects of our environment including air, noise, water, food, work, home and chemicals; part 3, the process of decision making, principally in Denmark and the USA; and part 4, a short summary of the politics of disease prevention. There is one 1984 reference in the text and a few for 1982, but most of the references, which total over 500, are for 1981 or earlier.

Although aimed at medical doctors and other health and scientific personnel in the fields of public health policy and administration, a lack of environmental health administration, it is not a reference work. Moreover it is difficult to envisage such a wide appeal for a book with this title which barely mentions the environmental health industry, one of the biggest political issues in environmental health in the past forty years. Indeed the nuclear industry merits only one paragraph, a brief mention of the Three Mile Island incident in 1979. It seems odd for a book with this title to be published in 1989 which makes no mention of Chernobyl, nor the effect this has had on the politics of nuclear power.

Although the author justifies the large publication on the grounds that the functions of our administrative and political systems are changing slowly, not many would be prepared to agree.

IAN G JONES


This is the proceedings of a workshop held in Copenhagen in March 1986 and sponsored by the Health Services Research Committee of the European Economic Community. As a step towards European collaboration in the assessment of health care technology—a difficult task which only a few researchers in each country—it is welcome. Nevertheless, it must be judged against the high standards set by the published proceedings of two previous workshops devoted to health technology assessment: that held in Switzerland in April 1982 and devoted to renal dialysis, computerised tomography and cimetidine; and that held in Birmingham in October 1984 and devoted to economic perspectives on health technology assessment.

Judged by these criteria, the book devoted to new stone treatment methods is disappointing. First, it engenders real concern that neither the theory nor the practice of health technology assessment has advanced since 1982, at least in Europe. Of the 17 authors listed, none claim to have tried, or even begun, to assess extracorporeal shock wave lithotripsy (ESWL), only the United Kingdom generates a chapter that is both clear and detailed. That chapter tells how the randomised trial proposed by the Australian group was rejected as unethical by urologists confident that ESWL was markedly superior to all other therapies. Unfortunately, the descriptive, and therefore much weaker, study that replaced the proposed trial has since suggested that ESWL may be less effective, and less efficient, than percutaneous nephrolithotomy. Thus, although the book is an attempt to make the transition of research from the laboratory to the ward, it does not even succeed in illuminating the decisions faced by those faced with the decision of whether or not to use a technology—characterised their predecessors. The result is a pot-pourri of contributions from seven countries that will tell researchers little about new kidney stone therapies, and urologists nothing about health technology assessment.

IAN RUSSELL


The recent national survey on disability has highlighted the extent of need amongst those living in the community. This book reports on one local survey carried out between 1977 and 1983 in the London borough of Lambeth. We are told that the various earlier community surveys, referred to in the text as the “Lambeth studies”, were planned as an inquiry to provide information on the epidemiology of disability, in order to apply this information to health and social policy questions affecting the community, and disabled people in general.

Donald Patrick introduces the book with a chapter on the concepts of impairment, disability and handicap from the International Classification of Impairments, Disabilities and Handicaps (ICIDH), published by WHO in 1980. After opening chapters which deal largely with methods, the book is loosely structured on these concepts, with later chapters dealing with impairment