BOOK REVIEWS


Passing comment on ideas that are considered orthodox or hegemonic is no easy task. This is arguably the case with health inequalities. Such is the enduring effect of the Black report and the health divide on a generation of new public health practitioners and critical health promoters, that any critique which deviates from common sense assumptions around the moral importance of reducing such inequalities can be seen as either ill informed or reactionary in updating the scientific data that establish the scale and nature of inequality, this present text clearly builds on this unashamedly moral and politically driven research tradition. As a descriptive exercise, this may be enough. The book, however, runs into problems as a result of its ambition to go beyond this and address solutions to the perceived problems.

Until now, one could argue that relatively simplistic analyses of the nature of the causes of inequalities have been matched by the proposal of equally simplistic, generalised, and blunt solutions. As such, it is perhaps unsurprising that our level of sophistication in addressing these issues appears to have developed very little in the past 15 years. This text is clearly aware of this problem and closes by arguing for an emphasis on solutions. However, despite the authors' opinion that we have seen 'ever more sophisticated statements on the extent of the problem,' it could be argued that we still have not engaged in a serious enough analysis of the dynamics of inequalities and that without this, serious attempts at action will always be under-informed. Fox and Benzeval only state that 'their aim has, not to explain to the precise causes of social and economic variations in health'. In doing so, they turn their back on a host of valuable insights from contemporary sociology (eg debates on the individual-structural relationship) and political science (eg ideas on the relationship between incentives and dependency).

Finally, the text constructs the phenomenon of inequalities from a particular perspective and bypasses others. We hear nothing from methodological individualists or the 'anti-welfare' school of Marsland, Minford, Murray et al. While many may find these views morally offensive, the inclusion of such thinking would have provided a more balanced, comprehensive, and structured view, and more importantly, would have avoided the tendency for vastly differing forms of activity to be seen as contributing towards reducing inequalities.

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This comprehensive book on pharmacoepidemiology involves the contributions of 59 authors in addition to the editor Brian Strom. The book aims to be both a reference source and a textbook, and it indeed fulfills both roles admirably. For those new to the subject area there is a comprehensive introduction section which forms part 1 of the book defining 'What is pharmacoepidemiology?'. This discusses when studies should be conducted and what study designs are available. There are also a couple of very practical chapters on the basic principals of clinical pharmacology which are relevant to the pharmacoepidemiologist, and a section on sample size calculations which is supplemented by tables as an appendix to the book. Part 2 of the book includes perspectives on pharmacoepidemiology from academia, industry, regulatory agencies, and the courtroom. These sections are all written from the United States and relate almost exclusively to that country. This is particularly true about the chapter on legal aspects. A substantial amount of the book is devoted to reviewing the systems for collecting information on drug use which are available for conducting studies. This section is more international, including a chapter on substance reporting systems outside of the United States and which chapters devoted to data collection systems in, for example, Scotland, The Netherlands, and Canada. Of particular interest to those already working in the area will be section 4 which considers specific methodological issues in the field including economic evaluation of pharmaceuticals, quality of life measurements, n-of-1 randomised clinical trials, and the use of meta-analysis. There is a particularly clear and well written chapter on the important issues of bias and confounding. Finally, the editor devotes a chapter to his personal views of the future of the subject. This is a quite superb book, useful to both the novice and the experienced epidemiologist alike. It is well laid out and written in a style which makes the reading enjoyable. I could find few typographical errors and the index provided to the book is extensive. For those working the area, and especially if only intermittently, this will be an invaluable source of information and one well worth persuading your local librarian to purchase.

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This is one of a series of multi-author American texts which have covered various aspects of addictions, the subject here being the role of alcohol and drugs in accidents.

All chapters but one concern alcohol, and the main themes are the prevalence of alcohol use prior to car, air, or aquatic accidents, mechanisms of adverse effects of alcohol on performance, prevention, and economic variations of addiction, and clinical treatment of offenders and at risk individuals. There is some consideration of the effectiveness of media campaigns, while drunk driving is examined in various sections, from adolescent attitudes through to the effectiveness of clinical treatment, to novel measures such as car ignition devices which can check blood alcohol levels. Other aspects, right up to date, include the issue of liability of barpersons who have served intoxicated individuals. There are the usual overwhelming statistics linking alcohol use to driving impairment, but much of the work reviewed here suggests some hopeful signs emerging from changing attitudes and behaviours. As in alcohol and drug abuse generally, prevention is clearly preferable to having to resort to clinical treatment of the problems of young people receive attention, ranging from situations such as having to ride home with an impaired driver, to the particularly reckless driving behaviours where alcohol abuse is associated with other deviant characteristics.

Given that only one drug is considered here, cocaine is a good choice. Crack cocaine is strongly associated with violence and the accused psychotic effects, and of the withdrawal effects, and the high stakes in dealing and criminal activity. Its contribution to American murder rates and rates of accidental injuries is re-examined here along with some clinical aspects.

There is much interesting information on alcohol and accidents contained in this book, and one involved with the subject in advisory or other capacities is unlikely to find a better reference source.

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