

multivariate analysis are presented without adequate definition of the variables used and in a way which emphasises significance tests rather than measures of effect. However these deficiencies are minor, and there is much of value and interest in this book which will be useful to all those interested in the twinning process.

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**Functional disorders of the menstrual cycle.** Eds: Brush MG, Gouldsmit EM (Pp 314 £45.00) Chichester: John Wiley, 1988.

Many women experience some degree of distress, both emotional and physiological, related to the menstrual cycle. Although the exact incidence is hard to assess, about 10% of menstruating women suffer from premenstrual symptoms which affect their functioning and wellbeing, and at least another 70% notice some cyclical changes. The exact causes of premenstrual syndrome (PMS) remain obscure and complex; and reflecting this uncertainty, treatment rests often on trial and error rather than proven effectiveness. Other problems with the menstrual cycle include dysmenorrhoea, menorrhagia, cyclical breast pain, menstrual headaches, and endometriosis.

The editors have drawn together the large and growing literature on the diagnosis, causes and treatment of menstrual problems, concentrating particularly on the premenstrual syndrome, but also covering other problems in some depth. The overall impression from the nine chapters discussing PMS is that the area remains conflicting and contradictory; thus while the chapters on endocrine factors in the aetiology of PMS present a convincing argument for the definitive role of physiological agents, others describe the syndrome as primarily psychosomatic or related to lifestyle or personality, and discuss the value of psychological treatment. To its credit, the book includes a variety of viewpoints, including the interrelationship between PMS and environmental factors, although there is a tendency for each chapter to present its views, sometimes arising from scanty research, as facts rather than possibilities. I would have liked a chapter synthesising what is known, perhaps highlighting the fact that PMS must reflect complex, multifactorial causes.

The last six chapters provide a useful overview of menstrual disorders, endometriosis, hyperprolactinaemia, menstrual headaches, and cyclical benign breast disease.

It is the aim of the book that it should be a source of reference, not only for researchers, but also for doctors and others whose work brings them into contact with

women with menstrual problems. I felt that clinicians might have some problems extracting clinically useful material from chapters on PMS, and would need patience to wade through the repetitive material and contradictory ideas presented. The chapters on other disorders were more clinically relevant. The book's value lies in its comprehensive coverage of the published reports and it would be of use to researchers new to the field. However, the price of £45 is no doubt prohibitive to many, and unless available in a cheaper edition, I suspect the book will remain a reference source in libraries.

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**UK smoking statistics.** Eds: Nicholas Wald, Stephanie Kiryluk, Sarah Darby, Sir Richard Doll, Malcolm Pike, Richard Peto (Pp 197; £35.00) Oxford: Oxford University Press, 1988.

This is a comprehensive description of smoking in the United Kingdom. It includes much which has not been published or widely available in the past and is a helpful, single volume source of statistics of smoking prevalence, per capita consumption, yields of tar, nicotine and carbon monoxide of individual brands and much more besides.

Few data can be presented uniformly for the century that cigarettes have existed. For the first 50 years, before the explosion of scientific evidence showing the harmfulness of smoking, few statistics were gathered. During the fifties, as the first major studies came in, far more detailed collection began. In those days the tobacco companies were committed to research, in the hope that dangerous ingredients could be identified and subsequently removed, making cigarettes safe. The industry's Tobacco Research Council became a leading source of data, but as adverse research piled up, genuine scientists lost their influence within the industry and power shifted to marketing men who simply wanted to sell as many cigarettes as possible regardless of the evidence. In 1975, the TRC was closed down.

The main source of reliable prevalence data nowadays is the Office of Population Censuses and Surveys, but its surveys tend to underestimate total consumption, due to underreporting. The industry often exaggerates consumption, sometimes wildly so, to try to portray smoking as less of a minority habit than it now is. Caution is also required with emission levels of individual cigarette brands—"low" tar

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smokers often inhale considerably more carcinogens than machine measurements would indicate.

The book is well presented and illustrated with bar charts and graphs. Professor Nicholas Wald and Dr Stephanie Kiryluk have taken pains to present the maximum amount of data as clearly as possible, with the able assistance of the other editors.

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**Housing and health in West Belfast: a case study of Divis Flats and the Twinbrook Estate.** Eds: Blackman T, Evason E, Melaugh M, Woods R (Pp 54). Belfast: Divis Joint Development Committee, 1987.

The study is a comparison of the extent of self reported ill health in adults, and of ill health in children as reported by the "mother figure", between two deprived areas of Belfast, the Divis Flats and the Twinbrook Estate. The study was undertaken at the request of residents in Divis in order to determine whether the bad housing conditions in the Flats had an adverse effect on health independent of that of socioeconomic deprivation.

The main result was that, indeed, respiratory conditions and psychological distress in both children and adults, and diarrhoea and vomiting in children, were reported more frequently in the Divis Flats than in the Twinbrook area. However, at the time the survey was commissioned, four of the original twelve blocks in the Divis Flats had been demolished, and the remaining eight were to be refurbished. This was contrary to the wishes of the residents, who wanted to be rehoused.

As the data were selected by interview, and the interviewers were mostly local women, the potential for interviewer bias was substantial, although interviewer training (of an unspecified type) was carried out. Respondent bias is also likely to have been a significant problem, since a much higher proportion of residents in the Divis Flats than in the Twinbrook area reported that they thought that the housing defects had an impact on their health. The authors make reference to other studies where self reported measures of ill health and of housing defects have been found to be in reasonable agreement with other sources of information, but these validation studies cannot be taken as applicable in the present context. Positive features of the study are that the response rate was high, 85% or more in both areas, and that potential confounding variables such as income and smoking behaviour were considered.

The Northern Ireland Housing Executive now accepts that the Divis Flats should be demolished, and this will provide an opportunity to evaluate the effects of improved housing. The long term effects of a high prevalence of smoking and of potential asbestos exposure will need to be taken into account.

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**Daughters who care.** Eds: Jane Lewis, Barbara Meredith (Pp 194; £8.95) London: Routledge, 1988.

Since the late 1970s there has been a steadily growing body of published research dealing with the experiences and needs of informal carers, although this has remained small in comparison to the large amount of clinical and health services research addressing issues to do with the care of disabled people. Much of the research on carers has been largely descriptive, focusing on needs for support. Relatively little has dealt with the social construction of caring relationships over time, the emotional and psychological components of caring and the quality of relationships between those who care and those who are cared for.

Jane Lewis and Barbara Meredith have attempted to address some of these issues in this book. They offer a detailed account of the experiences of 43 daughters, all of whom had ceased caring for their mothers on a co-resident basis within the preceding 10 years. All of the women interviewed were volunteers, all lived in the Home Counties and two thirds were described as coming from middle class backgrounds. The in depth interviews dealt with the decision to care, the nature of caring and how this changes over time, the mother-daughter relationship, the carers' "other lives", informal and service support and the continuing legacy of caring even when it has ended. Their objective was both to develop a vocabulary and methods of researching caring relationships and to provide a dynamic account of these relationships.

The book provides a detailed account of the lives of these 43 carers under the various headings mentioned above. It goes beyond the straightforward documentation of carers' needs and explores the historical construction of the relationships and the ways in which caring changes over time. It is less successful in providing a more generalised theoretical or methodological framework. There is at times too much descriptive material and insufficient discussion