Book Reviews


The foreword describes this book as “about concepts and methods of surveillance in health care”. It does this very competently, in breadth and depth, in both general principles and practical applications. The general aspects include a history of surveillance, indicators, action and benefit, and ethical dilemmas. The book covers surveillance from hospital and primary care data, examines surveillance of congenital malformations and the perinatal period and looks at several disease groups such as cancer, cardiovascular disease, communicable disease and mental illness. It describes surveillance in occupational health, accidents, nutrition and physical and chemical environmental hazards. The last three chapters cover surveillance for alcohol abuse, adverse reactions to drugs and poisoning. Chapters end with a few dozen well chosen references. The concept of surveillance is slightly different with the various aspects that are covered and the editors have allowed reasonable individuality of approach in the 23 chapters written by authors from 10 countries in western Europe. The book was published on behalf of the Commission of European Communities, to complement earlier volumes on Health care and epidemiology (1978) and Evaluation of health care (1983), to promote better communication between health care policy makers and administrators, clinicians, and epidemiologists. Its widespread use would achieve this, although epidemiologists may regret that the book does not include the more detailed statistical aspects of surveillance. The book abounds with examples and illustrations. It can be dipped into for interest, read systematically or consulted for reference. This publication maintains the high prices and standards of Oxford Medical Publications and looks as if it will stand up to the hard use it deserves. While any book such as this must date with time, this one should remain as a record of the present state of the art. It is highly recommended.

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Written as a companion volume to the author’s Survey methods in community medicine, this book aims to

“provide readers with basic epidemiological concepts and skills that will help them to appraise published reports as well as their own findings”.

The emphasis of the text is upon evaluation of bias, control of confounding and assessment of causality. Technical details of data management and statistical analysis are not covered, although no statistical knowledge is assumed. Most of the examples use dichotomous outcomes, and it was refreshing to find a non-technical introduction to the interpretation of results from multiple logistic regression analyses. An attempt is made to bring out the essential unity of approach in controlling confounding for both categorical and continuous measures of disease, but the reader is referred to basic statistical texts for much of the detail concerning analysis of continuous variables.

This is a book for working through rather than for reference or revision. New concepts are introduced in the form of problems to be attempted by the reader before more explicit coverage in the following chapter. This has the advantage of testing and using the reader’s prior knowledge, but the drawback is that related material may be scattered through the book and is difficult to review later on. For instance, odds ratios are introduced in the context of longitudinal studies, but their special relevance to the interpretation of case-control data is not emphasised until near the end of the book.

There is much excellent material here for study by individuals or small groups, but the linear structure in which it is introduced may limit its value for postgraduate students attending programmed courses in the public health sciences.

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This is probably the most comprehensive English guide to health statistics. It is certainly more user friendly than Dr Alderson’s previous Routine central government health statistics. In its central nine chapters the background, presentation and use of the principal routine statistics on mortality, registration and infectious disease notifications are summarised using a common layout. The descriptions, examples and references are mostly from England and Wales, although quotations and references from other countries (mostly USA, Scandinavia and New Zealand) and from the WHO are sprinkled throughout.