

measures of need and outcome for use in a primary health care setting. It is also much more than this. By combining a cogent and well written analysis of a range of established outcome measures with an insistence on a clear conceptual framework it offers an eloquent discourse on the science and purpose of measuring needs and outcomes. I learned a great deal from it.

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**Evaluating Health Services' Effectiveness.** By A S St Leger, H Schnieden, and J P Walsworth-Bell. (Pp 217; £14.99.) Milton Keynes: Open University Press, 1991. ISBN 0-335-09356-6.

The subject of health services evaluation is curiously lacking a book near to being described as a standard textbook. The interested reader, at all levels, must refer to a range of discipline based texts. The gap in the market is there, but has it been adequately met by Leger and colleagues?

To be fair, the authors do not claim the grandeur of textbook status for their book. It would seem closer to being a "taster" for those involved in decision making (eg, clinicians and managers), commissioning research, and students. The content of the book is extensive, covering a general overview of health services evaluation, routine information sources in the United Kingdom, study design, and methodological issues (mainly statistical and economic), and it has an interesting discussion of the role of health services evaluation in decision making. A serious omission is a reasonably detailed discussion of health status measurement. The material on routine information and quality adjusted life years fail to do this essential subject justice (eg, the Nottingham health profile only gets a mention in the appendix).

A key question is whether this book provides an adequate introduction to the main discipline for health services evaluation and hence at this level avoids reference to other texts. There is very little on the sociological literature. My own discipline of health economics had an entire chapter but has contained unnecessary material on market theory and yet was deficient on the area of prime interest, economic evaluation. I will continue to refer students to journal articles and Drummond's text.

Throughout, the authors succeed in avoiding unnecessary technical language, diagrams, or mathematics. The chapter on methods is especially readable. However, chapters 1 and 2, which introduce health services evaluation, are difficult to read and contain some poor definitions and odd mistakes. As an economist, my sensibilities were upset by the absence of cost in the definition of evaluation and the statement "Cost-effectiveness is the financial cost for a given outcome". (This error was not repeated later, where non-financial costs were acknowledged.) The authors failed to convince me

that the often contrived distinctions between goals, aims, and objectives add anything to Donebedian's framework for health services evaluation.

The authors are clearly committed to evaluation and its growing importance. In overall tone the authors have a sensible and pragmatic view of practical health services evaluation. However, as an introduction to the subject this book is unlikely to replace existing disciplinary texts.

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**Ethics and Epidemiology: International Guidelines.** Eds Z Bankowski, J H Bryant, and J M Last. (Pp 191; SF 25.) Geneva: WHO, 1991. ISBN 92-9036-048-8.

This book has two components: the proceedings of the conference, and the ethical guidelines revised in July 1991 as a consequence of the views expressed at the conference.

International guidelines for ethical conduct in epidemiological research add some important issues rarely discussed at the purely national level. When research is carried out in developing countries by sponsors from developed countries there is a potential for exploiting individuals and communities which the CIOMS guidelines explicitly recognise. Several conference participants discussed the question of ethical universality versus ethical pluralism and agreed that pluralism cannot be used as an excuse for doing research that may be acceptable in terms of local customs but nevertheless violates fundamental human rights.

A developing country should not be induced to accept epidemiological research that is irrelevant to the country's main health problems. Not only should the research be relevant, but its results should be used to benefit the people of the host country. This point is so important that I believe the guidelines should go further and require that specifications for local dissemination and application of the results of research be an integral part of the protocol that is submitted for ethical review.

The participants recognised that in some epidemiological studies, informed consent at the individual level is impracticable. But they caution against jumping to this conclusion merely because the subjects, especially in a developing country, are poor or uneducated. When consent at the community level can be justified, it is recommended that reliance on a single figure of authority be avoided and that every attempt be made to identify individuals who can speak authentically for the people of the community.

The need to build a capacity for ethical review in developing countries is emphasised. This is important, since the guidelines recommend that in externally sponsored research, ethical reviews be conducted both in the sponsoring country and in the host country.

This book deserves to be carefully read by epidemiologists. It offers an excellent foundation for the further development of ethical guidelines for our discipline.

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**Autopsy in Epidemiology and Medical Research.** Eds E Riboli and M Delendi. (Pp 277; price not stated.) Lyons: IARC, 1991.

It is rare that one finds the proceedings of a meeting of epidemiologists adorned on the front cover with a picture of a 1632 Rembrandt. The promise of timeless quality and the casting of new light on a familiar topic (as Rembrandt did in so many of his works) beckons one to read on. So it is with *Autopsy in epidemiology and medical research*.

This publication reports the proceedings of a 1989 meeting in Trieste on necropsies sponsored by the International Agency for Research on Cancer. It is not too surprising therefore that of the 29 papers presented, nine are concerned entirely with cancer and most of the remaining 20 include analyses relating to cancer. On the other hand, there is much in this volume of interest to the epidemiologist whose interests are not in the cancer field. For example, there is one section of three wonderful papers (all of them gems) dealing with necropsy in the neonatal period. The need for such attention is summarised by the title of the first paper in the section: "The perinatal autopsy: a neglected source of discovery."

Another aspect of necropsy that is addressed is the need to relate the findings of such work to a population. The necropsy experience of the well known Rochester, Minnesota, population based study is ably reported. Also included is a detailed description of the national necropsy system in Japan. Other population based data relating necropsy to observed disease patterns are provided as well.

Whether one is an epidemiologist or a clinician, one would be hard pressed not to place a high value on necropsy data in an epidemiological context after reading this volume. It is an enlightening compilation. Hopefully, it will assist in reviving the necropsy. My only regret in reading this book was that I was not in Trieste to hear the presentation of the papers—their quality suggests that the discussions must have been high powered indeed!

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**Home Care for Older People in Europe.** Ed A Jamieson. (Pp 356; £45.) Oxford: OUP, 1991 (CEC Health Series No 7). ISBN 019-2620509.

All over Europe, services for older people face increasing demographic pressure at a time of limited economic growth. This cross national study of home care documents, somewhat