

This is stirring stuff, riding on the swell of the "new NHS". In the third section, however, David Morell conducts a scholarly and scathing dissection of the recent changes in GP contracts, leading directly into Denis Pereira Gray's well considered case for much increased academic support for general practice. David Jewell, Tom O'Dowd and A D Wilson, and Richard Baker outline the enormous benefits which would arise from increased support—new and more relevant forms of medical education, medical care delivered to optimal (but flexible) standards, and a new tradition of accountability through medical audit.

Clive Richards ends the book by considering whether anyone will want to be a GP in this brave new world, reminding us that the health of the doctor is at least as important as that of his or her patients.

This collation is intentionally polemical: it will likely raise many hackles but it will also make us take stock of our hitherto sacred cows. For that reason, the book should be incorporated in the prescribed list for training practices, and those doctors who do not archive their BMJs might do well to purchase it.

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Maxcy-Rosenau-Last Public Health and Preventive Medicine. Eds J M Last, R B Wallace (Pp 1257; £75.) New Jersey: Prentice Hall, 1992. ISBN 8385-6182-9.

Following hard on the heels of the second edition of the *Oxford textbook of public health*, the 13th edition of another major textbook—the *Maxcy-Rosenau-Last Public health and preventive medicine*—has recently been published. It is also a massive tome comprising 75 chapters written by 166 authors, many of whom are well known experts in their respective fields in North America.

With such a well established textbook, readers expect a traditional approach, and this is indeed what they get. Following a very brief introduction to public health methods, the reader is launched into over 300 densely packed pages covering around 60 communicable diseases—everything from paragonimiasis to AIDS! Each disease is covered systematically with many excellent headings, so that it is possible quickly to home in on the relevant information. I discovered, for example, that the incubation period of Kyasanur Forest disease is 5 to 8 days! There are facts galore for the public health doctor. This is also true in the major section on environmental health, providing coverage of topics such as radiation, water quality, and housing. Occupational health is also included; an interesting chapter on special working groups describes current occupational hazards for women and minority workers. It also discusses the problems of child labour which many might naively imagine had disappeared in developed countries.

Behavioural factors affecting health are dealt with in another part of the book, with emphasis on smoking, alcohol, and drugs. This leads nicely into a major section on chronic diseases. Cancer and cardiovascular

diseases are naturally given prominence, but again the coverage is comprehensive with inclusion of diseases affecting most of the main body systems. In keeping with modern times, a chapter on violence includes such topics as "spouse abuse" and "elder abuse". Finally, a section on health care planning comprises a rather disparate group of chapters on everything from family planning to military medicine—or maybe they aren't that disparate?

So, is this book any good? It is a comprehensive textbook and, in my view, is worth having as a means of quickly getting sound well referenced information on subjects with which readers may not be very familiar. It is not a book on methods and is too detailed for an undergraduate or postgraduate course textbook. Whether to go for Oxford or Maxcy-Rosenau-Last is very much a case of personal preference.

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Health Services Research—Key to Health Policy. Ed Eli Ginzberg (Pp 397; £31.95.) London: Harvard University Press, 1991. ISBN 0-674-38575-6.

Health services research claims to be an authoritative account of the current state of the art and science of health care research in the USA. As such it is uniquely American in its orientation, context and style. The serious non-US reader will first have to contend with three pages of three to seven letter acronyms. AMA and DRG may be familiar enough this side of the Atlantic but try dealing with TEFRA (Tax Equity and Fiscal Responsibility Act) or RBRVS (Resource Based Relative Value Scale).

On a more serious note, of the 11 chapters in the book, I found chapter 7, by Professor Newhouse, the most interesting. It describes in detail the RAND Health Insurance Experiment, a remarkable and probably unique attempt to study in an experimental setting the effect of different methods of financing health care on service utilisation and health outcomes. The broad conclusions are almost unsurprising: services are less often used when people have to pay part of the cost of health care; this reduction in usage appears to be mainly confined to inappropriate use. The results relating to health outcomes are less conclusive. In any case the RAND experiment was conducted in such a special setting that the results can hardly be generalised. Another chapter on quality of care provides some fascinating information on the appropriateness of medical care and on the health outcomes of standard procedures in different hospitals. It also addresses the twin issues of the public's role in assessing quality of medical care and its ability to understand and use such information.

The claim that health services research influences policy—a suggestion that appears even in the title of the book—is largely unsubstantiated. Would that it were so. It is rather the case that policy is led by political and economic considerations and influenced by cultural, financial, legislative, and ideological factors. What this book succeeds in

doing is to "enlarge the knowledge pool about how the US health care system operates . . .". It also points out how the system might be modified in order to "improve its efficiency and effectiveness", but there is nothing to suggest that policy makers act on these ideas.

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The Future of Health Care. Various authors (Pp 83; £8.95.) London: BMJ Publications, 1992. ISBN 0-7279-0742-5.

In October 1991 the BMA published a document entitled "Leading for health", in which it attempted to set the UK agenda for health in the 1990s. To answer some of the many questions raised, a series of articles was commissioned by the BMJ. These have now been republished as *The future of health care*. Despite its short length, this book covers a broad range of issues, including rationing, accountability, management, audit, research, and health care funding. The articles are well suited to a general level of readership, and useful references are given for further reading. Each contribution is from a respected figure in the mainstream of the health care debate. Given the space constraints, the authors make an excellent job of not only stating their own views and the basis for them, but also considering opposing arguments. There is a fair degree of overlap between the articles, particularly in respect of the issues of rationing and funding of health care, and it seems a pity that republication was not taken as an opportunity for the authors to comment on several important differences of opinion which emerge. Insofar as the articles represent a response to "Leading for health", it is also disappointing that the focus should be so firmly upon health care delivery rather than health in its broader context. However, at least the reader has been served with fair warning of this in the title of the book! Overall, the BMJ deserves credit for making available these eclectic and provocative pieces in a convenient and inexpensive format. For anyone interested in the future of the NHS, this book can be recommended as a useful starting point.

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Short Reviews

Health Services Research in Denmark. (Pp 540; \$US 38.) Copenhagen: P Bjerregaard, F Kamper-Jorgensen. The Danish Institute for Clinical Epidemiology. ISBN 87 89662 49 0.

This book describes almost 400 projects in health services research carried out in Denmark from 1989 to 1991. The projects are presented