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 and 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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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 repudiation 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 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.

CAMERON EDGELL
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This is a tilted and somewhat confusing article, 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 to Denis Pereira Gray’s well considered case for much increased academic support for general practice. David Jawell, 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 cow. For the reader, 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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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

Short Reviews


This book describes almost 400 projects in health services research carried out in Denmark from 1989 to 1991. The projects are presented for the guidance of health service planners. The books themselves have been divided into four categories: general health services planning, specific health services planning, health services delivery, and health care financing. Each project is described in terms of its aim, methodology, findings, and conclusions. The book is an excellent resource for those interested in Danish health care and should be of interest to those in other health systems as well.
in separate sections covering, for example, population surveys, prevention, technology assessment and development, health economics and analysis of need.


This short book published by WHO elaborates a number of guiding principles concerning the organisation of first referral hospitals, their integration into a system based on primary health care, and their technological requirements. Details range from advice on how to distribute tasks between health centres and hospitals, through measures which can be used to discourage "self referral", to a list of nine conditions which must be met before technical equipment is installed. The recommendations and advice reflect the consensus by a large number of experts having first hand experience in the management of hospitals.


All those who use hospital statistics need a clear understanding of what information is available, how it is structured, and the problems and pitfalls of interpretation. This guide answers 20 questions about routine health statistics, providing a summary of the information needed by statistics users. Points covered by the guide include the broad scope of official statistics and where they are published, the different sources of routine hospital data, the accuracy, completeness, and timeliness of the available data, and the potential pitfalls when conducting comparative analysis of health service indicators. This is a useful publication for those analysing hospital statistics.


At a time when the National Health Service is undergoing radical change, it is important to review the place of primary care and general practice. The South Western Regional Health Authority and the Primary Care Medical Advisory Committee commissioned such a review to be carried out by the Department of General Practice at the University of Exeter. Top priority centres, including definitions and purpose of primary health care, structure, process and outcome, and a framework for planning.

F R FOWKES

NOTICES


International Conference: "1993. The European Year of the Elderly: Healthy Aging". Date: 18–20 March 1993; place: World Trade Centre Rotterdam; contact address: SOGG, PO Box 23115, 3001 KC Rotterdam, The Netherlands; tel 31 10 436 7577, fax 31 10 436 7273.

International Conference on Chronic Diseases and Changing Care Patterns in an Aging Society. Date: 9–11 June 1993. Place: Amsterdam, The Netherlands. Deadline for abstracts: October 31, 1992. Further details from: Dr Trudi van den Bo, Institute of Social Medicine, University of Amsterdam, Meibergdreef 15, 1105 AZ Amsterdam, The Netherlands; tel 31 20 5664707; fax 31 20 6912401.

10th International Conference on Quality Assurance in Health Care. Date: June 20–23, 1993; place: Maastricht, The Netherlands; contact address: Conference Agency Limburg, PO Box 1402, 6201 BK Maastricht, The Netherlands; tel 31 43 619192, fax 31 43 619020.

13th Scientific Meeting of the International Epidemiological Association: "New Pathways in Epidemiology". Date: September 26–30, 1993; place: Sydney, Australia; contact address: Conference Secretariat, 13th Scientific Meeting of the IEA, PO Box 746, Turramurra 2074, NSW, Australia; tel 61 2 449 1525, fax 61 2 488 7496.

The 24th International Congress on Occupational Health will take place in Nice, France, on September 26–October 1 1993. The aims of the congress are to bring together professionals in occupational medicine from around the world and to promote the development of scientific knowledge in the field. For further information contact: C O 24 France, "Les Miroirs", Cedex 27, 92096 Paris La Defense, France. Tel 33-1 47 62 33 70; Fax 33-1 47 62 31 53.

All books reviewed in this issue are available from the BMJ Bookshop, PO Box 295, London, WC1H 9TE. Prices include postage in the UK and for members of the British Forces Overseas, but overseas customers should add 15% to the value of the order for postage and packing. Payment can be made by cheque in sterling drawn on a UK bank, or by credit card (Mastercard, Visa, or American Express) stating card number, expiry date and your full name.