
This book reviews the evidence from 10 prospective and 43 case-control studies of the relationship of passive smoke exposure to cancer, heart disease, and all-cause mortality among adults who have never smoked. Following a general critique of each study, the problems of interpreting evidence relating to lung cancer, other cancers, heart disease, other diseases, and overall mortality are discussed in turn.

The material is clearly presented and up to date (including footnotes added at the proof stage on studies published during 1991). There is extensive discussion of the possible sources of bias, but not always a clear distinction of their likely importance and direction of effect. Relatively minor criticisms of individual studies appear alongside more substantial issues such as the classification of smokers as non-smokers and publication bias (which tend to exaggerate the quoted relative risks), imprecision of measures (tending to dilute observed associations), and inconsistencies between the published risks and extrapolations based on dosimetric considerations (especially notable for heart disease, and therefore for total mortality). Greater use could have been made of meta-analytic techniques, particularly for investigating the relationship of passive smoking to histological subgroups of lung cancer, and comparing the effects of tobacco smoke exposure at home, at work, and in childhood.

The author concludes that “the evidence reviewed does not demonstrate that exposure to environmental tobacco smoke increases the risk of cancer, heart disease or other diseases among adult non-smokers”. This, of course, does not prove that no hazard exists, but simply highlights the limitations of the epidemiological approach to the assessment of low relative risks. This book deserves reading as much for its account of these methodological issues as its review of topical research material.


At a time when changing strategies in community care are a focal point of discussion in many countries, this book provides a pertinent account of the problems currently encountered by both stroke victims and their carers, together with their views on the adequacy of the support they presently receive.

Although this book is essentially a detailed account of one study, it begins with a comprehensive review of previous studies on stroke outcome. In this section, the author highlights the paucity of information available on the type of support which patients and carers themselves feel would be most useful. The study described consisted of an 18 month follow up of 173 stroke patients and their principal carers in Greenwich, London. Although the stated aim was to include all severities of stroke, the low recruitment of general practitioners (54%) must, inevitably, have resulted in failure to identify some patients with milder strokes who did not receive hospital treatment.

The most valuable contribution of this study to our knowledge of the effects of stroke, lies in its comprehensive consideration of all possible effects of stroke on both patient and carer. It contains not only quantitative data on survival, disability, and use of services, but also qualitative information on the feelings evoked by the stroke and the information and support provided. The author rightly draws attention to the atypical features of this study population, in particular the easy access of hospital services within Greenwich. Therefore, in the final chapter, the implications for more widespread policy changes drawn from these study findings were, by necessity, very general.

This is a well written book which provides both a useful and readable resume of previous stroke studies, as well as a worthwhile contribution to our knowledge of the effects of stroke and the needs and wishes of patients and carers. It should prove valuable to all health care professionals working with stroke patients or planning stroke services.