BOOK REVIEWS

Continuity and Crisis in the National Health Service. Ed Ray Loveridge and Ken Starkey. (Pp 225; £14.99.) Oxford: Oxford University Press, 1992. ISBN 0-335-15599-5.

Although many of us plead frequently for a period of stability so that we can "settle down and get things done", constant change should be intrinsic to an NHS responsive to evolving health, social and economic needs. This book, through a series of essays, explores the dynamics of change in the NHS and highlights some of the tensions in the present system, identifying a number of fundamental obstacles to innovation.

In their introduction, the authors establish two key themes: innovation in management practice and innovation in technology. Within the chapters themselves, however, a third emerges: the need to reconcile the forces of consumerism and citizenship if the NHS is to continue its development as an efficient public service. David Cox summarises this neatly in chapter 3 when he writes: "The general management movement initiated by Griffiths legitimates its activity in part by reference to quality of service and consumer satisfaction in health care. These values cannot be grounded in the emotivism of market preferences. They have to be set in the context of the intrinsic worth of all citizens in a pluralistic society and a commitment to equity and service".

A good book teaches you something about yourself and the world: a bad book reinforces your prejudices. This book does both. It offers useful new perspectives drawn largely from history, upon the current state of health care in the United Kingdom; but certain of these reinforced effectively my personal prejudice that unless an effective compromise is negotiated to the citizen-consumer dilemma, the future of the NHS is bleak indeed. The discussion in chapter 4, for example, highlights the pivotal role of the hospital consultant in facilitating or blocking change. The great majority of hospital consultants entered the profession to perform a public service. Finding themselves now working in an environment where managerial values are increasingly those of the market place, they easily become cynical and demoralised, with little appetite for change of any kind.

Unfortunately, although the book starts and ends well, the quality of the individual essays is variable. More rigorous editing and proof reading would have improved the work substantially. One or two of the contributions are rather dreary, and some, such as the discussion of general practice, are disappointingly superficial. Nonetheless, most of the book is well worth reading, and I would suggest that all those training in public health medicine should read it at least twice: once at the beginning of their training to get a "feel" for an important aspect of public health, and once a year or two later to be stimulated into thinking more critically about what has been and might be achieved.

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Environmental Tobacco Smoke and Mortality. By P N Lee. (Pp 224; £29.95) Karger, Basel, 1992. ISBN 3-8055-5529-6.

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 misclassification of smokers as non-smokers and publication bias (which tend to exaggerate the quoted relative risks), imprecise measurement of exposure (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 in 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.

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The Aftermath of Stroke. The experience of patients and their families. By Robert Anderson. (Pp 262; £35.00) Cambridge University Press, Cambridge 1992. ISBN 0-521-40196-8.

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.

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Design and Inference in Finite Population Sampling. By A S Hedayat and Bikas K Sinha. (Pp 377; £39.95.) New York: John Wiley, 1991. ISBN 0-471-88073-6.

This book was written for graduate mathematical statisticians and so takes a very theoretical approach which many researchers undertaking a survey may find rather daunting and too complex.

Throughout the 12 chapters information is presented in the "definition, theorem, proof, corollary, and remark" format. This makes reading hard going, especially in the first three chapters which form an introduction to notation, inference and the Horvitz-Thompson estimator, and in chapter 10 on the superpopulation approach to inference. The usual chapters on sampling with probability proportional to size, ratio and regression estimators, cluster, systematic and stratified sampling are presented in a slightly more digestible form, with longer discursive passages and examples interspersing the theorems. The final two chapters investigate sampling for a sensitive characteristic, and special topics including small area estimation, non-response and resampling techniques. These chapters give useful examples, relating theory to practice.

There are copious exercises and an extensive list of references at the end of each chapter. Unfortunately, since most of the exercises take the form "Verify..." or "Show...", no solutions are provided, even for questions of a more straightforward, computational nature.

The index will point the reader to the relevant passage, although whether this is found to be helpful will depend on the reader's background. No mention is made of deff (design effect) or roh (rate of homogeneity) which I found surprising. On the whole the typography and layout are clear; however there is an inconsistent use of n^{-1} and $1/n$ or $\frac{1}{n}$ which, when it is possible to use $\frac{1}{n}$, seems a pity.

All in all, this book is not an easy read. The presentation of the material requires a great deal of concentration on the part of the reader. For the graduate statistician it is a thorough and extensive text providing an in depth study of the statistical aspects of survey sampling. For the epidemiologist there are already many more useful texts which cover the theoretical and practical considerations of survey sampling (eg, *Survey design and analysis*, F R Joliffe, 1986; and *Survey sampling principles*, E K Foreman, 1991).

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Medicine, Patients and the Law. By Margaret Brazier. (Pp 479; £9.99.) London: Penguin Books, 1992. ISBN 0-14-012749-6.

Professor Margaret Brazier possesses an ability which is rare among lawyers. She is able to translate complex legal rules into language which is accessible to those without legal training, without sacrificing accuracy or attention to detail. The new edition of her book *Medicine, patients and the law* will therefore appeal to a wide audience. The lay public, members of the medical profession, lawyers, and law students should all find this book a useful aid to understanding important aspects of medical law.

Professor Brazier's stated aim is "to provide a picture of the role of the law in medical practice today and to highlight those areas where the law is woefully inadequate". Her book is divided into three sections. Part I examines the general legal framework in which medicine is practised. Part II deals with medical malpractice. Part III examines many of the "problem areas" of medical practice which pose particularly difficult moral and legal questions. These include abortion, embryo research, pregnancy and childbirth, the treatment of handicapped infants, organ and tissue transplantation, medical research, and treatment of the dying. The book therefore focuses upon the legal aspects of apparently "routine" medical practice, as well as obviously controversial subjects which are frequently the subject of newspaper headlines.

The obvious bias which often accompanies discussion of these issues is noticeably absent from Professor Brazier's analysis. Yet nowhere is sight lost of the important human dimension of medicolegal problems. The questions she raises and possible solutions she offers therefore represent an important contribution to debate in this area. This book should be read by anyone who is interested in finding out more about medical law, and how it does or should respond to the ethical and social dilemmas posed by the progress of medical science.

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Recent Advances in Epidemiology and Prevention of Gallstone Disease. By L Capocaccia, G Ricci, F Angelico, M Angelico, et al. (Pp 165; £46.50.) Dordrecht: Kluwer, 1991. ISBN 0-7923-0994-4.

Although this book reports the proceedings of the Second International Workshop held almost three years ago, it was then 10 years since the first such conference.

The first part is devoted to methodology, prevalence, and incidence of gall stone disease, including three Italian studies using ultrasonography and one from Scotland using necropsy prevalence and cholecystectomy rates. The second part explores the natural history, including a section systematically discussing management of mildly symptomatic gall stones. The third part on risk factors constitutes half the book. The prevalence of gall stones in relationship to thalassemia minor and blood groups is discussed. Studies of ethnic and family factors showed significant associations with gall stones but failed to unravel the underlying mechanisms.

Dietary habits were studied in Japan, exploring the effect of Westernisation on prevalence and type of gall stones. In pregnancy it was interesting that a 41% prevalence of biliary sludge regressed to only 4.4% one year after delivery, indicating that this does not always lead to gall stones. In the concluding remarks attention is drawn to the paucity of studies in low prevalence societies and in immigrants, and the lack of reliable cross sectional international data. It was proposed that work could be started from the present state of knowledge on prevention by intervention on diet and body weight.

This book is interesting and well organised, succeeding in avoiding statistical jargon.

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The Health Care Debate Live. British Medical Journal. (Pp 178; £10.97.) London: BMJ Publications, 1992. ISBN 0-7279-0740-9.

Margaret Thatcher's review of the British National Health Service during the late 1980s signalled a determination to challenge established views about health care provision within a welfare state. In contrast with previous NHS reorganisations, this was a review which shunned formal consultation with the health professions and which produced radical proposals for change which were implemented in the face of considerable protest, particularly from the British Medical Association. Despite an expensive campaign of opposition, paid for by its members, the BMA found itself increasingly divided and marginalised as the reforms were implemented. Its response was to try to produce a manifesto for the NHS. A working group set out to interview key participants in the "health debate" to identify unresolved questions for inclusion in "Leading to Health: a BMA Agenda for Health".

"*The Health Care Debate Live*" is a largely unedited account of the interviews with 45 key participants, including politicians, academics, professional representatives, lobbyists,

health authority chairs, and NHS managers. Recurring themes were NHS funding, rationing, purchaser-provider separation, research, education, management, and personnel. The result is a pot-pourri, the prevailing fragrance being one of concern about the future of the NHS. However, with a few exceptions, this reader was left with a strong suspicion that the concern was that of vested interests at bay.

It is likely that the opinions of the interviewers will be of interest to future historians and political analysts. They will observe that the debate within the medical profession was really about health care provision, not public health. They will be disappointed that the contributors apparently had so few new ideas about the overall management of change in the public and independent sectors, to achieve the social result of better public health.

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NOTICES

Pro Health Care—94: Promotion of Health for Health Care Workers. The second International Conference on Occupational Health for Health Care Workers, will take place in Stockholm, Sweden on June 26–29, 1994. Further information from Britt Gardelach, National Institute of Occupational Health, S-171 84 SOLNA, Sweden. Fax +46-8-27 35 05.

9th International Conference on Pharmacoepidemiology will take place in Washington DC, on August 29–September 1, 1993. Abstracts should be received by 31 May 1993. Further details from Dr S A Edlavitch, University of Kansas Medical Center, Department of Preventive Medicine, 3901 Rainbow Boulevard, Robinson 4004, Kansas City, KS 66160-7313 USA. Tel 913-588-2790 or 913-588-2795; Fax 913-588-2791.

The Centers for Disease Control is issuing a call for abstracts for its **Eighth National Conference on Chronic Disease Prevention and Control** to be held in Kansas City, November 17–19, 1993. Topic areas include, chronic disease epidemiology, interventions, and intervention assessment and evaluation. Deadline for submission is May 3, 1993. For more information, contact: Jack Friel, NCCDPHP, Centers for Disease Control, 4770 Buford Highway, NE, Mailstop K-43, Atlanta, GA 30341-3724, Tel (404) 488-5390, Fax (404) 488-5962.

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