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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