

of the environmental and health significance of chemicals and radiation in the environment.

Section two considers sources of data, computational methods, and mapping and is, generally speaking, a good review of the strengths, weaknesses, and applications of mortality data and information from cancer and other disease registers. Also contained are some basic demographic and record linkage principles along with a practical approach to disease mapping.

The third section deals with aspects of spatial statistics and the analysis of geographical events. I found some chapters heavy going and theoretical but others, for example those dealing with aspects of analysing exposures to point and sources and methods of assessment for disease clusters, were much more readable and relevant.

Section four was mixed in content, with a chapter on the history of environmental epidemiology and chapters on guidelines for the investigation of clusters around adverse health events. Although there was some repetition of earlier parts of the book, the examples were well chosen to illustrate points.

The final part of the book contains six illustrative international studies. The research associated with clustering of childhood leukaemia around Sellafield was particularly interesting.

My overall impression of this book is that it is mostly well written and very readable. For a work with so many different contributors the continuity and uniformity of style is good. In places its subject matter is dealt with rather lightly, reflecting its ambitious scope. Some chapters also repeated material presented in earlier chapters. Nevertheless, I regard this book as being of considerable use and interest to public health physicians, both at the training and consultant levels and would represent a useful addition to a public health department's library. For anyone considering carrying out an investigation of apparent disease clustering this book would be an invaluable source of help and information.

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Health Expectancy: First Workshop of the International Healthy Life Expectancy Network (REVES). Eds J M Robine, M Blanchet, J E Dowd. (Pp 172; £14.70) London, HMSO, 1992. ISBN 0-11-691436 X.

In the late 1960s and early 70s several governmental and international bodies realised the importance of developing a "health" measure that took into account morbidity rather than simple life expectancy. This need was reinforced by an ensuing academic debate. As the increase in life expectancy seemed to level off, would further improvements in health delay the onset of chronic degenerative diseases ("compression of morbidity") or, alternatively, be accompanied by an increase in chronic degenerative and mental disorders ("the pandemic hypothesis"). This publication usefully brings together a wealth of research in measuring healthy life expectancy. The introductory chapter by Robine provides an excellent overview of the development of the various measures. Part one provides data on

several countries and highlights the different sources of data used for calculating disability free life expectancy (DFLE). Part two discusses the different measures and the methods used to calculate them. The discussion on whether certain disability states should be weighted or not is rather limited and could, in my opinion, have been expanded. Measuring life expectancy without cognitive deterioration is also discussed and is still very much in its infancy. Part three examines time series and international comparisons. Again measurement problems and comparability make definite conclusions difficult. Margaret Bone (OPCS) outlines an interesting multi-cohort longitudinal study, which could provide much needed relevant data. Unfortunately this "hypothetical" study seems to remain unfunded.

The importance of this work for public health policy is unfortunately discussed all too briefly. Emond and Daveluy argue that health life expectancy measures aid policy makers in determining priorities. As Kind more cynically points out, "before proceeding too far with the calculation of DFLE for its own sake, we must demonstrate that it has relevance and usefulness for those concerned with planning and delivering health care services. On the limited evidence available prior to this workshop it is not clear that the case has been made."

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Outpatients and their doctors: a study of patients, potential patients, general practitioners and hospital doctors. Ann Cartwright, Joy Windsor. (Pp 135; £18.80) London, HMSO, 1992. ISBN: 0-11-321547-9.

Readers of this journal will be well aware of the problems with hospital outpatient services. However, much of this information is either anecdotal or based on local enquiries which may not be typical of the NHS. Cartwright and Windsor report the findings from a large study of outpatient services initiated in 1989 and completed before the NHS reforms.

The study had seven aims: to elucidate the process of attendance (for example who initiates it); to ascertain the appropriateness of attendance from the points of view of patients and doctors; to study patients who would have liked to have been referred to hospital but were not; to look at the social implications for patients of attendance at outpatient clinics; to compare what happens at outpatient departments with the perceptions of the reasons for referral; to study perceptions of outcomes in terms of recovery; and to look at the implications of the foregoing for the relationships between patients, general practitioners and hospital staff.

The study was done in 10 randomly selected parliamentary constituencies in England. The first phase was a postal screen of a random sample of 10 000 people on electoral registers (response 66%). Seven hundred and thirty outpatient attenders and those wishing to have been referred were interviewed. There was a postal survey of the general practitioners of the patients who were interviewed (response 56%) and a survey of hospital doctors in the departments attended by the patients (response 57%).

Many detailed findings are presented and these go a long way toward meeting the study aims. Surprises emerge: for example, for over

a third of the patients attending outpatient departments their general practitioners were unaware of their attendance. This *excludes* attendances to accident and emergency departments and maternity clinics. Also, only one in eight outpatient attendances were for new patients and one in five outpatients had been attending for five years or more. The report is well written, clearly sectioned and interesting to read. It merits study by purchasers and providers.

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Health Promotion Research: Towards a New Social Epidemiology. Eds B Badura, I Kickbusch. (Pp 496; SW F78) Geneva, WHO, 1992. ISBN: 92-890-1128-9.

New policies and programmes to cope with the health problems of today need to be considered. The editors of this book draw together contemporary ideas and practices in the discipline of health promotion that tackle some of these problems. This "state of the art" account of our knowledge of social epidemiology is both stimulating to read and gives the reader a clear vision of the current health promotion research agenda.

In accordance with the Ottawa charter this book outlines principal areas for health promotion action. It provides a framework for developing healthy public policy and guidance for creating supportive environments and strengthening community action. Throughout the book people are encouraged to take control over their own health, and various authors propose advocacy, enablement, and mediation as means of achieving this.

Part I, "Healthy public policy", advocates a multi-sectoral policy approach to health and believes that an important priority in the development of such an approach is the collection of policy-relevant information (as opposed to just the collection of data on lifestyles of individuals). Part II, "Social and behavioural factors in health promotion", provides comprehensive coverage of the strengths and weaknesses of social determinants of health and illness. While Part III, "Families, workplaces and hospitals as settings for health promotion", discusses the importance of settings in shaping health attitudes and behaviours. Part IV, "Population-orientated health promotion", focuses upon groups within the community that have been frequently misunderstood or even neglected by health promotion programmes. Meanwhile, Part V, "Community intervention in health promotion", argues that health promotion should be seen as a joint endeavour not only for people but with them. Community participation in the form of community groups or self help groups are seen as an important resource in the process of enabling people to take control over their lives.

A minor limitation of the book is that it fails to present a clear vision for the future direction of health services. In their introduction the editors recognise that the still predominantly medical view of health in advanced societies limits what can be done about the social determinants of health. However, the book does little to tackle specifically this phenomena.