

The book provides an excellent review of the current issues facing health promotion. It will no doubt become a core text for diploma and graduate courses in health promotion, as it should for the training of other medical professionals throughout the health sector.

AMANDA WHELAN
Research and Policy Analyst,
Health Promotion Authority for Wales,
Cardiff.

Smoking cessation interventions: is patient education effective. By Diana Saunders. (Pp 68; £10.00) London School of Hygiene and Tropical Medicine, London, 1992. ISBN: 0962-6115.

The importance of this succinct publication is emphasised by Saunders' opening sentence, "Cigarette smoking is well known to be the single most important and avoidable cause of disease, disability and premature death in Europe". Although this statement is obvious it exposes the conundrum of a relative lack of health service intervention despite a wealth of research. This well written summary of the research, which includes abstracts of the most important studies, should help public health physicians and planners to address the issue.

There is heavy emphasis on smoking interventions in primary care. This is inevitable as primary care is the setting for the majority of the research and it is also welcome following the new guidance from the NHS Management Executive on implementation of the GP contract health promotion package. The essential component of advice on smoking before any payment can be made for health promotion to general practice is amply justified by Saunders' review of the published reports. Training GPs to promote smoking cessation advice has been shown to be effective and is likely to be complemented by the additional financial motivation.

Saunders shows clearly that while minimal intervention in primary care is effective, higher success rates can be achieved by additional features. These may include showing the smoker the personal harmful effects of smoking by demonstrating expired-air carbon monoxide levels and using lung function test; providing literature on smoking; offering smokers nicotine gum or patches accompanied by detailed instructions and advice; and arranging follow up appointments to reinforce the importance of stopping smoking and to offer new ex-smokers support and encouragement.

Smoking cessation in other areas also receives deserved attention. These include dentists, family planning clinics, antenatal care, and hospital outpatients. There is a particularly welcome reminder that when patients receive an admission letter for surgery, the additional enclosure of written advice on smoking cessation is effective.

Saunders makes clear that advice on stopping smoking should not be confined to doctors but could include others such as practice nurses, hospital nurses, midwives, counsellors, and pharmacists. The evidence for the effectiveness of the contribution from some of these staff is still sketchy and is one of many reasons to hope that this review of the literature will be regularly updated.

PETER ELTON
Department of Public Health,
Tameside and Glossop Health Authority,
Hyde, Cheshire.

Assessing Health Need using the Life Cycle Framework. By C Pickin, S St Leger. (Pp 221; £35 hardback, £12.99 paperback) Buckingham, Open University Press, 1993. ISBN: 0-335-15742-4 (pb). ISBN: 0-335-15743-2 (hb).

Improving the health of our population by matching finite resources to needs is an issue of pressing importance. Recent changes in the NHS in Britain have paved the way for systematic assessment of health need. Before this opportunity can be fully grasped, it is essential that the concepts of health need assessment are understood and agreed by all. This book fills an important gap in this respect by attempting a description of health need assessment within the context of the NHS changes.

The authors highlight the fact that resources are finite and state firmly that health need assessment is only a part of a larger strategic process. The book clarifies that need assessment will not provide all the answers to operational difficulties and the reader is also cautioned against unrealistic expectations from need assessment.

One cannot disagree with the authors that a framework is necessary to carry out population need assessment in an effective manner. The suggestion of using a life cycle framework is good, but may not be the only one. However, the life cycle approach can be readily translated into practice and its application should be attempted more widely.

The book is divided into 15 chapters. The opening two describe the recent NHS changes and the concept of need assessment. Chapters 3 and 4 outline the relevant epidemiological, demographic, and sociological techniques. The fifth chapter explains the life cycle framework and chapters 6 to 14 address the priorities for need assessment at each stage of life. The final chapter identifies the challenges of purchasing for health gain. The issues to consider when selecting topics for needs assessment are listed in the form of appendices. A list of routine sources of data is also provided at the end, but this is rather incomplete and restricted to health service information systems.

The book could have been more readable if some real life examples had been included and the issues had been more provocatively debated. Some description of the health economic techniques and the role of marginal analysis in need assessment would also have helped. Despite these reservations, I would still recommend this book to people involved in needs assessment.

VENKAT NARAYAN
National Institutes of Health,
Phoenix, AZ, 85014, USA.

Injury Epidemiology. By Leon S Robertson (Pp 241; £30) New York, Oxford University Press, 1992. ISBN 0195069560.

The current concerns regarding the effective provision of trauma care in Britain have kindled an awareness amongst health care professionals of the necessity of high quality epidemiological research both for the planning of services for injury management and for its primary prevention. This timely American publication, written in response to the paucity of bibliography in this area and the burgeoning transatlantic interest in injury

epidemiology, seeks to teach the student, or the scientist with little or no experience in injury research, how injury epidemiology is carried out. In this respect the book has filled the niche well. Although its broad scope inevitably tends towards a more cursory approach to certain issues, for example treatment and rehabilitation, than might have been wished for, the inclusion of key references at the conclusion of each chapter allows the interested reader to expand upon their introduction to the topic. The book is organised around the theme that injury epidemiology should be useful and not merely an intellectual pursuit and does not simply deal with the application of the theory and consequently of methods; rather it illustrates the uses and misuses of epidemiological data relevant to injury control. The book is divided into two main parts, the first methodological, the second dealing with more topical matters. The concepts and practices discussed are well illustrated, albeit sometimes laboriously, by example.

Chapters 1 to 5 trace the background and application of the concepts originated in infectious disease epidemiology to injury epidemiology and considers the choice of researchable questions, study design, injury severity scoring systems, the use of data sources for case identification, and the behavioural aspects of injury risk. The general discussion of ideas and techniques contained within this half of the book also make it a useful introductory text for students with wider interests in epidemiological research. The final five chapters examine the effects of legislation on behaviour modification and product design, assess the effectiveness of various prevention programmes on injury incidence and severity, evaluate emergency services and trauma care, and address the economic implications of injury.

The main criticism of this otherwise admirable book is that some of its utility is lost for the British reader. While the general principles of the science transcend national boundaries, the descriptions of data sources for injury surveillance, injury aetiology, health service management, and the legal and financial systems do not and are specific to the US experience. However, apart from this, and the occasional self indulgence in allowing some sections to become personal vehicles for the authors disagreement with neoclassical economic theories, Leon Robertson has produced a balanced and useful introductory text which provides a broad background to this field and should stimulate interest in an important area of epidemiology.

MARK AIREY
Academic Unit of Public Health Medicine,
University of Leeds.

If you wish to order or require further information regarding the titles reviewed here, please write to or telephone the BMJ Bookshop, PO Box 295, London WC1H 9JR. Tel: 071 383 6244. Fax: 071 383 6662. Books are supplied post free in the UK and for BFPO addresses. Overseas customers should add 15% 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 the card number, expiry date, and full name. (The price and availability are occasionally subject to revision by the publishers.)