

importance of maintaining the services which currently exist in Scotland.

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**The Microbiology and Epidemiology of Infection for Health Science Students.**

Peter Meers, Judith Sedgwick, Margret Worsley (Pp 330; £14.99). London: Chapman and Hall, 1995. ISBN 0-412-59900-7.

This is excellent background reading in medical microbiology. The book is in nine parts and covers bacteria, viruses, fungi and parasites and their infections. Medically important micro-organisms are discussed in terms of their classification, morphology, and pathogenesis. In addition, for each micro-organism the diagnosis, treatment, epidemiology and control are briefly discussed.

The authors also discuss common infections of the cardiovascular system, urinary tract, and central nervous system and food poisoning. The last two parts of this book concentrate on the control of infections, clinical and laboratory diagnosis, treatment, and finally the prevention of infections.

This is a simple and easy to follow book on infection and its control, I recommend it for undergraduate students in medicine, nursing and science.

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**Cancer Risk by Social Class and Occupation.** E Pukkala. (Pp 277; \$96.00). Karger, 1995. ISBN 3-8055-6152-0.

This is one of a series of "contributions to epidemiology and biostatistics" whose subtitle "a survey of 109 000 cancer cases amongst Finns of working age" nicely encapsulates the burden of the contents.

Researchers familiar with UK decennial supplements of occupational mortality often forget the uniqueness of these data which have been produced uninterruptedly since the middle of the 19th century. It is only relatively recently that other nations have developed similar statistical records and among those of the highest quality are those now kept in Finland.

The systematic interrogation of these records has led to the gradual realisation that data derived from information captured by way of death certificates will result in considerable bias which limits the quality of inferences which may be drawn. This bias derives from the description of occupations, the lack of quantification of exposure, and the accuracy of cause of death data. The most serious confounder is social class. The other traditional routes to the evaluation of risk in occupation have been cohort and case-control studies, which of course have been highly focused on specific factors and do not provide the overview previously referred to.

Over the past 20 years a series of studies has attempted to bridge the gap between the two approaches. To a greater or lesser extent they have attempted to overcome the effects of bias and confounding by capturing more accurate data at more relevant points in the

work, social, and pathological histories of the populations studied. This book is one such large scale essay bringing together census and cancer registry data.

The format is that of a PhD thesis only perfunctorily, if at all, disguised in literary form. It is dense with data on standardised incidence ratios, the chosen tool of expression of risk, and is a conventional analysis of these.

The main thrust of the work is, as has been stated, to obviate or minimise bias and to disentangle occupational and social class effects. The work has been diligently conducted and thus makes a helpful contribution to the narrowing of the wide bands of uncertainty concerning the attribution of cancer risk to occupation and a wider range of social factors. Derived as it is from the excellent Finnish census and registry records, it creates an interesting and reliable reference source.

It is not a book for anything other than the most unusual taste in light reading, indeed any attempt at a "straight through" read is liable to lead to data indigestion. However, the text makes a useful starting or reference point for those interested in occupational morbidity generally as well as for hypothesis development and for those with interests in specific occupations or cancers. Similarly, it offers an easy approach to occupational risk for those interested in social risk factors to whom occupation may be a difficult and tiresome confounder. In those contexts, the book is a nicely presented and useable addition to the bookshelf.

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**Male-Mediated Developmental Toxicity.** A F Olshan and D R Mattison (eds). (Pp 406; \$115.00) New York: Plenum Press, 1994. ISBN 0-306-44815-7.

This volume on reproductive biology is derived from conference proceedings dating back to 1992 and at which the reviewer was present.

The outcome, as published, reflects all the blessings and all the shortcomings of inviting unrefereed submissions from a wide range of authors. Some offerings are perfunctory, some profound; some are cautious and reasoned, others are somewhat eccentric. There are therefore gems and pebbles in this collection of papers.

Reproductive toxicology and reproductive epidemiology have promised to burst upon the environmental and occupational scene for more than a decade. There is now some evidence that they may finally do so. If they do then it will be with a complexity whose potential is far greater than carcinogenesis because of the much wider range of interactions and end points available for study.

In this context, the book is the most up to date compendium of current research pre-occupations in the field. Those who wish to acquire this information wholesale must be few. Those who might want to dip in to get an insight into various facets are likely to be many.

One for the library rather than the bookshelf.

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**Alcohol policy and the public good.** Griffith Edwards *et al*, (Pp 226; £14.95). Oxford: Oxford University Press. 1994. ISBN 0-19-26561-6.

Often, books produced by a lengthy list of authors (17 in this case) result in no more than many highly individual contributions, connected only by a common general theme. This book is an exception: it is a well written review of current knowledge regarding the effects of alcohol drinking and public health policies on alcohol. The first part of the book reviews international trends in alcohol consumption and drinking patterns, the risk to an individual from drinking alcohol, and finally the level of alcohol consumption at a population level and the risk of alcohol related problems. It provides an in-depth review which will be useful to epidemiologists and other health professionals with an interest in this area. The second part of the book addresses the efficacy of various policy options such as taxation on alcohol, controlling access to alcohol, or prevention of alcohol drinking in specific situations (for example, when intending to drive). Finally, the authors examine the effect of attempting to change attitudes on drinking behaviour. The various themes of the book are coherently brought together in the final chapter of the book which looks at how scientific knowledge can contribute to public policy in this area. The second section will be particularly valuable to health policy makers as well as public health medicine specialists involved in research in this area. The authors are to be congratulated for bringing together so concisely and informatively current scientific knowledge regarding alcohol consumption and alcohol policy.

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**Measuring Disease.** Ann Bowling. (Pp 374; £37.50 (hbk), £16.99 (pbk)). Buckingham: OU Press, 1995. ISBN 0-335-19225-4.

This text follows on from Bowling's highly influential book, *Measuring Health* (1991). As the title suggests, the emphasis here is on the application of "quality of life measures" to specific conditions and states, rather than the general overview contained in *Measuring Health*. What we get though is very similar to the preceding work. That is, text that is remarkably detailed and comprehensive in its coverage of a range of "quality of life measures" in relation to areas like cancers, respiratory conditions, and cardiovascular diseases. In this sense, the book will be highly relevant to practitioners who favour the notion of measuring outcomes other than those traditionally associated with mortality and morbidity. This book provides a critical overview of a host of tools that could be taken and used "off the peg".

Despite this obvious utility, I have some concerns. As is the case with many who attempt to bridge divides - in this case the gulf that arguably exists between philosophically accepting the complexity in conceptualising "wellbeing" and formally trying to measure it - there may be censure from both directions. Firstly, "formalists" may argue that by insisting on a subjective and ethereal concept