When it comes to the impact of service use (antenatal care, breastfeeding promotion, etc) on maternal and child health, the general conclusion is that the effects are small, both on a population and an individual level and that what research there is, is often inadequate. The section on genetic screening is more useful, and correctly concludes that although it has a low potential impact on health promotion at a population level, that for individuals is high.

So we are left only with the very strong facts about smoking, drinking and taking drugs, but didn’t we know that?

It is probably not exclusively the authors’ fault that the “evidence” is not exciting, but one wonders if this report will have any impact on either policy making or on individuals. An index would have been helpful. Perhaps it is time we had fewer of these inadequate, anodyne accounts from bodies such as the Health Education Authority and the Department of Health?

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The advent of powerful personal computers and good quality statistical packages to run on them has made it easy for those engaged in small scale research to do their work. However, in cutting out the statistician middleman there is the danger of blunders.

The authors of this book aim to help their readers approach data handling and simple data analysis competently.

This work is not tied to any particular model of personal computer or data analysis package. It gives an account of how to organise data and how to select and apply appropriate analytic techniques. It is left to the reader to consult his data analysis package’s manual to find out how to implement the analyses. The emphasis is on understanding when to apply a technique, how to interpret the results, and what pitfalls could be encountered. Topics covered include: data preparation and summary; analysis of data from one or more groups (leading to analysis of variance); regression and correlation; distribution free methods; handling categorical data; methods for diagnostic tests; survival analysis; (introducing Cox regression); sample size and power; and writing up the statistical analysis in a scientific paper. There is also a brief review of five commonly used statistical packages. The prose is lucid and gives an accurate account of the techniques discussed.

The work appears initially to have been conceived with pathologists in mind and many of the examples reflect this. However, its content and presentation should be acceptable to anyone in the clinical disciplines. Used by itself this book will not cover all the needs of those engaged in epidemiological research.

In terms of its stated purpose, this book can be recommended with reservations. Even with the authors’ clear guidance many of the techniques, such as regression analysis, which nowadays are computationally straightforward, nevertheless require considerable sophistication and experience to be used properly. Hence the book might best be used in conjunction with an elementary statistics course. However, standing alone it would be of little use. The summaries and analyses presented in published papers.

It is a pity that there is a plethora of books that seem to imagine that data arise from thin air and give the impression that their analysis can be undertaken without much thought to their provenance – that is, the conceptions which led to the study, the underlying theoretical framework, the study design, and the measurement procedures. Data analysis, or perhaps more accurately data processing, might have been reduced to a simple task using a personal computer but there is a danger that many will not come to understand the broader art and science of designing, undertaking, analysing and interpreting studies. This danger is particularly so for the kind of people attracted to books of this type. By all means use it but as, by definition, you will be a beginner, do consult a professional at the planning stage of your study.

A S ST LEGER
Associate Editor J ECH


Epidemiology does not exist for the gratification of its practitioners. It is justified when its findings influence disease control and prevention of the public health. Some concepts and the terms used to express them should be accessible to members of the many disciplines that consume epidemiological findings. Furthermore, the terms should be used consistently.

Publication in 1983 as the first edition of the dictionary marked the coming of age of epidemiology. Its practitioners had moved toward agreement on their technical terms and hence it might be that a similar paradigm was emerging. The dictionary was remarkably successful and editions have appeared in at least ten languages with more in preparation or under preparation.

The third edition contains almost 300 new entries and revisions of previous entries. Because the boundaries of epidemiology and other disciplines are not closely defined, the scope of the entries has increased and there is improved coverage of infectious disease epidemiology and control, health promotion, genetics, informatics, health economics, and biomedical ethics. The definitions have been re-examined as research and editorial teams have grown.

In the preface to the second edition the editors expressed the hope that the dictionary will be "authoritative without being authoritarian". A scan through the definitions of the third edition quickly confirms the authoritative nature of the work. There are few definitions with which one would quarrel and barely any with which one could not live.

Indeed, perhaps the time has come for those who teach epidemiology to set aside their favourite but idiosyncratic definitions and proselytise those from the dictionary in an authoritative manner; the first edition of the dictionary was most helpful to me in resolving the confusion students had with the variety