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## **NOTICES**

European Public Health Association Annual Meeting, Pamplona, Spain, 20–22 November 1997 (including the 9th Health Services Research Conference and the Spanish Public Health and Health Management meetings). For further information contact: Idoia Gaminde, Facultad de Economicas, Universidad Publica de Navarra, Campus de Arrosadia 31006 Pamplona, Spain. Tel: +34 48 169420. Fax: +34 48 169404. Email: EUPHA-SESPAS@upna.es. For updated information about the programme, visit the web page: http://animal.upna.es/economia/eupha.

Cornerstones for Mental Health: The 1997 World Congress of the World Federation for Mental Health, 6-11 July 1997, Lahti and Helsinki, Finland. For more information, contact: KaKo Congress Services, "Cornerstones", PO Box 762, FIN-00101 Helsinki, Finland. Fax: +358 9 492 810. Email:\_kako ar@cc.helsinki.fi.

in pregnancy, the medicalisation of childbirth, the rise of feminist sociology, and the voices of an articulate mass of pregnant and parturating women, have made it a noisy arean. Obstetricians and gynaecologists are divided between defending their hospital citadels and vielding to the siren voices outside; patients want both the security of good medical care and the comforts of home; militant midwives and health visitors strive to preserve and expand their hard-won roles. Caught between all these pressures, the GPs, in this brief paper, fight their corner. They want obstetric training to move from its hospital base out into the community, emphasising the relative "normality" of most pregnancies; closer collaboration with midwives and greater attention to the quality of care. They are quiet over pay (one possible reason why GP-midwife units are declining), and differences within their own ranks. Do they really speak with one voice?

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## **BOOK REVIEWS**

Epidemiological studies: a practical guide. By Alan J Silman. (Pp 175; £14.95 pbk; £40.00 hbk). Cambridge: Cambridge Unversity Press, 1995. ISBN 0-521-43979-5 (pbk), 0-521-43371-1 (hbk).

This introductory text was written originally for trainee public health physicians as a guide to the undertaking of simple epidemiological (largely field) studies. It is admirable for this purpose and has strong sections on study design, questionnaire design, and development, data analysis and interpretation, ethical issues, and project costings. There are many worked examples and the section on the validity of information and the reproducibility of measurements are particularly useful to anyone setting up a survey. This text therefore will be useful to a wide range of individuals including hospital specialists and general practitioners.

The book more than adequately fulfils its title and contains a wealth of important practical hints on designing and running surveys. As a stand-alone text for epidemiology and public health, however, there are some gaps – notably on the analysis of routine data, health services research, screening, and clinical trials. The book is presently unreferenced but this may be rectified in future editions.

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The role of general practice in maternity care. Report of Royal College of General Practitioners Maternity Care Group. (Occasional Paper 72) (Pp 14; £11.00). London: Royal College of General Practitioners, 1995. ISBN 0-85084-218-2.

Maternity care has, in recent decades, become something of a cockpit. A growing con-

Human energetics in biological anthropology. Stanley J Ulijaszek. (Pp235; £35.00; US\$54.95). Cambridge: Cambridge University Press, 1995. ISBN 0-521-43295-2.

The fundamentals of life involve the conversion of food into body, energy, and ultimately children. This book explores the anatomical and physiological limitations placed on this process by the human condition and the development of diversity in human energetics in order to adapt to the varying ecologies occupied by different populations.

Ulijaszek's study of this process is thorough, with comprehensive coverage of the literature, making the text a useful reference tool for the specialist student and academic. The more casual reader may wish to skip through the first half of the book which deals in extensive detail with basics of adaptation, evolution, and methodology in measuring and modelling energy flow through human populations. However, those who persevere with this first half will be rewarded with an excellent summary of the human adaptive process but firmly returned to earth with the detailed practicalities of the scientific methods involved in researching this field.

In the second half, the pace accelerates as the author unravels the relationship between the availability of energy and the development of the reproductive process, the physical stature of different populations, and even the structure of societies. Here, covering aspects of developing and developed countries, Ulijaszek explores concepts useful to anthropologist, ecologist, and health professional.

The author provides all the necessary information to conclude with a discussion of what such an anthropological approach has achieved and where such research may progress. Unfortunately, however, the book finishes abruptly instead, leaving the reader without any real sense of direction. This ex-

cepted, it is a comprehensive and at times captivating review of a whole field of research.

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Diet and Cancer: Markers, Prevention and Treatment (Advances in Experimental Medicine and Biology Volume 354). Edited by Maryce M Jacobs. (Pp 256; \$79.50). New York and London: Plenum Press, 1994. ISBN 0 306 447 231

This volume is the proceedings of a conference on nutrition and cancer held in 1992. It is heavily biochemical, but a smattering of epidemiological research is included. It provides details of possible mechanisms for nutrients causing or preventing cancer. Of particular interest to epidemiologists would be chapters 4-6, which describe possibilities for the development of biological markers for cancer risk. Chapter 4 also contains an interesting discussion of the difficulties in addressing racial/ethnic differences in diet and cancer. Chapters 8 and 9 describe the possible protective effects of consuming garlic and green tea, mainly using rat studies as examples. Chapter 10 covers the possibility of soybean containing foods reducing the risk of breast and prostate cancer due to their isoflavone content. Chapter 11 is an excellent example of a "molecular epidemiological" approach, it integrates exposure measurements with epidemiological studies. The chapter uses aflotoxin excretion in the urine as a marker for human liver cancer. The last four chapters consider nutritional problems and support in the treatment of cancer.

This is not a book to browse through at bedtime, but it could be a useful reference for researchers working in the field of nutrition and cancer.

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**Tobacco and Health.** Karen Slama (Ed). (Pp 1039; \$US175.00). New York: Plenum Press, 1995. ISBN 0-306-45111-5.

"The world over, tobacco manufacturers and merchants put their own financial interests before the health and lives of the thousand million consumers to whom they sell their products."

So said Hiroshi Nakajima in his opening address to the 9th World Conference on Tobacco and Health in Paris in 1994. It was a recurring theme, together with three worrying trends: the persistent excessive consumption by young people; the growth in women's smoking; and the spread of smoking to developing countries and central and eastern Europe.

This book is the conference proceedings and consists of over 200 individual contributions documenting the current position in the battle against the tobacco barons. Contributions range from analysis of the devastating health effects, through prevalence surveys to describing and evaluating the growing repertoire of interventions to reduce uptake and promote cessation. It is a large and expensive book and will probably appeal most to librarians and specialists. It will certainly

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prove useful for students, researchers, and activists.

Inevitably, some contributions are rather mundane, repetitious, or poorly presented; though there are plenty of gems to compensate. I particularly enjoyed the contributions of Alan Blum and Eric Solberg. There are many fascinating examples of innovative practice from around the world. An example is the *Goethe Challenge Trophy*. A 44 pound silver bust of the poetic genius is awarded each year to the German medical school with the lowest rate of smoking among its students and faculty staff. The UK equivalent might be the *Roy Castle Cup*, though it doesn't have quite the same cultural resonance.

The metaphor of a global battle with the tobacco industry is used by many contributors. Its aptness is demonstrated by the chilling descriptions by Connolly, Mackay, Gorecka and others of the tobacco industry's unscrupulous tactics in exporting its product to developing countries and eastern Europe.

The book mixes optimism and pessimism. Those of the "glass is half full" view will be encouraged by the evidence of tobacco control activity from over 40 countries around the globe. "Half empty" types will be impressed by a thought provoking piece by Blum and Solberg entitled Revisionism, magical thinking, and hokey-pokey objectives in the antismoking movement. This dissects the weaknesses of the tobacco control movement particularly a tendency to mistake advocacy, policy, and legislation with real action - in the face of dynamic, versatile, and determined transnational tobacco companies. Others describe the ability of the tobacco industry to subvert control measures such as advertising bans and the failure of governments to take effective action.

Peto, Lopez, and Boreham have stated that the evolving pandemic of tobacco related disease leaves Asia "sitting on a time bomb". This book shows that it is a worldwide phenomenon. Unfortunately, it seems that despite our best efforts we are still tackling the problem with fire extinguishers rather than a bomb disposal team.

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Improving Support for Black Carers: A source-book of information, ideas and service initiatives. Lydia Yee. (Pp 29; 6.99) London: King's Fund, 1995. ISBN 1 85717 076 8

The needs of carers are on the NHS agenda (see HSG (97)8 Carers (Recognition and Services) Act 1995. London: NHS Executive, 1996), with special consideration for black carers. This slim paperback fills a need for practical ideas in this context. It uses "black" as shorthand for "people who share a common experience of racism".

The six chapters fall into three parts. First are four chapters dealing respectively with knowing who black carers are, the issues affecting them; getting started on services, and the processes of service development. Their language is clear, sections are supported and reinforced by lists of key action points, and there are illustrations from work in progress at the time of writing. The practical

tone includes repeated reminders that working with black carers is the best way to ensure success.

So the second section (chapter 5: "Dilemmas in developing support for Black carers") sits oddly. The separate/integrated issue seems covered by previous advice to be specific rather than specialist. Describing black carers as not seeking help because, "... they are looking after someone, usually a family member" clashes with repeated warnings against the myth of, "they look after their own". Challenging racism, ensuring individually tailored services, and involving the voluntary sector are all important but would fit better in the final chapter (third section). This looks to the future, where services for black carers must be a mainstream multiagency business.

If services develop nationally in the way they should, one would hope the author will soon replace this affordable book with more examples of widespread and permanent services for black carers. I look forward to that.

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Nutrition in General Practice: 2 Promoting Health and Preventing Disease. Judith Buttriss (Ed). (Pp 162; 16.50) London: Royal College of General Practitioners, 1995. ISBN 0 85084 214 X.

This book makes a useful contribution to the few publications on nutrition addressed at primary health care professionals. It provides them with nutrition guidelines and targets to be used with their patients and with the community as a whole, in accordance with current scientific knowledge. It considers common problems and prevalent situations in the UK that are also applicable to other developed countries.

This volume is the second part of a three part manual; the first is Basic Principles of Nutrition and the third Nutrition in the Management of Disease. It consists of three sections divided into chapters with a very clear teaching structure. In the first section, the nutritional needs of different age groups are considered, with special attention to preconception, pregnancy, and lactation; infant feeding and weaning; preschool and school children; and elderly people. In the second section, the social aspects of nutrition are examined as they concern specific groups in the UK such as vegetarians and people from different religions, whose diet may be restricted. Low income level and sports are also considered as these too may influence people's diet. In the third part, devoted to the prevention of ill health, coronary heart disease and weight management are extensively considered in addition to osteoporosis, dental health, and food hygiene.

Ideas to improve understanding, including ideas and tips for addressing many common problems in primary health care, are given together with very useful tables and relevant information (eg recommendations for introducing a mixed diet, food source for specific nutrients or types of diets, lipid lowering diet, etc). Updated references are given in every chapter, including further reading in the field. However, the reader does need to have the first part of the manual since he or

she needs to refer to it very often for additional information.

Given that primary health care professionals usually receive scant training on nutrition, this book can help to fill the gap as it provides much interesting information in a format that facilitates its use as a guide in daily practice.

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Community Health Indicators: Definitions and Interpretations. Working Group on Community Health Information Systems and S Chevalier, R Choiniere, M Ferland, M Pageau, and Y Sauvageau. (Pp 224; no price stated). Ottawa: Canadian Institute for Health Information, 1995. ISBN 1 896104 08 8.

This book, published by the Canadian Institute for Health Information (CIHI), is the last of several revisions dealing with community health indicators. To make their adoption consistent across potential users, the book provides for each indicator a synoptic table with definitions, methods of calculations, limitations, sources, interpretation, observed values, and suggested categories. The indicators are further classified in three main groups: indicators of determinants of health, indicators of consequences of health problems (including utilisation of health services), and indicators of health status.

As claimed in the first of the two sections, covering conceptual issues, the 60 indicators will allow readers to "reach rapid conclusions", "make sweeping observations", and provide the necessary information for the decision making process.

The indicators have been chosen to "reflect" and "represent", in the most coherent possible way, phenomena which cannot be measured directly. Infant mortality rate, for instance, would allow reliable and valid inferences on a number of phenomena related to the level of preventive care, as well as to the very magnitude of infant mortality. The comparable and recognisable information on health and social managers will, therefore, find exhaustive representations, instrumental to the process of planning, assessing, monitoring and forecasting services and care. Will they?

The complexity of the phenomena to be represented, not always coherent and homogeneous, makes "macro-indicators" difficult to use for a critical analysis of the needs in the health and social sector. Infant mortality, for instance, may say a great deal about the level of perinatal and neonatal care, but very because the correlation between level and type of maternal care and infant mortality is not yet fully recognised and needs, at least, to be circumstantiated.

There is a substantial drawback in promoting single and/or macro-indicators. The possibility of sweeping and rapid conclusions, which they are actually intended to achieve, may bring about superficial views among users. Summary indicators may produce anaesthetic effects on public and professional opinions. Indeed, decision makers and politicians may be tempted to hijack them for slogans or self complacent declarations. Examples of misuse can be found in any coun-