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## Book Reviews

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*Atlas of Infectious Diseases*, vol. IX: *UTIs and Infections of the Female Pelvis*. Editor-in-Chief: G. L. Mandell; ed. J. D. Sobel. Churchill Livingstone 1996. £95.00. ISBN 0 4430703.

To say that volume IX of the *Atlas of Infectious Diseases* (Editor-in-Chief Dr G. L. Mandell) lives up to the standards of its eight predecessors is high, but fully deserved praise. This volume is edited by Jack Sobel, a leading authority on *Candida* infections. There are 10 chapters, each written by one or more experts in the field, covering cystitis, pyelonephritis, complicated urinary tract infections, infections of the prostate, candiduria, catheter-associated urinary tract infections, infections of the vulva, cervicitis and endometritis, septic abortion and tuboovarian abscesses. Each chapter is a model of clarity, including beautiful graphics outlining epidemiology and pathogenesis as well as clinical, radiological and microbiological photographs of a very high standard. As one would expect from the high standards set by previous volumes, each chapter is absolutely up to date, and well referenced.

This is a North American series, and exemplifies the best qualities of North American medical textbooks. Inevitably, perhaps, the epidemiological data given are exclusively North American, giving the impression that the rest of the world does not exist; but this is a minor criticism of an excellent addition to an outstanding series. This is far more than an Atlas; it is a comprehensive textbook of Infectious Diseases in which the boring pages of text have been replaced with diagrams and pictures, making it a pleasure to read and learn from.

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*The Gift Relationship*. Richard M. Titmuss (author); Ann Oakley and John Ashton (editors). LSE Books, London. 1997. Pp. 360. £14.99. ISBN 0 7530 1201 4.

*The Gift Relationship*, Professor Titmuss's last book, originally published in 1970, dealt with broad and fundamental questions about the nature of our society and how we want to relate to one another, through the medium of a detailed study of one particular aspect of medical policy. Blood carries highly charged, though varied, cultural significance in all societies and in choosing blood donation and banking for his case study, Titmuss was able to carry

the reader back and forth across the boundary between apparently objective socio-economic analysis and the value-laden zones of ethics and freedom. Thus the book has endured as a classic reference point for policy analysts as well as those interested in the problems of blood-borne infection. Its re-issue, with additional chapters, is timely at a point when both the major health systems Titmuss examined are undergoing prolonged self-doubt and painful change.

Most of the original 1970 study is reprinted here, minus the appendices. My only real quibble with the editing concerns substitution of 'former Soviet Union' in place of 'U.S.S.R.' which appears nonsensical in the 1970 body of the book.

By contrasting the voluntary blood donation system in Britain with the more commercialized system in the United States, Titmuss showed that a society that allowed a free market in blood (with 50% of donors giving blood for money, and blood and blood products traded like any other commodity) paid a high price in terms of contamination of the product. Hepatitis B especially was far more prevalent in transfused blood in the US than in Britain. Yet the epidemiological consequences of 'bad blood' were only one part of the argument against the market in blood. Perhaps more important, because more universal, was the argument that giving some people the freedom to receive money for their blood limited the freedom of all of us to give our blood freely for the benefit of unknown strangers. (In this regard, the gift relationship between blood donor and recipient is quite different from that of obligation and reciprocity identified by Marcel Mauss in his 1954 classic, *The Gift*.) Unlimited freedom for the market, Titmuss argued, removes the freedom to behave altruistically.

Although some of the details may have been challenged, the core of Titmuss's argument has remained extremely persuasive and in fact influenced policy in both the short and long term following the book's original appearance, as outlined in an introductory piece by the editors Ann Oakley and John Ashton, and in Julian Le Grand's postscript. Oakley, Titmuss's daughter, reflects on the relevance of his message for affluent societies now facing stark contrasts of wealth, with the danger of the rich retreating behind barricades. Le Grand, holder of the chair of Health Policy named for Titmuss, at the London School of Economics, succinctly weighs up how the book's arguments have stood the test of time. He praises Titmuss for spotting – ahead of most economists – the 'adverse selection' process, by which

bad products drive out good ones (where the seller is privy to information the buyer cannot access); Titmuss supported the solution of voluntary donation. On the other hand, given the extension of the altruism argument to the public services more widely, Le Grand queries whether there was as high a degree of altruism among those who worked in the British National Health Service as Titmuss and others assumed.

Without doubt the most compelling new chapter is that by the historian Virginia Berridge, whose account of AIDS and the blood supply in the UK reads at times like a detective thriller. Based on the most thorough research, this account deals with the complexities of conflicting interests and interpretations that shifted through a decade of unprecedented flux in scientific views and policy alliances. Where other versions of AIDS-in-the-blood have tried to attribute blame, this subtle rendering offers nuanced explanations; it also discusses the context and implications of the shift in focus from epidemiology to biomedicine in the mid-1980s.

Vanessa Martlew, a consultant haematologist, provides a useful update on the size and shape of the transfusion services since 1970, pointing out that most of the enormous expansion has been in components rather than whole blood transfusions. An intriguing parallel case study of human milk donation and banking is suggested in a brief historical survey by Gillian Weaver, a milk bank coordinator, and Susan Williams, a historian who has worked on the records of the national Birthday Trust Fund. There is clearly scope for more work on this topic, and it will be well if future studies also embrace the depth of Titmuss's approach. As Julian Le Grand remarks (p. 338), anyone wishing to participate in discussions on the nature of the welfare state, old and new, would be well-advised to read this book, or they will be in danger of 'performing Hamlet without the Prince'.

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*Public Health at the Crossroads*. Eds. R. Beaglehole and R. Bonita. Cambridge University Press 1997. Pp. 243. £17.95 (US \$27.95). ISBN 0 521 58665 8.

A condensed version of the final section of this book reads a bit like a headmaster's or even a weather report.

*UK*: Outlook bleak, increase in health inequalities, no suggestion that public health is now a means for transforming society, concerted effort required to build strong coalitions of all public health professionals and a broad public health consistency.

*Countries of Central and Eastern Europe*: Practice of public health weak and poorly co-ordinated and although there is a modest resurgence of public health training, curricula emphasise health services management which will distract from the wider goals of public health.

*Germany*: Early public health pioneers but now public health training administration and career structures not well developed.

*France*: Also early public health pioneers but public health now weak, and unlikely that France will provide leadership for public health in Europe.

*USA*: Public health activities in disarray, state public health departments struggle to provide the medical care of millions of poor Americans and it is unrealistic to expect them to focus seriously on public health issues. Particularly disappointing.

*Japan*: Recent striking increase in life expectancy probably due to increase in wealth which has been distributed reasonably equitably, dramatic decline in stroke deaths due to specific efforts to prevent high bp, lowering salt consumption etc. More capacity to address problems purposefully and with appropriate action than is apparent in most other countries.

*Sweden*: Possibilities for public health action, but the outcome is not clear. The major challenge for public health in Sweden is to integrate national policies with the local delivery of public health services which remain the responsibility of local authorities.

*New Zealand*: The premature ending of the Public Health Commission must be seen as a failure – public health in New Zealand has lost its independent agency, budget and advocate.

*Cuba*: The extent of Cuba's achievements in (public) health are reflected in the health statistics (life expectancy has risen from 64 to 76 years between 1960 and 1993 and infant mortality has reduced from 65 to 9 per 1000 live births in the same period).

*China*: Health policy has been remarkably consistent in providing substantial resources for health and in emphasising prevention.

*Kerala State in Southern India*: Public health improvements show that vigorous public action can transform the level of social development and cause major improvements in social and health indicators even at a relatively low level of per capita income and within a single generation.

So you can see that the book is global in its scope and that the authors do not pull their punches. After even a preliminary glance, the book is clearly eminently suitable as a standard introductory text for students in public health and epidemiology (its stated main audience). It assumes no technical knowledge or expertise but gives a complete overview of the global scope of epidemiology and public health with sections on history, current practice and potential future directions. The early chapters are on the state of the world's health – including valuable and extremely lucid sections on the health transition, global health and contemporary global health issues. The conclusion to this section unsurprisingly is that socio-economic factors are the most important determinants of health and that the major global public health problem is poverty. The text and the conclusion also highlight the importance of global environmental change, population growth and over-consumption.

The next section is on epidemiology – its evolution and current practice. Epidemiologists are criticized for their narrow focus in concentrating on individual risk factors and ignoring the socio-economic determinants of disease thus contributing to a victim blaming mentality. They are also

criticized for concentrating too heavily on esoteric methodological issues at the expense of substantive health problems. The last section considers public health – again examining its history and contemporary practice in a number of different countries and assesses future prospects.

Perhaps the criticisms that I have extend inevitably from the broad scope of the book. It focuses too narrowly on the discipline of epidemiology to the exclusion of other equally important public health disciplines – indeed as it bemoans the failure of public health practitioners to influence policy and the distribution of resources world wide – the necessity for the strengthening of other public health disciplines rooted in social sciences such as sociology, psychology, health policy and health economics become apparent [1–3]. We need a well equipped public health force so that the messages of public health practitioners of all disciplines can be transmitted clearly and with best effect. We need to be able to think about stress as well as salt in the aetiology of cardiovascular and hypertensive diseases [4]. We need researchers who can help to elaborate the mechanisms for the effects of inequalities in income on inequalities in health, to help us understand the epidemiology of envy [5]. Some questions can only be answered by qualitative work and equally, implementation of sometimes unpalatable findings can require the most highly sophisticated modern policy, political and mass media techniques. So somehow the book fails to draw adequate attention to the broad range of public health disciplines which might prove to be a saving grace both for epidemiology and public health.

Another criticism I have is the amount of space that the book devotes to historical summaries for example of the evolution of epidemiology or the history of public health in England. There are many useful messages about our failure to learn from history – one good example is that the ‘new public health’ was first coined as a phrase in 1916 and has been used ever since! But the book has an iconoclastic and extremely important message which for me is diluted by the history chapters.

The book is beautifully presented with excellent signposting throughout (as should befit a book about a ‘Crossroads’!) There are clearly identified key points drawn from each section and throughout the text important or more complex concepts are highlighted in boxes. The book is well referenced with a substantial bibliography and it has an index although this is not entirely comprehensive.

I run a public health masters course for students from a number of different disciplines and mainly from EU and other European countries. Overall I found this book very interesting and informative. I have already put the book on my list of core reading material for students and would strongly recommend it as general reading to practising epidemiologists, public health professionals and academics – but I’m really looking forward to some sequels – examples could include: Social scientists and environmentalists overcoming the challenges of public health or Policy makers and analysts – the real ‘new public health’ practitioners!

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*The Staphylococci in Human Disease*. Eds. K. B. Crossley and G. L. Archer. Churchill Livingstone 1997. Pp. 682. £90.00. ISBN 0 4430 7644 8.

This book, written in the tradition of Elek, Cohen and Easmon & Adlam, attempts to contain in one volume the total of current knowledge of the staphylococci, especially *S. aureus*. It is in four sections. The first, ‘Microbiology and pathogenesis’ is a state of the art exposition of the molecular biology of *S. aureus*, which will be of great interest to the molecular biologist. This section lies in uneasy marriage with the remainder of the book which covers epidemiology, the disease process and treatment and prevention. These sections will be of great interest to the laboratory bacteriologist or clinician. Arbeit, in his chapter on ‘Laboratory procedures of epidemiologic analyses’ does try to mediate between the old and the new though his affiliations are with the new.

The editors succeed in making this book a comprehensive survey. If a single volume can belong simultaneously on the library shelf, the laboratory bench and the bedside table then this is it. It will provide both a starting point for specific projects and comprehensive repository of reference material. The usual nit picks apply. The volume is written largely by Americans and so is written in American English which does irritate the English reader. Having said this though the majority is well written though some is very unique (sic). The review of epidemiological typing is more up-to-date for genotyping than phenotyping techniques for which some of the references are outdated. There is, throughout, the usual confusion between lytic (of phage) and phage (of strain) group so that NCTC 8325 is placed (incorrectly) in phage group III rather than in phage group I+III. CoNS for coagulase-negative staphylococci grates on the reader and there is a transatlantic bias in the references. Boyce, in his chapter ‘Epidemiology and the prevention of nosocomial infection’ has some very commonsense comments to make but suggestions for the clearance of carriage should be interpreted in the light of the age of the references.

In Section III, particularly in the chapters on endocarditis, infections of intravascular catheters and vascular devices, and urinary tract infections, the coagulase-negative species come into their own. These chapters are a timely reminder that, in spite of the global preoccupation with MRSA, other staphylococcal species cause considerable morbidity and

mortality. Together these chapters form a useful revision of CNS infections reminding us that they are still a serious problem in some units. Similarly, the chapters on other infections and toxic disease remind us that the majority of strains of *S. aureus* involved in human infection are not MRSA.

In conclusion this easy-to-read book should become a standard resource for routine, reference and research laboratories well into the third millennium.

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*Antibiotic and Chemotherapy: Anti-infective Agents and Their Use in Therapy*, 7th edition. Eds. F. O'Grady, H. P. Lambert, R. G. Finch and D. Greenwood. Pp. 987. Churchill Livingstone 1997. £95.00. ISBN 0 4340 5255 7

As the subject of antimicrobial chemotherapy grows the amount of related information expands to such an extent that very few can hope to keep up with developments. Since 1963 those with an interest have been able to refer to this masterly book in a series of editions which have also been evolving and expanding in order to present the ever increasing information in an accessible form. The latest (seventh) edition is larger than its predecessors and has almost reached the point where subsequent editions may have to be presented in more than one volume.

The two previous authors, Professors O'Grady and Lambert, have been joined by Professors Finch and Greenwood. The Big Four have written wholly or in part 16 chapters with the remaining 48 chapters written by 60 other authors. Of the 64 contributors, 12 are from countries outside the United Kingdom.

The new edition is organised in three sections, one on general aspects, one on the drugs and one on the treatment of infections. There is much more material on antiprotozoal and anthelmintic agents and their use than in previous editions.

The book's character as an authoritative source of valuable information is unchanged. It is clearly written, is easy to refer to and remains an essential part of the library of every medical microbiology department. It will be of value to all in the subject from technicians and students to the most exalted experts in laboratory or clinical medicine. The latest edition is a fine achievement of scholarship and yet remains a help to the perplexed practitioner. I hope that the editors, no doubt deservedly resting from their labours

at present, will shortly begin to work on their files in preparation for an updated eighth edition to appear in few years' time.

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*Diagnosis in Colour. Sexually Transmitted Diseases*, 2nd edition. Eds. A. Wisdom and D. A. Hawkins. Mosby Wolfe. 1997.

This book has a venerable history. The first edition under this title was published in 1989, but a previous edition, entitled *A Colour Atlas of Venereology*, by Anthony Wisdom, was published more than 20 years previously. The acknowledgements to those who supplied the generally excellent clinical photographs reads like a roll of honour of British venereologists and it has to be said that, an excellent new section on HIV infection by David Hawkins notwithstanding, the book has a slightly old fashioned feel to it.

It is strong on clinical experience, and illustrates all the clinical oddities so beloved by British venereologists such as the erythroplasia of Queyrat and the plasma cell balanitis of Zoon; it describes in loving detail the 'two glass test' for urethritis, which has not found favour outside the UK; and it contains some truly horrific pictures of late tertiary syphilis and yaws; yet, perhaps wisely in view of the rapid changes in the field, it does not mention treatment at all; there are no illustrations of early congenital syphilis and, worst of all, no references are given. The book is therefore inevitably dogmatic in tone.

Several outstanding new Atlases of Sexually Transmitted Diseases have recently been published in North America which include, in addition to wonderful clinical photographs, epidemiological tables, microbiological illustrations, diagrams illustrating pathogenesis and immune responses, up to date treatment guidelines, and useful bibliographies. I found myself wondering, reading this volume, whether there was really a need for such a book in the late 1990s, especially as several published studies have now convincingly demonstrated that one cannot distinguish between common causes of genital ulceration on clinical appearance alone. I eventually realised, as I read the small print and lists of causes of syndromes, that this book is intended for examination candidates preparing for the MRCP or the Dip. Ven., who may expect to come face to face with a venereologist of the old school and will have to know all the answers.

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