



TOBACCO AND HEALTH

Sir Richard Doll and Sir John Crofton (eds)
British Medical Bulletin 52 No 1 1996. Royal Society of Medicine Press

Tobacco smoking is the most important cause of premature death in developed countries and is rapidly becoming so in the developing world. Currently, about 3 million people die annually from this cause and this figure is expected to rise to 10 million over the next 25 years.

As might be expected from two such eminent editors as Richard Doll and John Crofton, their book provides an authoritative account of the knowledge acquired over the past 40 years about smoking as a behaviour, its health consequences, ways of combating it, and its promotion by the tobacco industry. All chapter authors are experts in their fields. For GPs and their primary care teams, there is a particularly useful chapter by Jonathon Foulds reviewing smoking cessation strategies and methods. This emphasizes the effectiveness of brief advice and encouragement given by primary health care professionals during consultations. Many studies have shown that, as a result of such brief intervention by GPs, a small percentage of those so advised stop smoking long-term. Nicotine replacement (gum, patches, nasal sprays) has been shown roughly to double long-term abstinence rates, compared with placebo and, therefore, to substantially enhance the effect of advice; but the perceived expensiveness of these products (which are not available on the NHS) seriously limits their use.

The book is a valuable information source for academics, health service administrators, campaigners against tobacco, and many others. Although it is unlikely to find a place on the bookshelves of many practices, the importance of tobacco in relation to health could warrant such a place; it should certainly be in all postgraduate centre and medical school libraries.

GODFREY FOWLER

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MEDICAL EDUCATION REVIEW

D Faux, C Ball (eds)
Corbett Press, Stourbridge (1996)
Published quarterly. Price £35 per annum

It is always a pleasure to see a new journal from general practice, particularly when it comes from a College Faculty (Midlands) and

shows so much promise. This new review journal has been compiled by active GP clinicians with an interest in medical education, who found 'no way of gathering information that was relevant or current'. Readers are enticed by such titles as 'Learning Styles', 'Distance Learning for GP Tutors', 'Breaking Bad News' and 'Women Consultants'.

Review journals have the job of selecting from and distilling the vast amounts of published research but also the responsibility to do justice to the original, or the reader may emerge with false conclusions. The ultimate value of the new journal will depend on how well the editors select papers and how well the reviewers reflect the original work. The *Medical Education Review* tackles the problem of ensuring consistency of assessments in an open and constructive way, by publishing a list of criteria and a marking schedule for reviewers that is expressed in stars for importance and smiling faces for ease of reading. The layout of the new journal is reader-friendly, with a restrained but effective use of the graphic capabilities of desktop publishing.

The *Medical Education Review* is an accessible and relevant shortcut to what is going on in medical education. It provides a valuable service to all those with an interest in the subject, and deserves a place in every training practice.

ALASTAIR F WRIGHT

Editor, British Journal of General Practice

RESEARCHING CULTURAL DIFFERENCES IN HEALTH

D Kelleher and S Hillier (eds)
Routledge, London (1996)
224 pages. Price £14.99 (pbk)
ISBN 0415111838

Copying from one author is plagiarism, but copying from more than one is research. Eleven medical sociologists have done a lot of research to write 10 chapters of this book. The Royal College of General Practitioners' triad of a patient's problems covers the physical, psychological and social dimensions. The editors have fulfilled a need in that the text concentrates on the sociological aspects of cultural differences relevant to primary care.

In the chapter 'The meanings of high blood pressure among Afro-Caribbean and white patients', Myfanwy Morgan points out, with wit and clarity, that:

- According to the 1991 Census, black Caribbeans form the second largest ethnic minority in the UK, comprising 0.9% of

the population, or approximately 500 000 people.

- The latest research, conducted in 15 general practices in Lambeth, confirm that there is frequent association of hypertension and diabetes among Afro-Caribbean people. Hypertension has serious significance in black patients.
- Cultural understanding and assumptions influence not only the dynamics of a research interview but also the data provided and its interpretation.

The Irish and Bangladeshis in England are among other ethnic groups included in the text, which is liberally peppered with tables and references. There is much more! Sociologists tend to use more words than scientists for telling the same story. Therefore, this book cannot be recommended as required reading for the MRCGP examination, but it would be top priority for a practice library.

BASHIR QURESHI

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THE GENERAL PRACTITIONER AND THE LAW OF NEGLIGENCE

Walter Scott

Cavendish, London (1995)

384 pages. Price £19.95 ISBN 1859410235

This may seem an esoteric subject for most general practitioners but, as any reader of this book will learn, this could not be further from the truth. Litigation and the increasing trend towards involving doctors in such litigation have made doctors more aware of the risk of being sued. Ignorance breeds fear, and from knowledge comes strength and confidence. This book will serve as a useful educational tool to encourage more knowledge and understanding of the process of litigation.

Walter Scott has written a most helpful addition to the medicolegal literature, and I believe every practice should have at least one copy. He has set out to present very clear chapters on the Law of Negligence, ranging through duty of care, breach of duty of care, and causation. These are terms which most have heard of at some time, but which are clearly explained and illustrated. The individual points are illustrated by a well-documented series of cases. Nothing induces more interest in what might be a dry topic than the real 'stories' — the 'stories' that fascinate all doctors and give them that sense of relief that such things have not happened to them. Here is the education: learning from the mistakes of others.

Often medicolegal textbooks stop after they have discussed the fundamentals of negligence, which are essentially legal in nature. Walter Scott has widened this dry type of approach with a very clear prose style, which makes reading the pages of this book an easy pleasure. Its size and style mean that it can be read quickly and with pleasure, and it deserves a second look. It must not be dismissed as a heavy and dull legal book.

Another innovation in such textbooks is the inclusion by the author of a series of chapters on the conduct of litigation. Doctors become dismayed at the time taken to resolve such matters, irritated by the periods of hectic activity, and worried about the long-term consequences for their careers by their involvement in a legal case. Scott's book contains much useful

advice on court appearances, report writing and good record keeping. Doctors are reminded of the constant need to improve their performance, particularly in such mundane tasks as record keeping, writing and care in examination. These all contribute to what is important, and that is the improvement of medical care for patients.

The author discusses in some detail the role of medical experts and their duties. In the handling of medical negligence cases it is vital to have expert support cases; I would hope that this book might encourage more working general practitioners to become involved. I must wholeheartedly commend it to all general practitioners and their primary health care teams.

JIM RODGER

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RACE AND COMMUNITY CARE

Waqar Ahmad and Karl Atkin (eds)

Open University Press, Buckingham, UK (1996)

199 pages. Price £12.99 (pbk)

ISBN 0335194621

Best books, like best wines, leave a long-lasting taste. The 1990 NHS and Community Care Act introduced the separation of purchasing and providing functions in health and social care agencies. This book will leave a lasting impression on GPs and health planners who seek fair play in care for patients from ethnic communities in Britain. Indeed, GPs have a major role to play in the appropriate delivery of modern community care to every ethnic group — majority and minority.

The authors have rationally examined three concerns which Asians, Blacks and other ethnic minorities may perceive today:

- Community service provision often ignores the needs of black and other ethnic minority groups. Often service managers will say that services are open to all, regardless of ethnic background. In fact, the all-or-none law is inappropriate in healthcare in that each individual or group has different needs which require different answers.
- Community care services often misrepresent the needs of ethnic minorities because of a preoccupation with cultural differences alone. This results in marginalization. Other factors such as religion and ethnicity should also be considered. And the medical model should never be forgotten.
- Racist attitudes among service providers have been reported in a number of studies in health and social services. Health and social service professionals exercise considerable influence on the nature of service provision. Something should be done about the racism problem.

Although there are no pictures or graphs, the text is concise, authentic and readable. Overall, the book is enlightening, challenging and thought-provoking; it should make a good read for GPs who are concerned about these issues.

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