evidence is important, but how often do we all draw the same conclusions?

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AN ATLAS OF MYOCARDIAL INFARCTION AND RELATED CARDIOVASCULAR COMPLICATIONS

Duncan S Dymond Parthenon Publishing, Carnforth (1994) 134 pages. Price £45.00

Myocardial infarction remains the leading cause of death in the western world; the advent of thrombolytic treatment and interventional techniques to manage the condition has drastically altered the outlook for many patients who develop coronary heart disease. In this book, Duncan Dymond has provided a valuable illustrated account of the pathology and current management of the condition.

In the first section of text the epidemiology, diagnosis and treatment of myocardial infarction and its complications are reviewed. The major part of the book is devoted to a dramatic series of illustrations of the pathology of the condition and of the techniques used in the investigation and treatment of patients. Particularly striking are the images obtained non-invasively by echocardiography or radio-nucleotide imaging techniques. These complement the pathological specimens and images obtained during cardiac catheterization or angioplasty.

There are copious illustrations of important electro-cardiographic abnormalities caused by coronary heart disease, and the correlation of these with the results of other investigations that demonstrate the cause or result of myocardial ischaemia is particularly useful.

Although primarily intended for use by and training of medical students, general physicians and cardiologists, this book will appeal to many workers in other disciplines. General practitioners will find much of interest, and the insight into the pathology and modern management of the most common cardiac disorder that they encounter is particularly valuable.

M C COLQUHOUN

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HEALTH IN OLD AGE: MYTH, MYSTERY AND MANAGEMENT

Moyra Sidell Open University Press, Buckingham (1995) 178 pages. Price £37.50 (h/b), £13.99 (p/b)

This is one publication from the Open University series, *Rethinking ageing*. The author is a research fellow and lecturer at the Open University. The main message is that health is not merely absence of disease, and a recurring theme is the inadequacy of the traditional medical model of health. I trust that modern general practitioners are fully aware of these concepts and of the importance of thinking beyond the patient's pathology, which is especially necessary in relation to older patients.

Useful research findings are reported on what old people themselves consider health to be; for most it seems to equate

with ability to cope and not giving in. They consider that a brave face must always be presented to outsiders, who may include medical attendants. A number of informative case histories are presented which effectively elucidate the various notions that old people hold about their own health status; I expect many doctors and nurses will enjoy these histories, as I did.

Sensible and non-doctrinaire criticism is made of recent changes in health and social services, especially within community care; the scarcity of resources is dealt with at some length. In planning for a 'health future for old age' a plea is made that the needs of old people should remain central and that the opinion of experts is rigorously questioned, especially since such experts are often not trained in the problems of old age.

I enjoyed reading this book and found something useful and interesting in each section. Thoughtful primary health care workers will benefit from having access to this book.

J WILLIAMSON

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INTERPROFESSIONAL ISSUES IN COMMUNITY AND PRIMARY HEALTH CARE

Patricia Owens, John Carrier and John Horder (eds) MacMillan Press, Basingstoke (1995) 239 pages. Price £13.99

This book joins a growing list of publications that will help us to meet the demands of the next millennium. It analyses power and professionalism, showing that approaches to health care delivery that invest overly in the authority of one group cannot promote optimal care; it explores history and ethics, showing that the move towards multidisciplinary working is both desirable and inevitable.

The book should be a basic text for anyone studying health care development. Although it is targeted at academics, the reader looking for practical guidance will not be disappointed. There is no need to read the book from beginning to end — indeed, a reader may benefit from first hearing the views of workers (by reading the chapters on care of elderly people or child protection) or learning about strategies for change (by reading the chapter about learning to work effectively in teams). The chapter on mental health services gives a particularly clear overview and may be a useful one to start with. The chapters have summaries and conclusions, enabling some parts to be skimmed.

For my taste the book insufficiently explores human factors—there is too much about professionals and too little about people. Yet one of the biggest interprofessional issues is the interpersonal issue—what conditions help people to get along with others? In fact, apart from the chapter on teamwork, there is little analysis of how to address these issues, including the role of shared learning. To cover these issues fully would be a large task but the book would be strengthened by briefly exploring ways of facilitating interprofessional collaboration by, for example, participatory research, whole systems interventions and organizational development. This does not, however, prevent the book from being an important and timely contribution to the debate on the future of health and social care.

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