



GROWING UP TOBACCO FREE: PREVENTING NICOTINE ADDICTION IN CHILDREN AND YOUTHS

Barbara S Lynch and Richard J Bonnie (eds)
National Academy Press, Oxford (1995)
 306 pages. Price £20.95

This book is the report of an illustrious committee of doctors and social scientists in the United States of America and presents evidence on how to prevent teenagers using tobacco products and to assist addicted young people to give up tobacco. It was commissioned to review the evidence for action on tobacco use (both cigarettes and smokeless tobacco) in the USA to try to meet targets for reductions in tobacco use, akin to, and which are proving just as difficult to achieve as, *Health of the nation* targets in the United Kingdom. The book has much valuable USA-based evidence on adolescents and tobacco and has much of use for readers in the UK with an interest in smoking prevention.

The book is thorough in its presentation of the perils of tobacco use by teenagers, and in particular on the addictive qualities of nicotine. There is a long chapter on the psychopharmacology of nicotine and the reasons why smokers (adolescents and adults alike) find it easy to reduce their cigarette use but difficult to stop smoking.

Psychosocial reasons why teenagers want to smoke in the first place are detailed, as are the roles of, for example, advertising, parents, friends, and role models in mediating such decisions. However, the book characterizes the common problem that although many teenagers may intend to smoke during their adolescence only, the addictive nature of nicotine results in continuing tobacco use in adulthood, with the concomitant health risks. The majority of the book is therefore devoted to the role of prevention of tobacco use. There is compelling and cogent evidence for several avenues of action in public health, health promotion, and community-based and school-based education programmes. These include such action as raising taxes on tobacco products (cigarettes are cheaper in the USA than in the UK) and providing fewer public vending machines for tobacco products, more smoke-free zones, more school-based prevention programmes and less tobacco advertising. It is illuminating to discover that the tobacco industry in the USA is an even more powerful lobby than its UK counterpart.

Overall the book is useful for all interested in a public health role or research on reasons for tobacco use (both for adults and teenagers) but is probably of less use for a wider primary care readership. The book does not address the role of the general practitioner. Further, although the committee has been fair to present tobacco use in adolescents in context, there is little consideration of the interplay with other 'risky behaviours' such as alcohol or drug use. Nonetheless, the book recognizes several

areas of potential future research and development in the field, and is a valuable addition to the literature.

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MANAGEMENT OF VIOLENCE AND AGGRESSION IN HEALTH CARE

Brian Kidd and Cameron Stark (eds)
Gaskell, London (1995)
 185 pages. Price £12.50

Ten years ago, when writing about a violent experience in my surgery, I could find little in the United Kingdom literature about violence towards doctors. The best information was from other disciplines or from outside the UK. Sadly this is a topical issue nowadays. Several books now address this subject.

This book contains eight chapters by authors working in different fields (including psychology, forensic psychiatry, social work, nursing, public health, from Broadmoor and the prison service). There is, however, no chapter by a general practitioner.

Topics discussed include theories of violence and assessing the dangerousness of patients, interviewing aggressive clients, de-escalation of violent incidents, medical treatment, post-incident support, the role of the institution and ethical and legal dilemmas. Course organizers and postgraduate tutors will find useful references, although some material is aimed at institutional issues (for example, the use of seclusion, zuclopenthixol acetate (Clopixol Acuphase®, Lundbeck) and long-term treatment).

A useful model of the 'cycle of assault' will help any doctor dealing with an angry patient to understand the patient's, and his or her own, state of mind. The chapter on post-incident support is helpful for general practitioners as employers and team members.

I was disappointed that one chapter omitted to cite alcohol as a trigger for violence, and illustrations of 'breakaway' self-defence techniques were mislabelled and poorly drawn, making it hard to see who is the assailant. It is said that these techniques should not be taught outside proper training courses in case they fall into the wrong hands. It is a shame that more care was not taken over the references as a couple of errors were noticed.

What about the competition? Braithwaite's workbook (*Violence — understanding, intervention, prevention*), published by Radcliffe Professional Press in 1992 offers practical scenarios suitable for registrars to work through, and Shepherd's guide (*Violence in healthcare*), published by Oxford University Press in 1994 has general practitioner input and sections on domestic violence. Sections on non-accidental injury and domestic violence in Churchill Livingstone's general practitioner training

pack (*Aggression and violence in general practice*, by Harris and colleagues) contains material for two half-days of postgraduate education allowance for a group of 10 participants.

Descriptions of procedures for use in a crisis are only useful if practised and remembered. General practitioners do have a training need for management of violent patients, and books like this one are a good start although they are no substitute for careful training.

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TACKLING INEQUALITIES IN HEALTH: AN AGENDA FOR ACTION

Michaela Benzeval, Ken Judge and Margaret Whitehead (eds)
King's Fund Centre, London (1995)
166 pages. Price £14.95

The evidence is now overwhelming. People living in disadvantaged socioeconomic circumstances have more illnesses, more disability and shorter lives than those who live in more affluent circumstances. General practitioners working in deprived areas see this in their surgeries every day. Poor housing, poverty, inadequate education and unemployment feed each other and, in the process, undermine health and blight lives. The health of the nation is only as good as that of its poorest citizens.

It is a matter of profound injustice that a person's health should be undermined by social circumstances which are beyond his or her control. This timely book seeks to move beyond the

fact of this injustice and to develop an agenda for action. Practical, affordable ways of reducing inequalities in health are described, but the whole text is underwritten by a recognition that the greatest challenge is to generate the political will necessary to tackle the injustice and bring about real change.

Interventions are proposed at four different levels aimed at strengthening individuals, strengthening communities, improving access to essential facilities and services, and encouraging macroeconomic and cultural change. Housing, family poverty, smoking and the linked issues of education, unemployment and child care are each discussed in detail, giving tangible examples of the extent of the inequalities and how much could be done to redress them. In a discussion of the role of the National Health Service it is acknowledged that levels of well-being and life expectancy are more closely related to the availability of adequate social security, housing, employment and education than to health care. However, the book goes on to raise the question of credibility, pointing out that if the health sector is not concerned with inequalities in health, other sectors can hardly be expected to take the issue of inequality seriously. The NHS has a responsibility to take the lead and to promote equity across the whole range of public policies that have an impact on health.

In the foreword to this book, after reiterating the wide and increasing social differentials in health, Sir Donald Acheson writes: 'Today the question is not whether these facts are valid, but who cares and what can be done about them'. This is an important debate to which this book makes a major contribution.

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