As a student currently undertaking a Masters in Public Health, I have found Oleckno’s book ‘Essential Epidemiology’ most helpful for the epidemiology component of the course. This introductory book covers the salient aspects of the study of epidemiology. Chapters 1 to 3 focus on the nature of uses of epidemiology, its historical foundations, and disease-related concepts. Chapters 4 and 10 to 13 cover conduct, analysis, and interpretation of epidemiological study designs. Chapters 5 and 6 review statistical methods used in epidemiology such as comparing rates and measuring associations. Chapters 7 and 8 discuss association, causation, and methods for evaluating the accuracy of epidemiological studies. Chapter 9 covers screening for the detection of disease and chapter 14 focuses on the investigation of disease outbreaks and public health surveillance.

Oleckno remarks that the book is aimed to be user-friendly and I would endorse this. He has a great ability to explain and simplify difficult epidemiological concepts. However, the strength of this book lies in its salient aspects of the study of epidemiology, Chapters 1 to 3 focus on the nature of uses of epidemiology, its historical foundations, and disease-related concepts. Chapters 4 and 10 to 13 cover conduct, analysis, and interpretation of epidemiological study designs. Chapters 5 and 6 review statistical methods used in epidemiology such as comparing rates and measuring associations. Chapters 7 and 8 discuss association, causation, and methods for evaluating the accuracy of epidemiological studies. Chapter 9 covers screening for the detection of disease and chapter 14 focuses on the investigation of disease outbreaks and public health surveillance.

One helpful aspect of this book is that it is aimed at students studying in the US. Examples (called exhibits) are solely confined to US experience, history, and current legislation. For example, the exhibit on the registration of deaths is based solely on the US system. Oleckno has also used a rather narrow definition of epidemiology, neglecting that epidemiology also encompasses ‘the application of distribution and determinants of health related states’ to control health problems’ which is found in Last’s definition. Also helpful would have been a table or a more detailed discussion of the different terms used internationally for incidence, cumulative incidence rate, and person time incidence rate. Other authors use different terms and it was slightly confusing trying to understand which concept fitted which term. In addition, under the list of formulae it would have been helpful to have an index of what the actual symbols and letters meant. These are, however, minor points compared to the true value of the book itself.

Would I recommend this book? Overall, the book reads easily, is fluid and it is a useful adjunct to other textbooks currently on the market that introduce students to epidemiology.

FC TAYLOR
the ethical aspects of health policy into sharp relief, and will make this a useful sourcebook for comparative policy studies.

The book is organized in four sections. Part I is ‘Identifying the Goals of Health Care’, and comprises two chapters, one by Daniel Callahan and one by Norman Daniels and colleagues. Both chapters will be of particular interest to an epidemiological audience. Callahan concludes that if equitable access and the health of the population are the principle aims of policy (as they should be) ‘then it is a mistake to allow individual benefit to remain the test of successful policy and for the provision of high-technology, acute care medicine to remain as the highest de facto goal’ (p. 18). He argues for a shift from the present strong emphasis on cure towards improving the quality of the health of the young and towards greater health promotion and disease prevention. Daniels et al. consider the ethical implications of what we know about the wider social determinants of health. Using a Rawlsian framework (building on Daniels’ previous work in Just Health Care), they argue that the principle of fair equality of opportunity means we have to consider not only how access to health care is distributed but also how the social determinants of health are distributed. They conclude that the level of health inequalities tolerated by most industrialized nations, even in the more extensive welfare states of Northern Europe, is inequitable and requires action to reduce the unevenness of distribution.

Part II, ‘Connecting Ethics and Health Policy’, contains chapters by Larry Churchill, Eli Ginzberg, and Amy Gutmann and Dennis Thompson. Churchill elaborates the main theme of the book by examining the contributions that systematic ethical reflection can bring to health policy. With notable exceptions, most bioethicists do not routinely consider policy questions. This can be attributed to two main inhibiting factors: ‘the pervasive American commitment to individualism’ and ‘the American cultural aversion to rationing health services’. Interestingly, he notes that when a group of bioethicists was asked to help draft a values statement for the Clinton Health Plan, they were instructed not to mention the word rationing. Ginzberg provides a brief but fascinating outline of 20th century US health policy, and argues strongly for a more informed debate about how health care is funded and who gains access to it. Ginzberg predicts that the American public will soon accept the need for some form of basic universal health insurance cover. Gutmann and Thompson, building on their previous work on deliberative democracy, consider how it could help make rationing decisions in a more consensual, participative, and well-informed way.

Part III considers the ethical issues inherent in current health policy-making institutions and processes. Kingdon’s chapter on the reality of public policy-making, already referred to above, uses his model of three streams—problems, proposals, and politics—to analyse the policy process, with specific reference to the Clinton Health Plan. The problem was clearly recognized, there was a degree of political willingness to act, but there was insufficient coalition or consensus amongst the many stakeholders as to which proposal they should support—and so the moment passed. Kingdon also notes some possible dangers in becoming too explicit about ethics in health policy, including the danger that positions may polarize and harden. Broad coalitions may be easier to construct around ‘fuzzy’ goals, so a more pragmatic and less morally entrenched debate might be preferable. Ethicists may also risk losing credibility if they are seen to become too close to policy advocacy.

Other chapters in this section look at the role of public opinion polling, the courts, federal and state-level policymakers, and the private sector in health policy-making.

The final section examines ethical controversies in health policy. Emanuel returns to the question of how to move health policy from an individualist model towards a more community- or population-based approach. An ‘unabashed, utilitarian maximisation strategy’ (p. 230) arouses understandable hostility not just from physicians but also from the public. Emanuel therefore searches for a non-utilitarian Rawlsian alternative, which ‘reasonable individuals would view as just and ethical’ (p. 234). This involves elaborating a set of procedural principles to safeguard rights: fair consideration (of everyone’s potential interests), openness in decision-making, empowerment (mechanisms for citizens to participate and express their interests), appeal, and impartiality. Emanuel goes on to attempt a set of substantive principles to guide detailed decision-making on what services will be covered, but acknowledges this is only a starting-point for further debate.

Two chapters in this section consider medical accountability within the doctor—patient relationship and wider accountability for health care as a public good. Two further chapters consider whether we owe a special duty of care to vulnerable populations. Brock argues, for example, that extreme poverty and lack of education, known risk factors for poor health, are caused by ‘our country’s social structure … and our society has a moral responsibility to remove them’ (p. 290). The section concludes with two chapters on ethics and research, including an interesting discussion of the ethics of selecting research priorities.

This book provides a wealth of material, much of it highly accessible to a general audience. Occasionally it slips into more esoteric detail; as the editors conclude in their final section, the ethics community must ensure it presents its concerns clearly and intelligibly to influence policy successfully. Nonetheless, it will be a useful resource for students and researchers in health policy studies and social medicine, and a useful addition to many reading lists.

LOUISE LOCOCK

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