change in case definitions of AIDS over the years. Another example is the chapter on SARS that outlines the hypothesized origin of the disease, its emergence in human populations, and its spread to major cities. The chapter on malaria includes important international measures such as disinsectization of aircrafts before boarding of passengers or in transit, disinsec-
zation of aircraft, ships, and other vehicles on arrival if malaria vectors are suspected to be present, as well as enforcing and maintaining rigid anti-mosquito sanitation within the mosquito flight range of all ports and airports.

The book also contains valuable information on how to report a communicable disease (case reports and outbreak reports), how to respond to an outbreak report (i.e., verify the diagnosis, identify the existence of an outbreak, define and investigate the population at risk, formulate a hypothesis as to the source and spread of the outbreak, and contain the outbreak), and how to evaluate cases of deliberate use of biological agents to cause harm (bioterrorism and biological warfare). The current volume is compact and easy to read and use. It contains a few colour photographs of selected communicable diseases (e.g., anthrax, botulism, dengue haemorrhagic fever, influenza, Lyme disease, malaria, small pox, monkey pox, SARS, syphilis, tularensis, and West Nile virus). In my opinion, an expansion of this photographic section would be desirable for future editions. I further suggest that these photographs not be clustered in the middle of the book but rather individually in sections in which the respective communicable diseases are discussed. The book concludes with a series of smaller, yet quite informative, sections such as abbreviations and acronyms, explanations of scientific terms, a 75-page long index section, and US immunization schedules for children and adolescents. I found particularly helpful the section on the explanation of terms such as case-fatality rate, contact, communicable disease, herd immunity, molluscicide, and zero reporting.

In conclusion, I would highly recommend this 18th edition because it contains valuable information about communicable diseases and it is well organized. The book is relatively inexpensive for the wealth of information provided. This makes it attractive for wide distribution among all those people who work in the field of public health, including public health workers, health care providers who have contact with people suffering from communicable diseases, and scientists who have an interest in these diseases as it relates to their identification, reporting, control, and prevention. The CCDM18 is undoubtedly most valuable as a field guide for infectious disease epidemiologists but it is also quite useful for microbiologists, medical entomologists, physicians, and veterinarians, as well as for scientists working in the area of biodefence and biosecurity. It is also useful for any other person as a synopsis of communicable diseases.

C T K-H STADTLÄNDER

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Assessing Quality of Life in Clinical Trials: 2nd edition

This is a substantially revised and updated, second edition of the original book on Quality of Life (QoL) assessment first published in 1998. This new edition has increased in length by over 100 pages, to 467 pages compared with the original, with contributions from 31 authors (the first edition had 25 contributors) and is edited by Peter Fayers and Ron Hays.

As the editors state in the preface, QoL of assessment has progressed considerably since the first edition was published in 1998. QoL assessment is now a standard outcome in many randomized controlled trials and other studies. Thus the aim of this book ‘is to provide not just an update, but a completely new edition that reviews the current state of the art’ of QoL assessment in clinical trials.

The book aims to provide methodological and practical information to help researchers design, implement, analyse, and report QoL assessments in the context of treatment evaluation. It covers a wide range of topics from the development of QoL questionnaires to the analysis and interpretation of QoL data from studies.

The book is split into 27 chapters across six main parts. The five initial chapters on developing and evaluating questionnaires are followed by four chapters on adapting and using questionnaires. The third part includes five chapters on the analysis of Health Related Quality of Life (HRQoL) data followed by five chapters on interpreting QoL in individuals and groups. The fifth section consists of four chapters on measures for clinical trials and a final sixth section (four chapters) on beyond clinical trials. The book ends with an index.

The format of each of the chapters is well laid out, with most of the chapters starting with an introduction and quickly bringing the reader to the questions of interest and ending with a summary or conclusion. The concepts and methods are illustrated throughout the book with extensive recent examples from the literature. Most of authors write in a flowing style, which is easy to understand and follow. However, one minor criticism of the editors is the lack of consistency in terminology. QoL is referred to interchangeably as QoL or HRQoL. (Health Related Quality of Life). The editors should have decided on an appropriate nomenclature and applied it consistently throughout the book.

There are several informative chapters on the use of qualitative methods and item response theory (IRT) for developing questionnaires. The second part of the book includes several chapters on adapting and using questionnaires. International researchers may find the chapter on translating and evaluating questionnaires particularly helpful.

The five analysis chapters tend to concentrate on missing QoL data and hypothesis testing (P-values): not confidence interval estimation. There is a clear consensus among leading
medical journals that now expect scientific papers submitted to them to contain confidence intervals when appropriate and a reduced emphasis on the presentation of \( P \)-values from hypothesis testing.\(^2\)

The interpretation of QoL scores raises many issues and is discussed in Part 4. The scales and instruments used may be unfamiliar to many clinicians and patients, who may be uncertain of the meaning of the scale values and summary scores. Repeated experience and familiarity with a wide variety of physiological measures, such as blood pressure or forced expiratory volume, has allowed clinicians to make meaningful interpretation of the results. In contrast, the meaning of a change in score of \( x \) points on a QoL instrument is less intuitively apparent, not only because the scale has unfamiliar units, but also because health professionals seldom use HRQoL measures in routine clinical practice. Several chapters in Part 4 attempt to clarify these issues.

The penultimate section of the book, Section 5, includes five chapters on measures for clinical trials. This section is helpful for researchers intending to choose an ‘off the shelf’ QoL instrument for their particular clinical trial and summarizes several of the more popular general or generic QoL measurements. This section also contains a very useful practical chapter on the measurement of QoL in children in a clinical trials setting.

The last four chapters in the final section (six) attempt to go beyond clinical trials and include sections of preference-based measures and discrete choice experiments. These chapters highlight areas where active research is in progress, and may be helpful to a reader with an interest in health economics, but may not be of much interest to a researcher undertaking a clinical trial of a new treatment. The final chapter of this section on meta-analysis or combining clinical trials is rather superfluous as it attempts to summarize standard methods for meta-analysis. To end on a positive note all royalties from the sale of the book are donated to ISOQOL (The International Society for Quality of Life Research).

There is considerable overlap of content between this book and another on Quality of Life, Assessment, Analysis and Interpretation in which Fayers was a co-author.\(^3\) However, in my opinion, the Fayers and Machin (2000)\(^3\) book—although now starting to show its age, is superior and benefits greatly from the continuity of having the same authors throughout all the chapters.

This excellently presented book achieves its aims of being an introduction to QoL, and its assessment, analysis, and interpretation. For most researchers involved in using QoL measurement it provides a handy reference. However, in my opinion it is a little weak on the analysis of QoL data (although I accept the analysis of QoL data is rapidly expanding and evolving) and interested readers may find the books by Fayers and Machin (2000)\(^3\) and Fairclough (2002)\(^4\) more useful for this aspect.

Overall I would recommend it for library purchase for any investigator intending to regularly use QoL outcomes in research studies. This new edition is a substantial improvement on the first edition. However, those involved in the statistical analysis of such data may find that it does not cover all the statistical methods available for such data.

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References