disease in countries in Africa, in particular, and other countries of the developing world.

Issues of public health resonate in a world of conflict and danger where people are forced to flee their homes, and the health impacts are formidable. Whether because of natural disasters such as the tsunami of 2004, or the dislocation caused by ongoing festering conflicts in countries such as Sudan, the increased vulnerability of populations coupled with the lack of basic facilities place the health of such populations at increased risk. Thomas and Thomas emphasize that long-term public health prevention and education campaigns are required to meet the needs of these displaced communities. In addition, the lifestyle changes resulting from migration can result in mental distress and alienation, as individuals attempt to cope with diverse factors such as socioeconomic disadvantage and discrimination as described in this volume by Bhigra.

Immunization has been one of the success stories of science preventing epidemics of infectious diseases and reducing morbidity and mortality. Despite the fact that the risks resulting from immunization are low, the media has highlighted these risks rather than the enormous benefits. In a world where there is increasing scepticism about the pronouncements of prominent public persons, perceptions of distrust are also negatively influencing the public response to an immunization policy supported by doctors, scientists, and politicians. Fitzpatrick emphasizes the risks that this culture poses for society. This wariness in respect of conventional scientific explanations is highlighted by Greenbaugh and Wessely who describe the phenomenon of healthism where middleclass Western people use a distrust of doctors and science seek their own alternative explanations. This distrust of science has resulted in a controversial discourse in South Africa initially about HIV/AIDS and subsequently about the role of nutrition in the treatment of HIV/AIDS. The president’s querying as to whether HIV infection caused AIDS and his support for dissident groups of a similar opinion sowed much confusion within South African society.

The selection of issues that public health officials address is interrogated in the papers: issues such as teenage pregnancy and lead poisoning. Teenage pregnancy is an emotive public health concern, which is viewed as a social problem in many countries. Geronimus notes that this is a relatively recent concern since for many centuries fertility timing in societies permitted this practice. The author emphasizes the inequalities that currently facilitate this practice, the structural barriers that impede full participation of Afro-Americans in American society, and the importance of public health professionals considering such issues in a critical evaluation of this issue. Fassin takes up the concern of childhood lead poisoning in France and the public health response to lead poisoning in children considered either as a disease with cultural origins, since mostly African families are affected, or alternatively as the outcome of immigration and housing policies.

Simon Sinclair raises critical questions whether evidence-based medicine (EBM) either changes individual clinical practice or improves patient outcomes for the better, and raises concerns about the ‘ritualisation’ of medical science. These concerns are echoed in Jackson’s paper, which notes that expressions of genotypes are modified by several filters—cultural, behavioural, and environmental—that in turn influence health outcomes.

She proposes an alternative bioanthropological strategy to understand the complex interrelationships of human genetic variability and health, which recognizes that genetics and ethnicity are intertwined.

CC JINABHAI
MYRA TAYLOR

doi:10.1093/ije/dyi277
Advance Access publication 2 December 2005


The authors of this book have drawn on their collective experience in teaching students to produce this articulate and interesting introduction to epidemiology. This book is highly readable and, from the outset to the end, consistently challenges the reader with exercises, questions, and current epidemiological issues.

The opening chapters provide a simple introduction to epidemiology, with key definitions, descriptions, and illustrations. The reader learns of its historical underpinnings and is presented with basic examples of epidemiological data and simple interpretation exercises. In the following chapters, concepts relating to the measurement of disease and mortality, use of public health data, and population health surveillance systems are discussed.

Some of the fundamental methodological issues in modern epidemiological research are presented in detail in the central chapters. This begins with an overview of exposures, outcomes and the interpretation and calculation of various measures of risk. Pertinent examples using past epidemiological research are presented and the readers are again afforded many opportunities to develop their skills in analysing and interpreting epidemiological data. Different study designs relating to both observational and experimental research are summarized in the next chapter. The positive aspects and drawbacks of different designs are discussed and the reader is introduced to several notable case-control studies, cohorts, and trials. This is followed by a comprehensive outline and discussion of chance, bias, and confounding. The negative impact of these factors on epidemiological research and the importance of attempting to minimize their effects is adeptly highlighted over several chapters.

The authors follow this up with a teaching chapter on reading publications. Here, they provide guidance on implementing knowledge of study design, bias, confounding, and chance to critically appraise research and make judgements regarding the validity of studies. This is followed by chapters discussing the evaluation of causation and the synthesis of different studies in systematic reviews and meta-analysis.

In the final chapters of this book, the emphasis on the wider health perspective relating to community and population health is reinforced. Here, the authors discuss the occurrence of clusters of rare disease, outbreaks, and the spread of infectious disease. In addition, issues of disease prevention in public health and the implementation and evaluation of screening programmes are each reviewed.
In this book, the authors have succinctly outlined the key concepts in modern epidemiology. Readers new to this growing field are taken through a thorough introduction of epidemiology, complete with its promises and pitfalls. Drawing on the myriad examples of past and present research, the authors illustrate the valuable contribution of epidemiology to improving public health while also highlighting limitations requiring more rigorous attention and improvements for the future. According to the authors, the way forward is to ‘think smarter’—this book provides the ideal starting point for those wanting to do just that.

MARIE-JO A BRION
E-mail: marie-jo.brion@bristol.ac.uk

doi:10.1093/ije/dyl028
Advance Access publication 28 February 2006


Those of us working in the field of health sciences are only too aware of the possible tensions that can emerge when researchers from different disciplinary backgrounds attempt to converge. In circumstances where individuals can struggle to speak the same language in terms of research aims, methods, and potential conclusions, this narrative by Trostle is a welcome addition. The book primarily aims, through the use of many examples—both historical and contemporary, to highlight the potential for ‘complementarity between textual and statistical portrayals of disease’. This text is one of a series that attempts to introduce the main themes of the sub-discipline of medical anthropology.

This accessible text is structured into eight easy-to-read chapters. Following a general introduction, in which the author presents a description of cultural epidemiology—as concerned with how diseases are defined and measured as well as patterned, chapter two examines the origins of an integrated approach to anthropology and epidemiology. Here the author draws on the historical work of John Snow and Rudolf Virchow, but also does comment on predictions for the 21st century. Chapter three sets the stage for the chapters that follow, with its focus on culture and epidemiology. This chapter examines cultural issues in measurement and bias—both historical and contemporary, to highlight important issues. The fourth chapter provides a description of cultural epidemiology—as concerned with how diseases are defined and measured as well as patterned, the author uses examples, including mortality data from the sinking of the Titanic and the measurement of ‘race’ to highlight important issues. The fourth chapter examines cultural issues in measurement and bias—this together with chapter three largely serves as a general ‘critique’ of epidemiology. While this provides a useful summary of some of these issues key to the interpretation of epidemiological data, the input from anthropology per se is sometimes lost in this process. It is not always clear what added value anthropology has provided over and above what could be discussed by a good critical epidemiologist. The following two chapters are dedicated to more specific examples in which epidemiology and anthropology have come together, the first considers the anthropological contributions to the study of cholera and the second the impact of this collaboration to help communities become healthier. Before drawing his conclusions, Trostle considers the theme of perceiving and representing risk (chapter seven), which highlights some of the interesting distinctions between ‘professional’ and ‘lay’ epidemiology. Each chapter ends with suggested readings, providing a useful guide to further resources, this helps to address one of the more general shortfalls of the text, that is, the slight lack of depth in which many issues are covered.

Parallels can be drawn between some of the issues raised in this text and that of the potential for combining qualitative and quantitative techniques in the context of health sciences. In this sense Trostle appears to side-step some of the possible theoretical incongruity between the disciplines of anthropology and epidemiology. This on the one hand is slightly disappointing, however, in a field that sets out to answer largely pragmatic questions relating to health and health services, perhaps this taken-for-granted approach is more fruitful. Trostle concludes by likening disciplinary boundaries to ‘semi-permeable membranes rather than defended borders’, which is both a feasible and optimistic view. However, in the climate of publish or perish, usually divided by disciplinary boundaries, this may not be so straightforward.

There is no doubt this book is an interesting read and presents very nicely an overview of many of the key issues relating to culture and epidemiology. However, the audience for the book remains a little difficult to specify. The text is written in a very social science style, which may be off-putting to those with a more medical persuasion. Unfortunately the epidemiologists who are likely to be drawn to this text are probably those who are most aware of the benefits of this interdisciplinary collaboration at the outset. The author does allude to the fact that core teaching in epidemiology should be integral to the curriculum of graduate medical anthropology programmes, and for this purpose the book would be an essential core text. The book would also serve as a useful source of teaching material for modules in social medicine, epidemiology, and medical anthropology alike.

JOY ADAMSON
E-mail: ja14@york.ac.uk

doi:10.1093/ije/dyl029
Advance Access publication 28 February 2006


This well-researched reference book brings together 27 case studies of pesticide exposure, scientific papers on exposure and health, policy and regulation examples, voices of women themselves, and the demands of activists for change. The editors, Miriam Jacobs and Barbara Dinham, of Pesticides Action Network have made an effort to put together all the stories along with their introductions.

Pesticide exposures occur in occupational and non-occupational settings, in developing and developed countries. Most human pesticide exposures are unintentional, unknowing, and unwilling. Rural agricultural populations are usually at higher risks but underestimated because of the difficulty of tracking migrant, temporal, and poor farm work populations. The situation in developing countries is even worse because of excessive and inappropriate applications, inadequate conditions such as lack of protective equipment, and the difficulty for a farmer in knowing what active ingredients are being applied. As