The *Manual of Infection Prevention and Control* is specifically focussed on health care-associated infections (HCAIs) and aims to give evidence-based recommendations and easy-to-follow advice on strategies to prevent such infections. The target audience is wide; the book is aimed at any health care worker involved in or affected by HCAI.

The author of the book is Clinical Director, Infection Prevention and Control in Northern Ireland, and honorary lecturer in medical microbiology at Queen’s University, Belfast, and so is well placed to compile a comprehensive health care-focussed text.

The book is divided into 20 chapters, beginning with basic concepts, administrative arrangements and outbreak management, and goes on to cover practical areas such as disinfection and sterilization, hand hygiene, personal protection and isolation precautions. There is specific coverage of the main HCAIs (clostridia, tuberculosis (TB), etc.) and infections associated with clinical interventions (catheters, ventilators, etc.) making it a really useful book to have to hand in a clinic.

There is also a chapter on staff health, which covers the role of occupational health, pre-employment assessments, health status of health care workers, management of sharps injuries and protection against TB. This chapter makes a strong positive point on the need for adequately resourced occupational health but does not go on to say what the author thinks that looks like. There are some very clear tables on the management of HIV, hepatitis B and C viruses, on post-exposure prophylaxis and on the follow-up of women exposed to infections during pregnancy.

The book is a very easy read, with numerous references to appropriate and up-to-date guidelines (mostly those of the Health Protection Agency). It is very clear, easy to read, comprehensive and well structured.

My only criticism is that whilst there has been a wide range of reviewers from the UK, Eire, Malta and Switzerland involved in the production of the book, none is an occupational health physician yet the book covers staff health issues. I think this would be a useful addition to a further edition.

**Rating**

★★★☆ (Buy and keep)

Nerys Williams

doi:10.1093/occmed/kqs036

*Embitterment: Societal, Psychological, and Clinical Perspectives*


This book has been written/edited by two professors of psychology, the first from Germany and the second from Switzerland, who have extensive experience in many aspects of psychiatry. The chapters are written by different contributors, primarily with a psychiatric or psychological background, for an intended audience of psychologists and psychiatrists.

The book aims to outline the available evidence that supports a new clinical condition known as ‘embitterment’. At this stage in time, the International Statistical Classification of Diseases and Related Health Problems, 10th Revision (ICD10) does not recognize such a diagnosis; however, the authors believe that one should exist. The various sections cover the features of embitterment, as well as views on its context and classification.

There are many chapters that outline what is meant by the term ‘embitterment’ and putting this within a psychological context. There is a short chapter on embitterment and the workplace and the inevitable perception of injustice. Another chapter explores the link between embitterment and personality traits. There is considerable discussion about post-traumatic embitterment disorder and it is compared with post-traumatic stress disorder. A brief overview of the treatment for these conditions is given, which is primarily of a psychological nature.

‘Embitterment’ is a condition that most occupational health physicians (OHPs) would have encountered in their daily work. Employees who feel that they have been unfairly treated by their organization or their manager will frequently be referred following a period of prolonged absence. Although this book may provide some background regarding why this should be recognized as a true clinical diagnosis, it is unlikely to help OHPs in managing such cases. There is a discussion about the option of ‘forgiveness therapy’ as a long-term psychological treatment, but this is not something that is likely to affect the short-term employment-related situation of sufferers.

OHPs with an interest in the psychological reasons for long-term sickness arising from dissatisfaction may want
to borrow the book from a library; however, for most others, I suspect time would be better spent on other publications.

Rating

★★☆☆ (Not recommended)

Peter Verow

doi:10.1093/occmed/kqs044

Working in International Health

International health deals with health issues in countries other than one’s own, especially the so-called low and middle income countries (LMICs). In contrast, global health (a term that sounds as though it could be synonymous) concerns health issues, such as pandemics, that can transcend national boundaries. The target audience for this book is people interested in working in international health and concentrates on those employed by the UK National Health Service.

The three authors of this book are a physician and two non-medically trained professionals with an impressive background in international health work and are well qualified in the subject. They convey deep knowledge and familiarity through their own experience and that of many other practitioners in the field (whose quotations are liberally sprinkled throughout the book). It is highly readable and well-structured into sections relevant to one’s level of interest in, and intention to enter, international health. There is some repetition but this appears deliberate because it emphasizes several important points for those considering international health, such as language ability, resource challenges and competence to perform the required job once in-country. There are a few niggles with the format. For instance, it was difficult to read the keys on the maps, which are small and produced in black and white, but these do not detract from what is a very informative book.

What is its relevance to occupational health professionals? Not much, from the way it is written. Even though there is a section on health and safety, I could find only one reference to occupational health and this was about pre-travel preparation rather than occupational health professionals becoming practitioners of international health. This is understandable because work performed when in a LMIC needs to align with the host government’s health plans and one assumes occupational health is not a high priority. Nevertheless, perhaps this is a missed opportunity? We all hear of the ‘third-world sweat shops’ where work takes its toll on health. Working conditions like these add to a country’s overall health burden, so some effort should go towards implementing basic occupational health measures. Also, for the niche area of disaster relief, occupational health support is needed for the team of responders, i.e. the workforce.

There are useful sections on the challenges of expatriation/repatriation, monitoring and evaluation techniques, and the importance of good management skills. These have relevance to general occupational health practice.

I liked this book. Even if not relevant to most of us, it is still a good and salutary read showing what it takes to practice international health effectively.

Rating

★★☆☆ (Reference only)

Stephen Jones