Book Review


The opening line of the introduction of this book sets the scene ‘I am out of antibiotics. She is going to die.’ Over 11 chapters and an introduction, Dr Spellberg provides case reports, excerpts of dialogue, anecdotes and background information on the history of antibiotics and antibiotic resistance. The book is written for a lay audience. The concluding sentences are ‘The lives of our family, our friends and others are in our hands. We must act now to protect our future.’ Dr Spellberg is arguing that we have to provide incentives to the pharmaceutical companies to invest in the development of new antibiotics because without these drugs, there is a bleak future for modern healthcare.

Dr Spellberg defends the pharmaceutical industry and argues that it is time to stop the finger pointing but instead to see what can be done to foster the development of new antibiotics. He suggests various push and pull incentives to stimulate antibiotic research and development such as prolonging the patent life of antibiotics. The penultimate chapter (10) asks what you can do to help and parallels global warming with the current failures to develop new antibiotics. This chapter is a plea to the reader to support a campaign that will raise this issue to the extent that politicians will take it sufficiently seriously to take action.

The book could be seen as objective-orientated in that the objective of the author is to encourage pharmaceutical companies to develop and produce new antibiotics. The way that the information is presented and that the stories are told is designed to emphasise the importance of antibiotic-resistant bacteria and the corresponding requirement for effective treatments. Dr Spellberg suggests that antibiotic resistance is inevitable as microbes adapt and that the idea that we can control the problem by reducing inappropriate antibiotic prescribing or by improvements in hospital hygiene are naive and short-sighted. One of the disappointing aspects of the book is the limited information provided about the prevention of infection, so there is only half a page in this 264-page book on vaccines. We could find no mention of probiotics. He acknowledges that we do need to try our best to control hospital infections by better antibiotic stewardship and infection control, and he argues that these efforts will never lead to complete elimination of hospital-acquired infections. Clearly, the failure to completely eliminate hospital-acquired infections does not necessarily mean that we will require new antibiotics unless the hospital-acquired infections are resistant to the antibiotics that we already have. Many hospital-acquired infections are associated with the use of biomedical devices such as intravenous cannulae, and there is considerable evidence now that many of these infections can be prevented by better practices and improved technologies. Yet again, there is no mention of these advances in the book.

Dr Spellberg is an infectious diseases physician who, as a result of his experience, can provide many examples of patients who suffered adversely as a consequence of infection with antibiotic-resistant bacteria. It would have been good to see that the bleak perspective contrasted with some of the successes, particularly in the preventive field. There is no discussion of the ethical perspective but rather a blind acceptance of the market model that underlies new drug discovery and development. An alternative thesis to explain the current lack of development of new antibiotics might be that it provides another example of the failure of the market model that prioritises short-term economic gains ahead of longer-term consequences.

This book is written in an engaging and emphatic style. The concerns about a rising tide of antibiotic resistance are well made. The reader will have to make their own mind up with respect to the solutions to this problem.

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doi:10.1093/phe/php038
Advance Access publication on 8 March 2010