which states: ‘The battle against the pharmaceutical transnationals will not be easy’. Both the essence, confrontation, and the style, the liberal use of extracts from other publications, are encapsulated in this paragraph.

The content is largely a catalogue of the pharmaceutical industry’s alleged misdeeds and intransigence as culled from the industry’s known critics. The author charmingly declares: ‘This book . . . is unquestionably biased, and for that I make no apologies.’ It criticizes the pharmaceutical industry, the industry’s associations, particular companies and individuals without fear or favour, especially for their alleged obstruction of WHO policies, interference with the drug policies of the governments of developing countries and unethical marketing practices.

This book is not easy to read. Apparently written by a single author, it has the uneven quality of a multiple author work because of the liberal use of extracts from the sources cited.

Who might want to read this book? Those in the pharmaceutical industry, if there are any, who are unfamiliar with the opinions and activities of such as Health Action International, and others, and who need them summarized. Also, those on both sides of the ‘battle lines’ who like their prejudices reinforced by a one-sided view of the subject. For a happy ending, the last 12 pages of the text contain a note of optimism, although even here the author is not able to refrain from expressing his cynicism at some of the industry’s more recent altruistic efforts.

P J Keen
Editorial Representative

A Healthy Business. World Health and the Pharmaceutical Industry
A Chetley 206 pp £12.95 ISBN 0-86232-735

The old philosophical principle that there would be no argument if the protagonists were not speaking of the same thing, applies to this book. Both the author, Andrew Chetley and the hugely complex pharmaceutical industry are in the business of trying to relieve the world’s population of its pain and sickness and - more surely in the author’s case - advancing the world’s health.

That said, the differences begin to show. The pharmaceutical industry is a modern, hard-nosed business enterprise, conducted in the understanding that all their work, research and advances should make a profit. Andrew Chetley, hard-nosed in his own way, is an experienced gadfly with a mission to expose huffumbug, and to remind us of what health-care is really all about. There is urgency here: WHO’s call for Health for All has now only 10 years to show results. The Dutch family doctor had a lot of stories to tell and his book was first published in the Netherlands in 1978, obviously, in Dutch. The author should be commended for his Dutch courage in persuading the Royal College of General Practitioners to republish it in English. The College needed the evidence of first hand experience, a continental GP telling us the success stories about the patients and their families who were looked after by a single handed general practitioner on the Continent. This partnership, in fairness, can be described as a Dutch treat and that is what makes this book unique.

Part one consists of case-histories of: a young family; a very young family; an older family; twinned families; and many problem families such as childless couples, where a parent dies, families with a chronic patient or a handicapped child, and family patterning in illness. Part two contains family surveys including studies of: 100 younger families; 100 older families; comparative morbidity data of the 100 families; a three-generation family study. The chapters on family therapy, and on family medicine also make interesting reading.

The tables and family charts are overweight with somewhat heavy statistics, but the editor of the RCGP publications has shown his editorial skills, an almost magical performance. Attractive sketches and figures are included in every chapter making the content readable like a novel. All tables and family charts are put in appendixes, probably to satisfy the appetite of those readers who thrive on statistics and computer data. The author and the editor deserve to go Dutch on profits! Any reader who likes to see the tact of using common sense in family medicine should buy this book because, I fear that, this book might be stolen from a library shelf!

Bashir Qureshi
Editorial Representative

Family Medicine. The Medical Life History of Families
London: Royal College of General Practitioners, 1990

Someone who can tell a story well becomes a good teacher. Indeed, an author of a bestseller is normally a good storyteller. Similarly, if one writes a neat case-history he or she is surely a good doctor. This book is full of detailed family case-histories and the results of family surveys based on personal observations of Professor Huygen over 30 years of private practice in Holland since 1943 (a year before the Allied Forces lost the Battle of Arnhem). The Dutch family doctor had a lot of stories to tell and his book was first published in the Netherlands in 1978, obviously, in Dutch. The author should be commended for his Dutch courage in persuading the Royal College of General Practitioners to republish it in English. The College needed the evidence of first hand experience, a continental GP telling us the success stories about the patients and their families who were looked after by a single handed general practitioner on the Continent. This partnership, in fairness, can be described as a Dutch treat and that is what makes this book unique.

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