system destroys many of the disseminated cells. He maintains that there is always good reason for some form of systemic treatment even after the most apparently complete operation. His attitude to disseminated disease is aggressive even when it is far advanced. He holds that treatment should never be withheld and that the discomforts of chemotherapy are tolerated more readily than those of advancing cancer and the apathy of therapeutic inactivity.

He employs every available weapon often combining immunotherapy with chemotherapy and the two together with radiotherapy. His belief in immunotherapy would not be echoed everywhere. It is possibly because this book was first published in 1976 that his enthusiasm appears untempered by the experiences of the past five years.

The author's style is frankly egotistical and he has not been well served by his translator. The first person singular peppers every page. Few authorities are quoted by name without being described as 'my friend'. The text is liberally adorned with anecdotes of the author's therapeutic triumphs after others had given up hope. There is a sense of paranoia about some of the writing and members of the profession unwilling to accept his views are treated to powerful strictures.

In general it may be said that this book is not an objective review of the current position of cancer written for the laity, so much as an emotional plea for Dr Israel's personal approach to treatment.

SIR RONALD BODLEY SCOTT
Sevenoaks, Kent

Practical Guide for Medical Officers for Environmental Health

by Andrew B Semple and J K Johnston. Nuffield Provincial Hospitals Trust 1980. 75 pp. £2.50.

In 1974 the Medical Officer of Health became extinct. Public health doctors working for the local authority came together with medical administrators working in the Hospital Boards, and with doctors working in central government departments, to form the new medical specialty of community medicine. From being one of the mainstreams of public health, environmental health became a backwater, as prominence was given to

epidemiology and health service management. Many of us who act as medical officers of environmental health, the new title, feel that this movement went too far, and that insufficient attention was being paid to environmental health matters.

In the short term this was relatively unimportant, because those who became medical officers for environmental health had been medical officers of health for many years and they were therefore able to carry on the work and maintain the standards. However, their worry was very much for the future because it was evident that the trainees in community medicine, who were the community physicians of the future, were not being properly prepared for their environmental health responsibilities.

This book provides not only a very useful check-list for trainees but a reference book for the community physician who is appointed as a medical officer for environmental health. It covers his function as a 'proper officer', namely his duties with respect to outbreaks of food poisoning and infectious diseases. The second part covers the contribution which a medical adviser can make to the manner in which the local authority should handle atmospheric and other types of pollution, and finally it covers the miscellaneous functions a medical officer of environmental health has to fulfil.

It is in this last section that his ethical problems are found. There is little ethical difficulty in intervening in infectious disease outbreaks or in problems of environmental pollution, for there one is justified by the knowledge that the actions taken against any individual are designed to protect third parties from harm. However, the medical officer of environmental health may be faced with particularly difficult decisions in the miscellaneous functions which he has inherited from the past. For example, for the powers invested in the local authority by Section 47 of the National Assistance Act of 1948. These allow for the compulsory removal of people who are not mentally ill, but who are deemed to be in need of 'proper care and attention' for their own good. Because this type of removal can have an adverse effect on a person, it is obviously an extremely difficult decision to make for an individual's own good, because a doctor has to override a person's opinion although

admitting that he is capable of making valid decisions. [See page 146 of this issue—Ed.]

Secondly, the medical officer of environmental health is responsible for giving advice on housing applications, and has to compare the needs of hundreds, sometimes thousands, of families on inadequate data. He may find himself in the position of being only able to take a certain number of cases to Housing Committees for approval, and having to decide among two or three families which is the most 'deserving'. Finally, the medical officer of environmental health may have to act as the adviser on occupational health matters to the local authority, and again this often poses very difficult problems which are similar to the problems tackled by occupational health doctors in other fields.

I hope that this book will become not only a textbook but a curriculum to prepare the trainee properly in his functions as a medical officer of environmental health.

J A MUIR GRAD
Oxfordshire Area Health Authority
Oxford

Whole Person Medicine: an International Symposium

Edited by David E Allen, Lewis Bird, Robert Herrmann. Interscience Press 1980. 261 pp. No price.

The editors have brought together the papers read in February 1977 at a symposium held at the Oral Roberts University School of Medicine in Tulsa, Oklahoma. The speakers, all except me from USA and all committed Christians, ranged from a Yale medical student to distinguished academics in philosophy, psychiatry, physiology, surgery, gynaecology and a Harvard professor of ethics.

The twelve papers attempt to define 'holistic' care, set it in historical and biblical perspective, look at the conflicts and ills in our society and particularly within the medical profession, and bravely and humbly look at the observed failings of modern care patterns. The issues are important, basic and, in the opinion of the reviewer, unavoidable.

Herein lies a problem. The reviewer, like the authors, sees the problem and its solution as self-evident, an urgent need to depart from specialised disease orientated

medicine to a compassionate regard and respect for the 'whole-person' and his relationship to God. The reader delves into these papers to find convincing compelling evidence and argument to lay before his unconvinced colleagues who, though dedicated to high standard traditional professional care yet claim no allegiance to Christ; colleagues who regard 'holism' as none of their concern or so 'unscientific' and without foundation or proof as to be unworthy of further attention.

In this respect the book disappoints. It will encourage those who share the editors' concept of health and wholeness, and their views of doctors as God's agents in reconciliation rather than removers of disease. I feel it may not convince sceptics nor answer the doubters in spite of the transparent sincerity and faith of its authors.

Like so many collectives of papers it suffers from repetition and imbalance of contents. Expectedly good as it is, Balfour Mount's contribution on 'Terminal care' contains a disproportionate amount of therapeutic and pharmacological material in a book otherwise devoted to ethical and philosophical detail. He does, however, demonstrate that good terminal care must always be holistic and, as many are coming to appreciate, the hospice movement is an unavoidable challenge to the medical profession at all times to look beyond its record of achievement to the deepest needs of every patient, whatever his affliction or prognosis.

This is a book likely to be of interest to many doctors, health educators and ethicists, and to all who strive to define 'health' as a relationship with God.

DEREK DOYLE
St Columba's Hospice
Edinburgh

Ethics in Human Experimentation

Medical Research Council of Canada.
Report No 6 (1978) Ottawa, KLA
OW9 64pp, \$2.00 (Canada) and \$2.40
(elsewhere).

This report is impressively concise,

clear and well written. It is also refreshingly free from traditional dogmas, presenting (as well as arguing for) a clearly reasoned case at almost every point. What is more, there is a courageous willingness to grasp some well known nettles, or honestly to admit defeat before them. Nettles grasped include the fact that man is and must be a necessary research subject, that scientific value must be a part of ethical discussion, that 'invasive' techniques may invade mind as well as body, and that the categories of 'therapeutic' and 'non-therapeutic' research are dangerously ambiguous. Honest defeat comes with research upon children, but even there the group seem too modest, for they reached impressive agreement over a large part of the field, and lucidly expounded the rest. There are also sensitive discussions about the anticipation of risk, and of risk subgroups. There is a lot of really useful advice about ethics committee procedures and sharing information.

There are, of course, a few controversial statements. There seems to be one contradiction, in that the document begins with the rather stiff (and quite unacceptable) suggestion that ethical responsibility is shared among the researcher, the local institution, and the research council, but goes on to argue in several places what was omitted at first, *ie* that the general public must share this responsibility, even if large parts of it are delegated to institutions. This important topic might better have been rounded off near the start. The uneven load of suffering upon the research subject is stressed, but is not balanced by consideration of who, and how many, suffer if research is *not* done. Again there is contradiction, for researchers are later urged to spread this burden equally, a task well known to be impossible and admitted to be such in the document. The reader was tantalised to learn that Jenner's work was unacceptable by modern standards, and that placebos are not medication, without finding the reasons for these statements. There seems to be some elision of legal and

popularly accepted 'rights'. The reader is exhorted to select the membership of an ethics committee 'as widely as possible'; were he unsympathetic he might wonder whether this includes a recidivist offender to present prison volunteers? The comments on research prior to abortion seem unconvincing, and the literature review is largely confined to the respectable and well trodden. It is useful to have Nuremberg as well as Helsinki in the appendix.

The only point where the reader found serious discord was on information given to volunteers about risk. This seems to centre around a judgment given in a Canadian court; there is failure to grasp the sting. Risk information can be partitioned; there is information about the *suffering* which may be incurred, there is information about the *numerical* (probabilistic) risk of a procedure to the subject. There is detailed information about everything that *could* happen to the subject. But there is also the *actual* risk to the individual which can never be anticipated or explained. There is what should be told, because it is in the subject's interest to know it, and there is what could be told but is better withheld. How should an ethics committee decide this balance? Hence, several pages of advice about giving 'full descriptions' of risks to subjects gain a hollow ring, because this essential problem seems to elude discussion. Sadly, there is a lack of communication between determinist law and biological science which seems to infest most writings on the ethics of research; the fact that probably most citizens do not understand risk also makes the lot of their informants most difficult.

Finally, it was good to see a healthy insistence upon considering each case upon merit, rather than laying down rules to cover all known exigencies. This sort of practical wisdom characterises the document, which represents a real advance in scholarly writing on ethics from the standpoint of a public institution.

D W VERE
London Hospital Medical College
London