

A useful, down-to-earth manual concealed by dull title and dingy cover

'Action evaluation of health programmes and changes' 1st edition, by John Øvretveit. Pp vi+246. Price £27.50. Oxford: Radcliffe Medical Press; 2002. ISBN 1 85775 925 7.

Action evaluation is what research purists might call the quick and dirty approach; evaluations done to a strict brief and tight timescale to provide users (or customers) with evidence to make informed decisions. This new book, written by a professor of health policy and management at the school of public health in Gothenberg, Sweden, provides much useful ammunition to counter these criticisms. Illustrated with real life examples, it brings "user-led" health service evaluation to life and challenges the reader to decide their own viewpoint on what counts as "valid evidence" of effectiveness.

The author argues that evaluation is a type of research but it is also part of the change process. Time and again he emphasises the importance of defining the primary user and their needs. Unlike pure research, there may be hidden agendas and first-timers may be shocked to find they are thrown into "a web of intrigue and manoeuvring".

The book is divided into three main parts. The first describes the steps in planning and carrying out different types of evaluation. Chapter two sets out the key steps in a standard approach for evaluating a health service or programme and chapter three does the same for a policy change or health reform, highlighting difficulties in defining change and separating the instrument from its target. As the author says in chapter four, evaluation takes time and money away from other things which could be doing more good. Used at the planning stage, his useful Risk of Evaluation Failure Index should help prevent costly mistakes. Chapter five is a particularly good read, with its honest and humorous classification of practical problems such as vague users, gate-crashers, fuzzy or wobbly interventions, ghastly goals and the police car effect.

Part two provides the "tool kit" to help read and assess evaluation reports, choose designs and plan work. Part three covers specific subjects such as the pros and cons of dif-

ferent data collection methods, politics and ethics, and quality issues. An appendix provides a glossary of definitions, plus checklists and plans.

The chapter format — setting out what will be covered, covering it, then summarising it — aids learning, but makes the book rather longer than perhaps it needs to be. But this is a minor niggle about what is — as the author claims — a clear step-by-step guide to doing, commissioning or reading evaluation work. Do not be put off by the dingy grey cover and dull title of this new book! They hide a useful, down-to-earth manual.

Imogen Savage

A useful resource for the management of atrial fibrillation

'Atrial fibrillation in practice' 1st edition, by Gregory Y. H. Lip. Pp viii+68. London: The Royal Society of Medicine Press Ltd; 2002. ISBN 1 85315 484 9.

Atrial fibrillation is a common disorder but its management and treatment have always been a complicated issue and something of a mystery to many, including me. The availability of so many anti-arrhythmic agents to manage this condition means that often pharmacists and junior doctors do not have a clear understanding of when to use which agent, nor do they fully understand the complexities of atrial fibrillation (AF). This book sets out comprehensively the difference between the different classes of agents and when it is appropriate to use them. Drug doses, side effects and evidence for their use are laid out clearly in tables.

As with other books in this series, the structure and layout make it easy to read, with key points highlighted and summarised in text boxes. Diagrams help explain important points clearly and overall it is pleasing to the eye.

The book sets the scene by explaining the importance of treating AF and goes on to look at causes, clinical features and investigations. It discusses both non-drug and drug management and where possible supports the use of either therapy with an evidence base. Further reading is given at the end of each chapter.

Any text on the management of AF would not be complete without discussing anticoagulation. There is a good chapter on this subject, detailing those in whom anticoagulation should be considered and the evidence for it. It does, however, refer to the use of unfractionated heparin for immediate anticoagulation. It would have been helpful to read more on the use of low molecular weight heparins (LMWH). LMWH may not be licensed for this purpose but they are increasingly being used and further information on this would be welcome.

Overall this is a clear and concise text, useful for students and practitioners — a valuable resource on the management of AF.

Janet Lock

A timely and well set out text on nutraceuticals — but more detail needed

'Nutraceuticals', by Lisa Rapport and Brian Lockwood. Pp xvii+163. Price £29.95. London: Pharmaceutical Press; 2002. ISBN 0 85369 503 2.

Since Hippocrates advised to "Let food be thy medicine and medicine be thy food", medicines and foods have been defined according to contemporary knowledge. According to the American Nutraceutical Association, nutraceuticals are functional food products whose nutritional value is enhanced by the addition of natural ingredients with potentially disease-preventing and health-promoting properties. The authors choose to widen this definition to include food supplements in general, probiotics, fortified breakfast cereals, vitamins, herbal remedies and even genetically modified foods, although few of these items are included in the book. In particular vitamins, minerals and amino acids are excluded, leaving a list of just eight supplements usually obtained from a food source but sold as isolated purified components in pharmacological doses for specific ailments. This comparatively slim volume seeks to "evaluate the literature that exists for these nutraceuticals and to assess the medical and scientific evidence available". It is an expanded compilation of articles previously published in *The Pharmaceutical Journal*. In addition there is a useful introductory chapter to the subject.

Much of the evidence for the use of nutraceuticals is conflicting and of poor quality. In some cases the trials are unblinded; in others placebo control is absent. Some studies have been carried out using only animal models. In the case of glucosamine evidence is difficult to assess because different salts and different routes of administration are commonly used. Despite pointing out these methodological flaws Rapport and Brown are quite upbeat about the potential efficacy of their chosen products in specified conditions but they do counsel vigilance for long-term use and indicate where interactions with prescribed drugs are possible.

This book comes as a timely addition to the Pharmaceutical Press portfolio because the growing field of nutraceuticals and functional foods is likely to impact on the practice of pharmacy over the next decade. Although clearly written and well set out, the subject is covered rather superficially. The casual reader will find the book useful, however, something more comprehensive would be required by pharmacists wishing to pursue their studies in greater detail.

Steven Kayne

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