

Probably better and certainly cheaper than most of its competitors

'Understanding complementary medicine', by Dr George Lewith. Pp 111. Price £3.50. Poole: Family Doctor Publications Ltd in association with the British Medical Association; 2002. ISBN 1 903474 05 1.

Looking at high street bookshops, there seems to be no need for yet another complementary medicine (CM) book but there is an urgent need for a good CM book for the lay audience — a book that is informative, critical and balanced. Does this book fulfil these criteria?

Is it informative? Informing the public about CM, a truly vast subject, is not an easy task. In only about 100 pages, Dr Lewith deals with acupuncture, healing, herbal medicine, manipulation, massage and related therapies, mind-body therapies, nutritional medicine and therapeutic diets. Given the constraints on space, this book is condemned to merely scratching the surface of numerous important subjects. My particular disappointment relates to the information regarding potential herb-drug interactions. The information provided is not nearly enough considering the vital importance of this subject.

Is the book critical? Refreshingly, some elements of critical thinking have entered this text. In particular, Dr Lewith states that CM has no monopoly on holism; good physicians are often more holistic than the average CM provider. He also stresses repeatedly that CM practitioners must never interfere with treatments prescribed by other health care providers. But he also states that “most CM therapists are now over-cautious and are more likely to over-refer you to your GP...”. This does not reflect my impression. Where is his evidence? Dr Lewith also states that “about a quarter to a half of patients who have had manipulation experience some increased pain or discomfort...”. The figure is actually between 40 and 50 per cent and only refers to chiropractic spinal manipulation.

Is the book balanced? By and large it is. Yet in many places I detect a pro-CM bias. One example: Dr Lewith states that

“a large number of clinical trials” have looked at healing techniques. The truth is that only a few rigorous trials are presently available. Dr Lewith then cites a large study that produced an impressively positive result thus justifying his overall positive tone. A balanced approach would clearly need to include a mention of at least one of the rigorous clinical trials of healing that produced a negative result.

Despite my comments, I conclude that this book is probably better and certainly cheaper than most of its competitors. Writing on complex issues for the lay public can be exceedingly arduous — I wish publishers would give experts sufficient space. What is really needed, in my view, is a British Medical Association series critically assessing individual CM therapies — “Understanding acupuncture”, “Understanding healing”, etc.

Edzard Ernst

Explores areas of medical ethics neglected by other authors

'Pharmaceutical ethics', edited by Sam Salek and Andrew Edgar. Pp xii+198. Price \$90.00. Chichester: John Wiley & Sons Ltd; 2002. ISBN 0471 49057 1.

Most ethical issues in pharmacy are perceived as being confined to practice areas where there is direct interaction with individual patients. This collection of essays redresses the balance by exploring ethical issues around pharmaceuticals and the wider community: third world countries, potential recipients of new drugs, purchasers of health care in bulk as well as individual purchasers of over-the-counter medicines.

The 13 chapters range over the values and philosophy underpinning codes of ethics (surprisingly, 1984 is given as the date of the British version current at publication), the ethical perspectives implicit in drug discovery, choice of clinical trials, health economic evaluations and rationing within a state health care system. Several essays explore the values at work in individual choices of treatment by physician or patient, or which criteria to use to measure a positive outcome — clinical, improved quality of life or cost-effective use of resource. The assent of the informed and involved patient is evident in chapters on consent, on holistic treatment and on specific approaches to the treatment of depression.

A useful overview of the values implicit in codes of advertising practice precedes a final and provocative essay on the ethics of state intervention in health care. The author, a consultant pharmaceutical physician, accepts that the state may determine which medicines are safe enough to be marketed and the price that will be paid when reimbursed by the taxpayer. Such tolerance does not extend to decisions as to who or what diseases should be treated within the

system; in other words there would be no black list and no National Institute for Clinical Excellence. Such decisions, he suggests, represent unwarranted paternalism and should be dictated solely by the patient-doctor contract.

Overall, this book justifies its claim to explore a “neglected area of medical ethics” and can be recommended as a useful extension to the more familiar scope of ethical issues in pharmacy practice.

Joy Wingfield

The most exciting work-related book I have read in years

'Medication errors: lessons for education and healthcare', by Robert Naylor. Pp xii+333. Price £29.95. London: Radcliffe Medical Press Ltd; 2002. ISBN 1 85775 956 7.

The difficulty with research into medication errors is that it is confusing. The use of different methods of identification and different definitions in different settings means that it is hard for someone new to the field to get a true understanding of the problem. Professor Naylor has produced a comprehensive review that should be of great interest to all individuals who are involved in health care policy.

This book can be divided into two main sections. The first attempts to present the key research into medication errors in a way that would allow the novice to understand the main issues. The evidence is expertly structured and includes research that shows the weaknesses of many of the commonly quoted studies. The reader is thus able to formulate his or her own opinion about the true extent and nature of the problem.

The second theme of the book is concerned with action to reduce the error rate. Again, a comprehensive review of the literature enables the reader to understand the main areas that need to be targeted in the practice setting. This is followed by a large amount of material directed at improving education and training.

I found the content to be comprehensive and accessible. It is the most exciting work-related book that I have read in years and I thoroughly recommend it to all those who have an involvement in medication safety. Chief pharmacists and pharmaceutical advisers would be well advised to consider this compulsory reading.

Michael Cross

THIS WEEK'S REVIEWERS

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