Horizons in Medicine 21: The proceedings of the Advanced Medicine Conference 2009

Edited by Jon S Friedland
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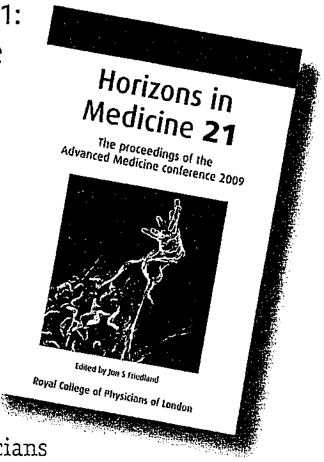

This book does exactly what is says on the tin – it consists of a series of articles (23 in total) based on the Advanced Medicine Conference held in 2009 at The Royal College of Physicians in London. As would be expected, the extensive list of contributors cover a wide range of topics, grouped under headings that include most of the major specialties in general medicine. The intention is to provide an update on each subject, including recent developments, many of which demonstrate how cutting-edge research is being translated into clinical practice. Each specialty section concludes with a number of self-assessment, multiple-choice questions intended to test understanding of that chapter's key messages. The final three chapters are based on the Linacre, Mitchell and Croonian Lectures that address, respectively, genetic diversity and the major histocompatibility complex, the rise in drug-resistant tuberculosis and the possibility of reversing steroid resistance in inflammatory diseases.

Obviously, the book is intended to reach a wider audience than those who would usually attend a conference run by The Royal College of Physicians, but I must admit that it is not a title that I would, in the normal course of events, have been drawn to. However, despite being someone who rarely reads medical texts other than those directly related to my area of practice, I found much to enjoy in this book. Being a Chemical Pathologist, I was drawn initially to selected relevant topics: reviews of thyroid disease and the metabolic syndrome in the Endocrinology section; non-alcoholic fatty liver disease, the article under the Hepatology heading and, in Cardiology, inflammation and immunity in atherosclerosis. In addition, however, I found myself reading about such diverse topics as advances in epilepsy and novel techniques in sepsis, also with interest and enjoyment.

All the articles contain a considerable amount of detail and are well referenced, but still remain eminently readable. The format of the book encourages dipping in and out. Each review is self-contained and succinct – none is more than ten pages in length, so they can easily be digested in a single sitting of less than half an hour. Inevitably, as each article covers a separate subject and has a different author(s), the style of presentation varies, as does the use of images and diagrams. The illustrations that are included are of high quality, but there is no doubt that some articles would have been more comprehensible had better use been made of visual aids.

Keeping up to date is a challenge for all practising clinicians and the idea that this aim should extend to specialties outside our own is particularly daunting. However, a book such as this does provide a very accessible means of doing just that. In this volume, most pathologists, as I did, will find at least one or two subjects that are directly relevant to their practice, but they will probably also be persuaded to delve further. The amount of information retained will undoubtedly depend on the reader's background knowledge of the subject in question but even knowing that you are likely to forget much of the detail does not detract from the pleasure derived from appreciating how the science of medicine is progressing.

The book is a slim volume of just over 200 pages and only slightly larger than A5, so it is easily transported. I found it an ideal companion for that early morning train journey when you feel an obligation to do something work-related but, in order to remain awake, require material that is both stimulating and readable.

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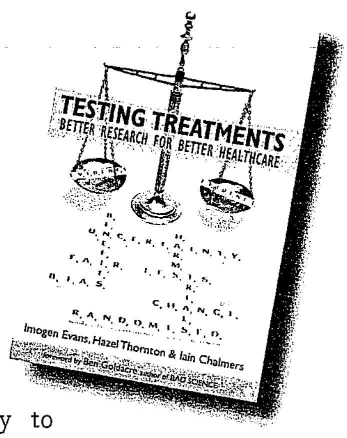
Testing Treatments – Better research for better healthcare

Imogen Evans, Hazel Thornton and Iain Chalmers
Pinter and Martin, 2009, £9.99, 128 pp
ISBN 978 1 90517 735 6



I was so engrossed in this book that I missed my tram stop! I found the book extremely thought provoking and easy to read. The authors provide their biographies and so I will do the same. I have a chemistry degree, an MBA and an MA. I spent 12 happy years in pharmaceutical R&D and am a participant in an ongoing 15-year trial of ovarian cancer screening. I found many of the book's arguments compelling. However, a university friend could not be persuaded to read it, despite the recommendations of the authors! I hope this review will be more persuasive.

This book has eight short chapters. The final chapter proposes a 'blueprint for a revolution', focused on the NHS, although many examples in the book are taken from the international research literature. These provide powerful evidence of the need both for fair tests and systematic review of previous research – the two drivers of a 'revolution' in the conduct of clinical trials.

Each chapter concludes with key points. For example, at the end of Chapter 3, "Systematic reviews of all the relevant evidence should be the basis for assessing treatment effects", and at the end of Chapter 1, "Biased (unfair) studies can lead to avoidable illness and premature death". The authors identify a need for better understanding of uncertainty, chance and randomisation, citing: "Once uncertainty is recognised and acknowledged, more effective solutions for its resolution can be devised". They also recognise that: "many doctors feel uneasy when trying to explain to potential participants in a clinical trial that no-one knows which treatment is best". The authors therefore recommend wider education about the effects of bias and the play of chance, beginning with the primary school curriculum! I agree that the school curriculum would benefit from attention to statistics and probability, because I perceive benefits not only to the patient but also to many situations in life! Another recommendation challenges clinicians and patients to become more familiar with the methods of obtaining reliable evidence, so that they can work together on more efficient assessment of treatment effects.

This book recommends that clinicians become more familiar with clinical trial processes and advocates patient/clinician partnerships. I was lucky that my GP was able to secure my participation in the screening trial. However, there is too much research underway to expect the clinician to be 100% informed. I therefore support the authors' plea for more information to be made available to patients and the public. Patient participation is a key theme of the book, which advocates trials focussed on patient benefit, citing the AIDS trials of Zidovudine as a successful example.

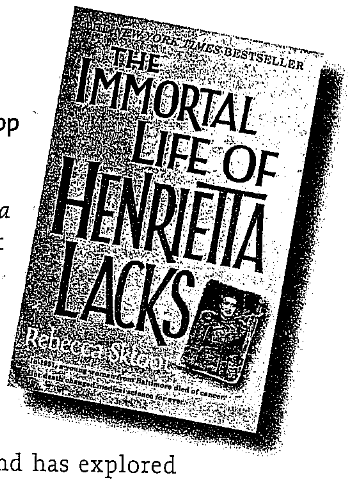
Chapters 5 and 6 address good and bad trials and the need for cost-effective research, independent of vested interests. The Magpie trial of magnesium sulphate for controlling eclamptic convulsions is considered a 'good trial', publicly funded by the World Health Organization and the UK Department for International Development. Better funding and monitoring of clinical trials through bodies independent of industry is recommended. Thus the UK Clinical Research Collaboration, the Medical Research Council, National Institute for Health and Clinical Excellence (NICE) and the NHS R&D programme have key roles. This book would benefit all engaged by these organisations and indeed anyone involved in a clinical trial.

In conclusion, this excellent book makes a strong case for better clinical trials, achieved by leveraging, existing knowledge and patient involvement. Ethics Committees can demand this in trial protocols. Government bodies can ensure 'fit for purpose' regulation and guidance. I hope patients will be encouraged to read it and I will test this out, through a friend of the trial nurse for kidney transplant treatment trials.

Ms Karen Sandler
Lay Advisory Committee lay member

The Immortal Life of Henrietta Lacks

Rebecca Skloot
Pan Macmillan, 2010, £18.99, 369 pp
ISBN 978 0 230 74869 9



The Immortal Life of Henrietta Lacks is Rebecca Skloot's debut book. Skloot is a science writer whose work has appeared in *The New York Times Magazine*; *O, The Oprah Magazine*; *Discover* and many other publications. She specialises in narrative science writing and has explored a wide range of topics, including goldfish surgery, tissue ownership rights, race and medicine, food politics and packs of wild dogs in Manhattan.

It took the author more than a decade to research and write this book, which instantly became a New York Times best-seller. *The Immortal Life* is now being made into an HBO movie, produced by Oprah Winfrey and Alan Ball. Published in February 2010, amazon.com calls it one of the "must-reads of the year," naming it one of the top ten "Best Books of the Year" to date.

Rebecca Skloot is not a medic but a science writer, which is reflected in her approach to this narration. The book deals with topics such as racism, ethics, poverty and cancer in a provocative manner. This is one of the most graceful and moving non-fiction books. It is a soft-covered book, with a black-and-white photograph of Henrietta Lacks and an antique appearance, which fits very well with the 1950s backdrop.

The book narrates the human life of HeLa cells. Skloot takes the reader through the whole process of diagnosis, treatment and death of Henrietta Lacks and explains them in a simple language. She was a poor, black, Southern tobacco farmer whose cancer cells – taken without her knowledge – became one of the most important tools in medicine. In 1951, when she was 31, Henrietta died the victim of a frighteningly fast-moving cervical cancer. Nobody got Henrietta's permission to use those cells for research, the work which enabled subsequent discoveries from the polio vaccine to in-vitro fertilisation. No one told her family about the samples. In fact, the Lacks only learned about Henrietta's immortal life in 1973, from a chance conversation with a friend who worked at the National Cancer Institute.

The book commences with the voice of Henrietta's daughter, Deborah, reflecting both pride and anguish. The story is divided into 38 chapters, followed by an account of where the characters in the story are now and how the author comes about gathering all the factual information that forms the meat of the book. Interestingly, there is an index at the very end of this book. It stands out in that it includes remarks from Henrietta's relatives and friends, without changing the dialect. This gives you a feel of what exactly the author heard.

With this extraordinary story, Skloot reminds doctors, patients and the lay person that however advanced the technology of science, what they work with is humanity, every piece of which is precious. In this book, Skloot challenges much of what we believe of ethics, tissue ownership and humanity. I would recommend this book to be read by every doctor or anybody in research involving human tissue. I wonder what our Ethics Committee would say after reading this book!

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Direct Red: A Surgeon's Story

Gabriel Weston
Vintage, 2010, £7.99, 181 pp
ISBN 978 0 09952 069 6

This is a semi-fictional account written by a part-time ENT surgeon about her experiences as a surgical trainee and