

Book Review

PUBLICATIONS CORNER

Global Tuberculosis Control – Surveillance, Planning, Financing – WHO Report 2004

[ISBN 92 4 156264 1; Sw.fr.40-/US\$36.00;
In developing countries: Sw.fr.20.-; US\$ 18.-]

This is the 8th WHO annual report on global tuberculosis control. It includes data on case notifications and treatment outcomes from 201 national TB control programmes (NTPs) that reported to WHO for 2002, together with an analysis of plans, budgets, expenditures, and constraints on DOTS expansion for 22 high-burden countries (HBCs). Nine consecutive years of data are used to assess progress towards the 2005 global targets for case detection (70%) and treatment success (85%). The global, smear-positive case detection rate was 37% in 2002, over half way to the 70% target, and rising more quickly than at any time since 1995. Based on recent trends, the authors expect the case-detection rate to be about 50% by 2005, by which time all TB patients reported in the public sector will receive the internationally recommended standard of care under DOTS. Smear-positive case detection by DOTS programmes could be increased from 37% to 50% simply by ensuring that the diagnosis and treatment of known TB cases in the Americas, Europe and South-East Asia conforms with DOTS standards. To get above 50% case detection will be challenging because the notification rate of all TB cases by public health authorities has been stable for many years, and because DOTS programmes will probably have exhausted this supply of cases by 2005. Beyond 2005, and preferably sooner, DOTS programmes and public health authorities must begin to recruit patients from non-

participating clinics and hospitals, notably in the private sector in Asia, and from beyond the present limits of public health systems in Africa. A special effort must be made to improve cure rates in Africa.

Basic Laboratory Procedures in Clinical Bacteriology – Second Edition

[ISBN 92 4 154545 3; Sw.fr.40-/US\$36.-;
In developing countries: Sw.fr.28.-]

This manual is a practical guide, for use by laboratory workers in health centres and district hospitals, to the procedures to be followed in obtaining specimens, isolating and identifying bacteria, and assessing their resistance to antibiotics. It covers bacteriological investigation of blood, cerebrospinal fluid, urine, stool, sputum, pharyngeal and genital specimens, and purulent exudates. Particular attention is given to the need for quality control of all laboratory procedures. A list of media and reagents needed for the isolation and identification of the most common bacterial pathogens is included, together with an indication of their relative importance for the intermediary laboratory. This list is intended for adaptation to local circumstances. This second edition has been updated in many areas, including a greatly enhanced section on stool specimens and a new section on serological tests.

Guidelines for Conducting Community Surveys on Injuries and Violence

[ISBN 92 4 156249 8; Sw.fr.50-/US\$45.-; In developing countries: Sw.fr. 35.-]

This volume describes the changing realities determining the need and resources for long-term care in ten developing countries.

Considered together, these case-studies provide examples to illustrate many of the lessons learned, key policy issues confronted, and current and future needs discussed in other volumes in this series. Represented in this first of two volumes are case-studies of China, Costa Rica, Indonesia, Lebanon, Lithuania, Mexico, Republic of Korea, Sri Lanka, Thailand, and Ukraine. Each has been prepared by health systems/LTC experts from that country, in collaboration with the World Health Organization and its Collaborating Centre for Health and Long-Term Care Policy and Research, the JDC-Brookdale Institute. This book is part of the World Health Organization's Initiative on Long-Term Care led by the JDC-Brookdale WHO Collaborating Centre for Health and Long-term Care Policy and Research.

WHO Model Formulary 2004 – Based on the 13th Model List of Essential Medicines 2003

[ISBN 92 4 154631 X; Sw.fr.40-/US\$36.00; In developing countries: Sw.fr.20.-]

Since its first publication in 2002, the WHO Model Formulary has become an indispensable source of independent information on essential medicines for pharmaceutical policy-makers and prescribers worldwide. The Model Formulary is the authoritative guide on how to make effective use of medicines on the WHO Model List of Essential Medicines, so improving patient safety, and limiting unnecessary medical spending. For each medicine, the Model Formulary provides information on use, dosage, adverse effects, contraindications and warnings, supplemented by guidance on selecting the right medicine for a range of conditions. This new edition details changes made to the WHO Model List of Essential Medicines 2003, with updated therapeutic information on existing medicines reflecting new clinical knowledge.

Neuroscience of Psychoactive Substance Use and Dependence

[ISBN 92 4 154648 4; CHF 40.-/US\$36.00.-; In developing countries: CHF 20.00]

Despite the large magnitude of the injury problem, limited attention has been paid to it, particularly in low- and middle-income countries. This manual contributes to overcoming the shortfall in reliable and valid injury information, by providing a methodology for collecting injury data in the community that is robust, reproducible and relatively easy. Its use would help in making the burden of injuries more visible as a public health problem. It therefore contributes to the first two steps of the public health approach, in defining the size of the problem in the community and identifying risk factors. The main focus of the document is on the conduct of community surveys at a local as opposed to national level. It provides a standardized tool for the systematic collection of data on victims of injuries in the community. This consists of a questionnaire and a reliable method of sampling. There is detailed guidance on how to obtain representative samples of the study population using two-stage cluster sampling with probability proportional to size, on how to use sample size calculations for ensuring adequate precision and how to use these tools in the field. The use of these tools will help ensure that data collected are valid and reliable and comparable with other surveys using a similar methodology. Additional optional modules are also provided, for the study of particular injury problems in greater detail. There are detailed explanatory notes for the data collection forms.

Instructions are also provided on how to prepare for data collection, ranging from making logistic arrangements, translation and pre-testing of questionnaires, selection and training of field workers, and making arrangements for the safe storage and return

of questionnaires. Advice is also provided on the actual conduct of the field work and the tasks allocated to field staff as well as how to handle unexpected situations in the field. The important issue of obtaining ethics approval is discussed, as are obtaining informed consent and ensuring confidentiality, staff and responder safety. Data entry and analysis are discussed and the calculations of disease measures are presented in the text and appendices. Some limitations of surveys, such as biases due to self-reporting and recall have also been highlighted.

Finally, the interpretation of the results is discussed, in terms of magnitude and public health priority. Clearly, studies are of little value unless results are disseminated to stakeholders, both policy-makers and the community, so that they can be used for public health action, both in advocacy and prevention. This document is not intended to be prescriptive; instead it recommends what is considered to be good practice. It is hoped that researchers throughout the world will be able to use it to help further define the injury burden.

**Tobacco Control Legislation – Second Edition:
An Introductory Guide**

[ISBN 92 4 156268 4; Sw.fr 90.-/US\$81.00.-;
In developing countries: Sw.fr. 63.-]

This introductory guide on legislation for tobacco control represents an important step in strengthening global and national tobacco control programmes. Tobacco now kills 4.9 million people a year and the figure continues to rise. The recent conclusion of the negotiations of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) presents a strong global complement to national and local legislative action for tobacco control. Many developed and developing countries have also continually called for WHO to produce tools for the development of

legislation in Member States. This guide aims to meet such an important requirement and is the first in a series of WHO manuals to support the implementation of the historic WHO Framework Convention on Tobacco Control. Recognizing that legislation is indispensable to long-term success, this publication offers health officials and others the tools to develop the legislative measures required by the WHO Framework Convention on Tobacco Control. Beginning with an explanation of the legal terms and concepts, the publication guides the reader through each stage of the legislative process, from the first steps of building a foundation of political support, to the enforcement and evaluation of legislation after it comes into force. It describes the strategic choices each country must make in approaching legislation and offers practical suggestions for developing legislative text, working with lawmakers to win the proposal's adoption, and overcoming objections and obstacles. It also provides selected case studies of various national laws as well as an introductory discussion of international legal instruments pertaining to tobacco control. This guide will be of interest to those working in tobacco control or in health promotion, such as governmental agencies, public health practitioners, lawyers, non-governmental organizations and academia.

AIDS in Asia: the challenge ahead*

Editor: Jai P. Narain

Publisher: Sage Publications India Pvt. Ltd.

[ISBN 0-7619-3225-9; US\$9.-]

The 23 chapters of this book seek to throw light on the HIV/AIDS situation in Asia – a continent where the HIV/AIDS scene is markedly varied, with very different levels of prevalence, different needs, and different challenges. The editor has succeeded in bringing these differences out and in

producing a comprehensive volume that focuses on the epidemiological and programmatic issues of the epidemic in Asia. However, because of the large number of and variety of topics, the book sometimes loses continuity and in many places is repetitive and laden with too much statistical information.

Practitioners and policy-makers will find the book useful as it provides sufficient details about the scale and magnitude of the HIV/AIDS problem in the region. A wide range of topics related to prevention, care and treatment are covered as are country-specific HIV reports, including lessons learned from the Asian and African responses to the epidemic.

Individual chapters highlight the issues, ranging from the importance of safer behaviour in sexual and injection practices to the different challenges and role of intravenous drug use in the HIV epidemic. However, the interventions on promoting safe sex by sex workers, with insufficient coverage of potential interventions to increase their clients' "demand" for safe sex. Coverage of the differences and similarities between the African and Asian epidemics, the role of other sexually transmitted infections (STIs) in the spread of HIV/AIDS, and on scale-up of antiretrovirals (ARVs) (WHO's "3 by 5" strategy) is useful and informative.

The detailed country-specific accounts of the epidemiology of HIV/AIDS and of the response by government and nongovernmental organizations are very informative as is the in-depth analysis of the success of the HIV-prevention programme in Thailand. The importance of political buy-in and of decentralization and integration of STI services in primary and reproductive health services into this country are valuable lessons also for other Asian countries.

Another important lesson is the acknowledgement that the 100% condom use strategy that resulted in significant reduction in HIV prevalence in Thailand is more suitable for structured/institutionalized brothel-based sex work than for casual sex or for a less structured setting.

HIV/AIDS care, an important area for both programme and research, receives sufficient coverage; details are provided of various opportunistic infections, especially the importance of TB prevention and treatment among HIV-infected persons. Similarly the role of ARVs is well covered with elaborate details provided on clinical issues – selection of drugs, monitoring of patients, and drug resistance. However, the book could have benefited from some discussion of the economics of HIV care, especially the cost of ARV therapy and of the associated monitoring tests as well as the opportunity costs of such expenditures to public health budgets across the region. Even at cost of US\$ 500-1000 per person per year for ARVs, AIDS care could impose a significant burden on public health budgets for most countries in South-East Asia, particularly for India and Indonesia. To meet these costs, countries will have to consider different financing mechanisms including national health insurance schemes, co-financing mechanisms, community insurance etc.

Overall, the authors make an important contribution to describing the HIV/AIDS epidemic in Asia, covering most aspects of the disease. The book is reasonably well organized and referenced and laid out in an easy-to-read style. Most importantly, unlike the general trend in the literature on HIV/AIDS issues, this book is not alarmist.

*Reprinted from Bulletin of the World Health Organization, October 2005, 83 (10)