through, but makes a useful reference volume for all those concerned in the diagnosis and treatment of low back pain, although the reader unfortunately will not find out why manipulation works.

The book is well printed on good paper with numerous tables and diagrams; too many in some chapters, in my opinion. It should, however, certainly be on the library shelves of all academic centres.

A. ZINOVIEFF

Rheumatism in Populations. By J. S. Lawrence. (Pp. 572; illustrated; £22.) William Heinemann Medical Books Limited: London. 1977.

This book will keep occupational health physicians up to date in a subject in which, because of its diffuseness in the scientific journals, it is difficult to keep abreast, especially for those of us in industry. The 16 chapter headings cover mainly the most important rheumatic diseases, but include diseases of bone, immune deficiency diseases, disc disorders and occupational aspects of rheumatic diseases, the latter two being of particular interest to physicians in industry. Disc disorders are discussed in detail over 30 pages; their early history is given, disc degeneration is defined and the standard radiographs of cervical and lumbar grades are well reproduced. The prevalence and geography of disc disorders in Britain is discussed, the significant relationship between symptoms and radiographic change is outlined, and the differentiation between disc degeneration and disc prolapse is maintained. Under Occupation and Disc Disorder none of the papers from the occupational medical literature such as those by Jackson, Blow or Wilson, are quoted, but only those from rheumatology. The author falls into the trap frequent in back pain literature of working out the pathology to fit the painful symptoms without giving any objective supporting evidence, e.g. "As a result the interspinous ligament readily tears or becomes partially stripped from its attachment to bone when subject even to minor stress. This gives rise to an inflammatory reaction which may last for a week or more" (p. 84).

The chapter on the occupational aspects of the rheumatic diseases (28 pages) is well balanced and includes discussion of sickness absence due to rheumatic complaints, a comparison of

trades (mainly in terms of back complaints), pre-employment exclusion of men with radiographic evidence of disc degeneration and an account of various industrial surveys carried out by Lawrence, Duthie, Anderson and others. In summary, it is essential reading for anyone about to embark on rheumatic research, whether clinical or epidemiological, and an excellent account of all the field surveys carried out by the Arthritis and Rheumatism Council's Units, though the world literature is also well covered. However, it is an expensive book and perhaps too detailed to recommend for the bookshelf of every occupational health physician.

J. R. GLOVER

The Epidemiology of Road Traffic Accidents: Report of a Conference, Vienna, 4-7 November, 1975. WHO Regional Publications, European Series No. 2. (Pp. 38; 6 Sw. fr.) WHO: Copenhagen. 1976.

Road traffic accidents are a major public health problem, though few Ministers of Health admit it. Road traffic accidents are the cause of one-half or more of all deaths among young males in the 15-24 age group in the European Region of WHO.

This and the increasing severity of injuries sustained and the growing numbers of young people grossly disabled should be the serious concern of all public health authorities. However, the Department of Health and Social Security in the United Kingdom has only recently even mentioned the problem (in *Prevention and Health: Everybody's Business*), leaving the responsibility for prevention entirely to the Department of Transport.

The fundamental problem is the lack of useful epidemiological data which link the details of road traffic accidents collected by the Police with those of the injuries received in these accidents and which are recorded by hospital authorities. This is a classic problem of lack of record linkage. The report examines in detail the difficulties of obtaining adequate record linkage and of defining criteria of accident severity which will be acceptable in different countries. The report by experts from various countries in the European Region examines, within the limitations of the data at present available, the roles of age, visual acuity, medical

conditions, psychological and sociological factors and the use of alcohol and other drugs in the causation of road traffic accidents.

The report also reviews the value of health education in reducing the risk of involvement in road traffic accidents and deals with the use of legislation to modify adverse aspects of the interaction between road users' behaviour and environmental conditions.

This report is of value to occupational physicians in two ways: as an analysis of a problem in epidemiology and as a reminder of the many factors which may affect the chance of a member of one's staff having a road traffic accident.

P. A. B. RAFFLE

Environmental Health Criteria 2: Polychlorinated Biphenyls and Terphenyls. (Pp. 85; 10 Sw. fr.) WHO: Geneva. 1976.

Polychlorinated biphenyls (PCBs) have entered the sphere of public debate in the last five to ten years, largely as a result of two unrelated circumstances. One was a severe outbreak of poisoning in Japan, resulting from eating food cooked in rice oil contaminated with PCBs containing a relatively high proportion of a particularly toxic impurity tetrachlorodibenzofuran. The other is increasing awareness of the extent to which PCBs are accumulating in the environment, largely through analysis of tissue samples taken from many different kinds of wildlife as well as from man, but also from analysis of river waters, the atmosphere, and soil.

PCBs are used in technological applications of considerable value to society. Chemical inertness, resistance to heat, non-flammability, low vapour pressure, and high dielectric constant have made them particularly suitable for use in transformers in the electricity distribution industry, and in capacitors for domestic electrical equipment.

As far as occupational health is concerned, these products have caused little or no occupational disease, except for some chloracne in the early years of manufacture. Although there is some experimental evidence of carcinogenicity, there is no epidemiological evidence that PCBs have caused cancer in man. Acute poisoning from accidental food contamination can readily occur with any chemical product, so the major public issue is that of environmental persistence and