



Textbook of Preventive and Social Medicine. Piyush Gupta and O. P. Ghai (eds). CBS Publishers, 4596 11-A, II Darya Ganj, New Delhi 110 002, India. 2007. 2nd edn. 853 pp. Price: Rs 495.

'What is in a name?' the Great Bard may well ask, but the discipline of public health has been known under many names in its short history of less than 200 years. During the pre-war (World War II) period, in most medical colleges the subject was taught as hygiene. With independence came a sudden spurt in the number of medical colleges and medical seats in most states of India, and hygiene metamorphosed into preventive and social medicine in the new spirit of the Bhore committee, which envisaged the basic doctor to be a team leader for prevention of disease in society. The sixties saw a re-christening of the subject as community medicine, and often, community health in many colleges. This perhaps reflected the new awareness that health is not merely a technical issue, and the community oriented doctor had to integrate different skills to work at the community level. Meanwhile, around ten years back, a tentative beginning was made to go back to the original name of public health when a few Masters' programmes in public health were started; these were at pains to emphasize their distinction from the regular MD and DPH programmes, most notably by the acceptance of non-doctors in the course. Thus public health seemed to emerge from a sub-specialty of medicine into a more well defined profession on its own. The recent addition to the scene of the Public Health Foundation of India, with its mandate of expanding training facilities for public health, gives additional impetus to this development.

The changing names, however, were not merely changing labels; they reflected a deeper change in approach and method. Hygiene emphasized public sanitation and the prevention of communicable disease by protected water supply and vector control. Preventive and Social Medicine coincided with a time of integration of different national prevention programmes at the Primary Health Centre level. Community medicine saw the emergence of the doctor as the health team manager. With the re-emergence of public health, however, what seems to be emphasized is the importance of social sciences such as economics, sociology, management, policy analysis and operations research as key pillars of a career in this discipline, besides the traditional ones of epidemiology and biostatistics.

It is questionable whether the teaching of this subject in India has kept pace with the change in nomenclature. With the great emphasis on clinical medicine in medical teaching, public health (or community medicine, or social and preventive medicine) has always taken a back seat, though at the political level the usual sympathetic lip movements about importance of the subject are made. Thus good textbooks are scarce, and it is in this context that the book under review deserves special attention.

The authors have declared at the outset that this is a textbook of preventive medicine – the art of preventing diseases. In its previous edition, it appeared as Essential Preventive Medicine. Preventive medicine should ideally form an integral part of the practice of clinical medicine. This is exactly what the authors would want to happen, and this is a book that would help doctors to achieve this goal. As such, it is a book for practising clinicians as well as for clinical students – though it might come in useful for a wider audience. To this end, they have included a number of chapters covering subjects more traditionally found in textbooks of community medicine or public health, such as primary health care, epidemiology, biostatistics, and health economics. Hence this is not primarily meant for a specialist public health audience, though the title may give that impression. As the authors have made this clear, however, this cannot be considered a lapse.

In spite of this, there are many chapters in the book that will be extremely useful for students of public health as well. The chapter on demography, statistics and population control, for instance, has an extensive treatment of contraception from a clinical point of view. However, if you are looking for a policy perspective with a sound social science foundation, you will not find it. There are chapters on health systems, behavioural sciences and health, and health economics. None of these form a comprehensive treatment of the subject matter; rather, they appear as chapters serving to remind the practising doctor that these subjects are important. It must be stated that the treatment of many of these subjects is extremely readable and easy to understand; thus it might stimulate further reading on the subject. This is possibly the result of the effort by the editors to assemble an array of really impressive luminaries as authors of chapters in their respective areas of expertise.

The chapter on biostatistics emphasizes probability and variability and has much to recommend in it. Here again, actual methods are not treated extensively, especially the multivariate methods. The chapter on Millennium Development Goals and Primary Health Care also makes interesting reading, though the political debate over PHC have been completely ignored. Likewise, the treatment of environmental health is very disease oriented.

One good thing about the book is the classification of chapters into various groups, such as new diseases new threats, old diseases new threats, and old diseases old threats, which makes for conceptual clarity and elevates the student into thinking within a more effective framework.

The book has been well brought out with good printing and very few mistakes. It also includes a wealth of data on various aspects of interest to the health worker and professional. On the whole, it is a useful complement to the core knowledge of both the practising clinician and the practising public health manager.

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