
Screening in Disease Prevention: What Works?, a publication from the European Observatory on Health Systems and Policies, delivers a comprehensive public health approach to the process and methodology of age-appropriate disease screening and prevention. The back cover of the book summarizes that it “highlights three current challenges: the increasing consumer, media, and commercial focus on health in general and screening in particular; providing accurate and understandable information; and tackling the continuing variation in the uptake of screening between different areas of the country [United Kingdom] and different socioeconomic groups.”

The chapters are well organized in a logical and cogent fashion, taking the reader on a journey through the historical perspective of disease screening and setting the stage for the life cycle-specific chapters that follow. Highlighting definitions, criteria, and evaluations of screening, political issues, public perceptions, and benefits versus potential disadvantages of screening, the authors cover antenatal, neonatal, infancy; childhood, adolescence, and early adulthood; adulthood; and the elderly. This construct is heavily centered on the guise of the National Screening Committee (NSC), an organization within the United Kingdom devised to create recommendations based on solid evidence, to establish quality assurance, and to monitor its screening programs. Subsequent chapters include an ethical discussion on genetic screening and testing for disease with consideration of economic principles and an overview of screening practices throughout Europe. Overall, this schematic provides an extremely detailed approach to screening for most important diseases throughout the life cycle, with relevant summary data for numerous studies that are well referenced, and a strong epidemiologic influence.

An excellent stylistic point of the book is the commencement of each chapter with a stellar reference quotation that foreshadows the goals and main points to be discussed. The chapters that focus exclusively on disease screening for each aspect of the life cycle form the nucleus of the text. Many detailed criteria for screening in disease prevention are presented in tablature format, which is very reader friendly. Only one table in these core chapters, however, lists screening criteria for diseases according to US guidelines (the American Cancer Society recommendations for colorectal cancer screening), while most others are derived from the NSC, the National Institute for Clinical Excellence (NICE), the National Child Health Screening Programme, and through recommendations compiled by the authors under the heading “Our recommendations…” The text encompassing these chapters describes in sufficient detail the studies behind the majority of the proposed recommendations within the tables but does not consistently specify the study type.

Few comparisons of NSC and other national (United Kingdom) guidelines are made to those of the US Preventive Services Task Force (USPSTF) and Canadian Preventive Services Task Force for various diseases. Presenting such comparisons in a tablature format would have been more helpful to the reader, especially in cases where the guideline recommendations differed significantly, such as for cervical cancer screening.

In the chapter “Screening in Adults,” the statement is made that “Instead of serving their patients’ needs, GPs [general practitioners] now serve the demands of government policy—and the dictates of government-imposed health promotion performance targets.”
This is a provocative statement to make and one that warrants further discussion, especially in a book targeted to an international audience within an evidence-based recommendation forum, yet none is offered. This statement should leave an impressionable mark on its readers, depending on their location and scope of practice, with great potential for different interpretations in the United States, the United Kingdom, and worldwide, since policy regulation within these health care systems differ significantly. Simply stated, the NSC recommendations may have different practice and/or financial implications for a clinician or public health researcher in the United Kingdom compared to the USPSTF and other nationally recognized recommendations for standards of care and “pay for performance” criteria in the United States. In the United States, this statement reflects a more locally or regionally imposed trend through health system and third-party payor influence. Overall, the suggested tenet holds importance for educators of family medicine from a practice management standpoint and should be further explored in the realm of evidence-based practice.

The authors of this textbook are respected leaders in England and internationally in the realm of public health research. Impressively, Dr Holland has demonstrated a vast experience in research of the epidemiology of chronic diseases (eg, hypertension, chronic respiratory diseases), is the editor of the *Oxford Textbook of Public Health*, and is the past president of the International Epidemiological Association. The style of this book provides its readers with a heavily research-based document with which to better understand how public health research approaches such an important topic as disease screening and prevention. My concern is that a book of this format and substance may be heavily overshadowed in the United States, given that the majority of the screening recommendations stem from guidelines and research performed within the United Kingdom and Europe. More significantly, it lacks the traditional format that clinicians would expect in the United States, since there is no clear definition of a standardization of evidence ratings for the numerous recommendations provided. Thus, the plethora of information presented in the outlined tables may not translate well into useful information for the average, nonacademic primary care clinician who engages in a traditional ambulatory practice. While this book provides an impressively constructed summary of recommendations based on guidelines from the United Kingdom, it is probably more applicable to researchers whose interests lie in international public health than it is for health professionals in the United States.

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Pregnancy and childbirth are common transitions in the family life cycle and a time of often great anticipation and joy. These events are not without potential complications, however, since the time surrounding pregnancy and childbirth contains increased risk for developing or exacerbating psychiatric disorders. Psychiatric disorders in pregnancy can affect the mother, father, infant, siblings, others in the family system, and ultimately the community in which they live.

*Psychiatric Disorders in Pregnancy and the Postpartum* is a comprehensive review of the treatment of psychiatric disorders in pregnancy and postpartum. The contributing authors include psychiatrists, obstetricians, clinical social workers, psychologists, pharmacologists, and others with clinical and research experience in this field. The book has nine chapters and covers the prevalence, clinical course, and management of several distinct clinical conditions, including mood disorders (pre-existing), postpartum depression, anxiety disorders, bipolar disorder, schizophrenia, substance abuse, and eating disorders. In addition, the final chapter provides data regarding the children of parents with mental illness.

Each chapter provides ample data on biological issues such as medications, hormonal changes, and the cytochrome P450 system, followed by ample discussion regarding psychological and social interventions as well. The text is further enhanced by a comprehensive reference list at the end of each chapter. The first two chapters provide an overview of the general considerations of the prevalence, clinical course, and management of depression during pregnancy. Medical students might find these two chapters helpful during their first clinical rotation on obstetrics. The chapter on postpartum depression has a comprehensive table of studies on selective serotonin reuptake inhibitors in breast-feeding that family physicians, residents, and medical students would find useful. These comparative studies are comprehensive and current. This chapter also has an excellent list of questions for screening postpartum women in the primary care setting for depression, anxiety, obsessions, psychosis, and infanticidal and suicidal thoughts.

The chapter on pregnancy and substance abuse was especially strong. It was the only chapter that addressed the risk of violence during pregnancy. This is important as violence is a major cause of death in pregnant women and a com-
mon reason for placing children in foster care. This chapter has excellent screening questions for substance abuse during pregnancy and addresses maternal alcohol use; alcohol and breast feeding; and maternal marijuana, cocaine, methamphetamine, and opiate use and abuse. This information is especially important because illicit substance use/abuse is often prevalent in teaching populations and is associated with intimate partner violence and child abuse.

The chapter on “Children of Parents with Mental Illness” covers the role of mothers and fathers, legal issues, children’s protective services, and addresses problems in attachment/bonding associated with mental illness and substance abuse. In addition, realistic information is provided regarding the potential increased rate of illness in offspring and challenges related to the parent-child interaction.

*Psychiatric Disorders in Pregnancy and the Postpartum* should be in the library of family physicians, obstetricians, pediatricians, psychiatrists, labor and delivery nurses, and mental health clinicians. Many physicians feel less comfortable with the appropriate treatment of mental illness in the time frame surrounding a pregnancy, which this book will help to address. This text not only provides excellent information on the prescription of psychiatric medications but also focuses on the important issues of substance abuse, violence, legal issues, and role of fathers, foster care, infanticide, and children’s protective services. The only weakness is that the authors did not provide any case examples. Cases are always helpful for clinical teachers in residency training programs. Overall, this is a well-balanced, evidence-based book that provides an excellent base for weighing treatment options in the pregnant and postpartum patient.

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