BOOK REVIEWS, NOTES AND COMMENTS

Edited by
Federica Napolitani Cheyne



EVENTI SENTINELLA Quello che ogni organizzazione sanitaria dovrebbe sapere

Joint Commission Resources. Edizione italiana a cura di Massimiliano Panella. Torino: CG Edizioni Medico Scientifiche; 2007. 219 p. ISBN 978-88-7110-203-0. € 39,00.

7 hat every health care organisation should know about sentinel events by the Joint Commission (JC) comes out in the Italian version ten years after the publication of Sentinel Event Alert, consecrated to the analysis of sentinel events occurred in Joint Commission-accredited health care organizations. In this last issue, dated 2005 and translated in Italian in 2007, the Joint Commission enlarges the target from hospitals to other settings such as ambulatory care, behavioural health care, long term care, and home care. In our country, an institution equivalent to the JC does not exist nor a consequential and standardized series of actions leading to the collection, analysis and control of the sentinel events. Nonetheless, this manual comes to bridge a gap of essential information for health professionals, not only doctors but also nurses and specialised health care providers, engaged to coordinate adequate responses to the sentinel events. Furthermore, the notes of Italian experts at the end of any chapter contribute to render the manual more adapt and the process more applicable to our settings.

Following a systematic approach, the book develops all the steps starting from the sentinel events, defined as an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof, analysing their traditional and cultural causes, identifying general prevention strategies and carrying out through a logical framework the root analysis of underlying factors that contribute to errors and eventually the plan of action. The last two chapters are dedicated to ethical issues, particularly to the emotional aspects involving health professionals and the pros and cons for creating the conditions for their adhesion to report any adverse event,

and to legal issues, included the aspects concerning the privacy for treating personal data of patients.

The JC approach to sentinel events looks like a surveillance system, defined as the ongoing systematic collection and analysis of data about an event that can lead to actions being taken to control or prevent this event. Unfortunately in our country, there is not a central institution in charge, as the JC in the USA, of defining the rules of the system, centralising the report of each event, supervising the whole system and helping the hospitals or other health care settings to improve quality identifying high-risk activities to prevent other sentinel event to occur again.

Given this situation, each health care organization has to provide by itself a root cause analysis, pinpointing the causes for any adverse effect, implement improvements to reduce risk, and monitor the effectiveness of those improvements. In this sense, the JC book appears to be crucial for our settings, because it is structured as a practical guidance on disclosure of medical errors also including practical tips and even a section to explain and deal with patients and families after an error has occurred.

According to the JC, most of the sentinel events may be distributed among 10 main areas that seem to be particularly appropriate also for our settings. The opportunity of that choice is confirmed also by the seriousness of sentinel events notified to the JC, of whose 74% ended up in the death of the patient and 10% in a lifelong loss of several functions.

This manual draws the reader's attention on a simple but very important principle for any single health professional or institutions involved in improving the quality of the health care in our country: a general but valid indicator of quality of care is the investment devoted to the continuous analysis of the ongoing processes to prevent adverse events. The book then represents an excellent opportunity to promote the process-centred culture within our different settings of care. Particularly important is chapter 5, focused on the root cause analysis (RCA) and formulating plans of action for improving safety. As clearly stated, the RCA is similarly applicable also to complain and claims, which allows also smaller institutions to engage in a improving quality process.

Learning from experience is essential and if correctly carried out, the RCA configures a problem solving approach, aimed to find the actual cause of the problem and tackling it rather than simply carrying on dealing with the epiphenomenon. The book

offers a step-by-step approach that simply drives even the non-expert reader to analyse, thoroughly by schemes and questions, the patient safety incident ending up to a shared solution so that the likelihood of problem recurrence will be minimized.

That useful approach however has to satisfy some conditions to be effective. In fact, managing "drilling down to underlying organization systems and processes" is associated to the timeline of implementation of the whole RCA process and to the amount of resources, especially human resources, affected. The team in charge of that should be appointed, if not already working, within a few days from the adverse event and should be given a sensible timetable to conclude the process. Otherwise, the reliability of the analysis will be jeopardised by the information bias, as happens in any case of epidemiological investigation.

Where systematically conducted, that is on any single incident occurred in a particular setting, this approach ends up in a tool of continuous improvement and creates the conditions for the care-supplier institution to become a learning organisation.

To avoid failure in our goal to protect the patient from harm, we need to develop a systematic approach and a new culture to extend to the health professional acting into our hospitals and other settings of care. The easy reading of the Italian version of the JC book will strongly contribute to that goal.

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EVIDENCE-BASED MEDICINE Come praticare e insegnare la medicina basata sulle prove di efficacia

Sharon E. Straus, W. Scott Richardson, Paul Glasziou, R. Brian Haynes. 3. edizione con CD-Rom. Roma: Il Pensiero Scientifico Editore; 2007. 362 p. ISBN 978-88-490-0191-4. € 42,00.

Evidence-based medicine. How to practice and teach EBM by Straus, Richardson, Glasziou and Haynes, at its third edition in 2005, is now available in the Italian translation, published by Il Pensiero Scientifico Editore.

This book offers an interesting perspective on the main critical points of evidence-based medicine (EBM). After an introduction on the principal features of EBM (meaning, historical traits, develop-

ment, arguments pros and cons), the authors pass to examine how to formulate meaningful questions from a clinical point of view. This activity is crucial, straight affecting the formulation of appropriate researches for the best evidence. Subsequently, the authors face how to evaluate and rank results of such researches according to their validity and importance. Finally, they give suggestions on strategy to integrate knowledge based on EBM with patients' preferences. The latter is a very important topic. Indeed, one of the criticisms more often addressed to EBM is that it promotes a cookbook approach to medicine, ignoring individual clinical expertise and values and preferences of patients. In a shortsighted application of EBM it may be true: on the other hand, an excessive confidence on individual clinical experience, with no attention to advances in medical knowledge, may be much more dangerous, above all when considering the very rapid obsolescence of such knowledge.

The book is especially addressed to health care professionals, who are interested either in introducing EBM in their own practice or in teaching it to the younger generation. Thus, the last two chapters are dedicated to teaching methods and to self-evaluation.

Two appendixes complete the book. The former gives a useful survey on confidence intervals (statistical topic) which are indicated, in reason, as the best way to present effect estimates. As a statistician, I have particularly appreciated the table containing formulas for the computation of confidence intervals for the most widely used indexes. My only criticism from a statistical point of view is about the formulas for the computation of positive and negative predictive values of diagnostic tests, PPV and NPV, in the chapter on Diagnosis and Screening. Formulas given by the authors are indeed appropriate only in case of a sample randomly extracted from the reference population, with no selection of subjects based on the presence or absence of the pathological condition under study. In case of rare diseases, it is usual to extract separately the two samples of diseased and healthy subjects. Thus collected data cannot be used to estimate the prevalence of the disease in the reference population, and formulas for PPV and NPV must be modified accordingly.

The second appendix is a glossary, including terms more likely to be met in reading clinical literature.

In all chapters, the authors schematize arguments in tables, which are very useful for a rapid memory recall. User-friendly pocket-size cards, schematising all main topics presented in the book, are also given. The package is completed by a CD-ROM, which presents various clinical scenarios, allowing the reader to extrapolate concepts and strategies to different situations. Finally, the book is supported by a website, whose goal is to help develop, disseminate, and evaluate resources that can be used to practise and teach EBM for undergraduate, postgraduate and continuing education for health care professionals from a variety of clinical disciplines.

As authors say, the aim of the book is to provide the reader with advices and instruments to practice EBM in real time. Time is indeed the main constraint for the continuing education of health care professionals. Whatever the country (and the Italian National Health Service does not make an exception), health care professionals are stifled by a chronic shortage of time, due to the large number of patients to be visited daily. This often makes doctors having only few minutes to examine each patient (above all in outpatients' departments). In this situation, education is often postponed, when not neglected. Thus, authors pay a special attention to all instruments which can help practitoners to save time in their education, i.e. "how to find current best evidence and have current best evidence find us". Among authors' suggestions, health professionals should ask for help to colleagues, pharmacists, or even patients: the latter may be suggested to come back to visit one week later, to allow doctors to deepen medical knowledge on the specific clinical condition and cures. These suggestions seem to be hardly applicable in the Italian situation: hospital and outpatients' department waiting lists are usually so long to prevent such a deferment.

In spite of some flaws, in my opinion the book can be very interesting and useful to sensitize all people professionally dealing with EBM at any level, that is not only health care professionals, but also researchers in medical fields, project and program evaluators, statisticians. Finally, even people who are simply interested in learning or improving knowledge on EBM (for instance, to be able to critically interpret scientific or divulgatory articles on medical topics) can well profit by this book.

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VALUTARE L'EFFICACIA DEGLI INTERVENTI IN SANITÀ

Luca Degli Esposti, Giorgia Valpiani, Gianluca Baio. Roma: Il Pensiero Scientifico Editore; 2002. 174 p. ISBN 978-88-490-0071-9. € 18,00.

Appropriate resource allocation procedures are essential in allowing for the implementation of relevant policies capable to promote citizens' health,

while containing related costs. These procedures are based on analytical tools and frames that allow for a comprehensive data collection and the eventual evaluation of health interventions effectiveness, related to individual patient's and population groups' therapeutic path.

Therefore information are needed to assess clinical efficacy and treatment outcomes as well as service utilization. These information must be analytically accurate, clinically credible, statistically valid, and economically relevant and applicable.

The reviewed manual tries to set up a population based databank useful for the individual patient clinical management as well as for the patients' groups clinical governance. Its main objective is to propose a dynamic model that allows for clinical practice management compliant with efficiency and equity paradigms in the care system.

According to the Authors, in order to assess investments in preventive medical treatments, there is a need to promote a systemic approach, based on empirical data, making use of analytical tools and procedures that are capable to collect data and evaluate effectiveness for each individual treatment.

The two main objectives of the health care system, namely healing and health protection, call for multidisciplinary competences that are able to respond to the health system several and complex needs. Therefore, diagnostic and therapeutic procedures must be reviewed and the building process for a databank considered, so that the relevant scientific and governance related information needed to manage population health are made available.

This manual offers a model capable to measure disease distribution, to estimate needed resources volume, to assess appropriateness and analyze cost-effectiveness of available procedure alternatives.

A few health system fundamental elements are reviewed, such as:

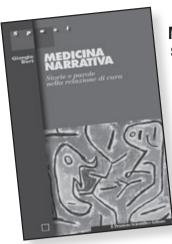
- formulation of health care objectives, or the need to make health care of acceptable quality available and accessible to all;
- approach to medical and health care administration and management (including such disciplines as epidemiology, health economics, pharmaco-economics, statistics, sociology and ethics) based on multidisciplinary team perspectives;
- promotion of information based health services management, as an essential prerequisite to support decision making aiming at formulating criteria to orient choice.

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MEDICINA NARRATIVA Storie e parole nella relazione di cura

Giorgio Bert.

Roma: Il Pensiero Scientifico
Editore; 2007. 287 p.
ISBN 978-88-490-0215-7.
€ 25,00.

signs and symptoms, less pain and an anthalgic effect under several conditions, better post surgery hospital stay, and in general an increased wellbeing.

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How do the doctor and the patient interact? In such a way that communication becomes an exchange of stories. In this extremely interesting text, the author states that any disease can be told in different ways, as the need to build a therapeutic alliance between a patient and a doctor is based on a shared narrative experience that is never predefined, but rather influenced by situations and opportunities.

The manual helps understand how the patient's world is different from the doctor's one. For instance, when the doctor classifies a disease includes clearly the related clinical patterns, the needed diagnostics, treatment and prognosis. The patient, on the other hand, roots the diagnosis in his/her personal history, culture, family, job, present and future settings.

What for the doctor may appear logic, justified, reasonable in terms of adoptable or avoidable behaviors, can be not understandable, impossible to accept and conflict promoting for the patient. Narrative medicine, well explained by Bert, consists more in a doctor's mental attitude, rather than in a discipline per se. It is a sort of conceptual map that helps discover the patient's wide, fascinating and unknown background. It needs skills related to the capacity to interact and relate, nothing else than a narrative exchange of experiences.

Thus, it is important to learn how to understand and read the other's stories in order to discover a world of meanings, beliefs, myths that make any person unique.

A few educational recommendations are also offered that contribute to build the doctor's attitude and skills to collect more and better information on the patient and his/her perception of the world and the reality and how the actual disease may change it.

These are essential information as narrative medicine when applied to clinical settings may allow for a decreased stress to the patient (especially when related to clinical reviews and tests), a better immunological response, a decrease in blood pressure, better lung and liver functioning, a containment in inpatient days, fewer depressive and post-traumatic



MATERIALI PER LA CONSERVAZIONE DELLE AREE UMIDE RESIDUALI DEL LITORALE ROMANO

Corrado Battisti, Valentina Della Bella, Anna Guidi (Ed.). Provincia di Roma, Assessorato alle Politiche dell'Agricoltura e dell'Ambiente Roma: Stilgrafica; 2007. 122 p. ISBN 978-88-95371-01-6.

Idited by the Province of Rome (Environmental Service) and with the contribution of experts in Natural sciences, Biology, Chemistry, Zoology, among them the scientists Laura Mancini, coordinator of the Operative Unit on Ecosystem Health and Human Health, and Valentina Della Bella, belonging to the staff of the Istituto Superiore di Sanità, and the recognized teamleader Prof. Roberto Argano of "Sapienza" University of Rome, the book represents an assembly of very interesting scientific material concerning an environmental unit of paramount importance at European level. In fact, it is centered on the residual humid areas of the Roman coast, with well illustrated maps, lists of species and a rich ensemble of illustrations, particularly of the wetlands.

The contents include a general cartography, a detailed characterization of the area by means of diatomic communities (the original methodology is included), plants communities and a specific contribution by Anna Guidi on rare plants species, either protected or somehow noticeable in the coastal landscape. The latter author reports about the anthropic action on the vegetation with an overview of the "state of the art" and a perspective of future studies.

The Istituto Superiore di Sanità group depicts the ecological functionality of wetlands and ponds and the aquatic macroinvertebrates, which represents a very useful index for environmental assessment and, above all, biomonitoring in the medium and/ or long-term.

Amphibians and reptiles species, including those ecologically specialized or threatened, are reviewed by Monica Pitzalis ("Roma Tre" University) who focuses on the anthropic introduction of vertebrate species (*Procambarus clarkii, Gambusia sp., Lithobates catesbeianus, Trachemys scripta, Myocastor coypus*) which interfered negatively with the native amphibians and reptiles, reducing their populations.

Bird communities and a catalogue of the main causes of the anthropic actions with the attempts by the local environmental authorities to deal with habitat degeneration, are discussed.

Roberto Argano and colleagues close the book with an intelligent inventory of such highly threatened wetlands, small ponds and marshes which actually represent key environmental stations for bioconservation, representing crucial reservoirs of biodiversity.

The book is rather relevant for all environmental toxicologists, ecotoxicologists, medical entomologists and veterinarians sensitive to environmental sustainability and willing to protect the respectability of science through the more humane action of mankind on plant and animal communities living in delicate key environments.

Enrico Alleva and Renata Solimini Istituto Superiore di Sanità, Rome , Italy renata.solimini@iss.it (mainly description of the various populations), its habitat, general biology, and conservation status. Moreover, two important paragraphs deal with the zoogeography in the Province of Rome and the problems of local management and conservation.

Most importantly, for each single species a rather complete bibliography (mostly, "grey" literature, difficult to find elsewere) is provided, with a cartography of the species distribution in the Province. A few general chapters review the environmental status of the area which, including the city of Rome and the surrounding fragmented habitats, represents an exhaustive bio-geographical Atlas for two vertebrate classes at an high level of risk of extinction.

This agile book is really important for eco-toxicologists and landscape planners. In fact, the presence of "ecologically weak" species in a given subarea may well indicate the existence in this local environment of pollutants (e.g. neurotoxicants). In turn, comparative neurotoxicologists and general ecotoxicologists may well exploit these kind of publications for environmental monitoring: since the disappearance of amphibians or reptile species in a given location may indicate a real hazard for the local human population, possibly co-exposed to the same noxious agent.

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Atlante degli Anfibi e dei rettili

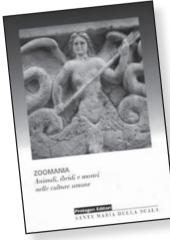
Marco A. Bologna, Daniele Salvi, Monica Pitzalis. Provincia di Roma, Assessorato alle Politiche dell'Agricoltura e dell'Ambiente

Università Roma Tre, Dipartimento di Biologia, Laboratorio di Zoologia Sistematica ed Ecologia Animale. Roma: Gangemi Editore;

2007. 188 p. ISBN 978-88492-1374-4.

Edited by the Province of Rome, Authority for Agricultural and Environmental Politics, in collaboration with Rome III University, Department of Biology, Laboratory of Systematic Zoology and Animal Ecology, this Atlas enlisting all the amphibians and reptilians species living in the Province of Rome, is a noticeable, well organized work of some relevance for both globally, and locally, interested zoologists and eco-toxicologists.

For each single species, with vivid colour illustrations, are enlisted the local name of the species, geographical distribution, taxonomic annotations



ZOOMANIA Animali, ibridi e mostri nelle culture umane

Cristiana Franco (Ed.). Siena: Protagon Editori, Santa Maria della Scala; 2007. 175 p. ISBN 978-88-8024-219-2. € 21,00.

Il dibattito sulla sperimentazione animale tocca temi etici, ma anche pratici, di notevole, crescente attualità scientifica in biomedicina. L'Istituto Superiore di Sanità ha cogestito col Ministero della Sanità prima, e con quello della Salute dopo, le problematiche relative all'adeguamento (dal 1992 in poi) delle normative italiane a uno standard europeo compiuto. È in questa chiave che alcune pubblicazioni, che toccano aspetti storiografici, ma

anche spunti bioetici di notevole rilevanza, compartecipano al dibattito italiano contemporaneo sulla sperimentazione condotta su specie vertebrate.

Riccamente illustrato e prefatto tra gli altri da Anna Carli, Rettore del Museo Archeologico Santa Maria della Scala e da Maurizio Bettini, Direttore del Centro Interdipartimentale di Studi Antropologici sulla Cultura Antica dell'Università di Siena, il libro è d'interesse certo per gli addetti ai lavori, per i veterinari, gli etologi e psicologi comparati fino ai bioeticisti.

Questo volume dimostra e illustra con arguzia dei rapporti tra uomini e animali dell'antichità ai nostri giorni. Troviamo la coppa ateniese del 480 a.C. raffigurante un giovane atleta con cagnolino, la stele funebre per un maialino macedone di Ege (Macedonia, II-III secolo d.C), o la stele funeraria romana in onore della cagnetta Helena, custodi-

ta nel molto californiano Paul Getty Museum di Malibu; ma anche la foto della donna Papua che allatta contemporaneamente un figlio e un maialino, o il bambino del gruppo etnico brasiliano degli Indios Txucahamei che porta a spasso in testa una scimmietta sud africana, un esemplare di cebo.

Cani, gatti, nidi di calabroni, uccelli californiani, amuleti, vasi e arnie dimostrano della contiguità culturale, spesso densa di connotati e significati zoomorfici, che accompagna la cultura umana. Animali e uomini, uomini con animali e animali con uomini: personalità che sfumano le una con le altre, ancora oggi responsabili di forme, anche maniacali, di accentuata sensibilità zoofila o animalista.

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