

THE MANAGEMENT OF AIDS PATIENTS. P. 202.

Edited by Miller D, Weber J, Green J. MacMillan, London, 1986.

AIDS CONCERNS? YOU. P. 104

Weber J, Ferriman A. Pagoda Books, London, 1986.

The infectious disease physician carries a low social profile compared his cardiological, gastroenterological or neurological colleagues. Yet this is not justified since the treatment and control of infectious disease has been more successful. In fact city dwellers have forgotten such horrors as plague in London in the 17th Century, or cholera in Cachoeira, Bahia, and yellow fever in Philadelphia. Urban epidemic infectious disease was almost a thing of the past until the definition of the acquired immune deficiency syndrome (AIDS) among the homosexual communities of New York and San Francisco. Now it is on the increase in the cosmopolitan cities of the world including Rio de Janeiro and São Paulo. As yet no one has left town, but at least they are talking about infectious disease at cocktail parties.

Talking is one thing but the written word another, and there has been a lag in information in book form about AIDS which is now being corrected. The first case of AIDS in Brazil was described in this journal as was the first book on AIDS. Now there are several and among the most recent the two listed above from British workers.

The larger work deals succinctly with The Management of the AIDS Patient in 202 pages. Since once the diagnosis is made there is little that can be done for the basic immunological defect it is perhaps significant that two of the authors are clinical psychologists. However the clinical management of various com-

plicating infections are discussed. Other sections deal with virology, immunology, venerology, nursing and psychological aspects such as counselling. There is a suicide risk in patients who find out they are infected and have no guidance. Associated venereal disease in homosexuals in London (eg. syphilis, gonorrhoea) has fallen as a result of modifications of sexual practices.

The second small pocket book tries to allay the public's fears about AIDS by furnishing reliable information. The first part is in question and answer form followed by six illustrative case histories, a glossary of medical terms and a list of useful addresses and telephone numbers in the British Isles. This type of booklet to inform the public of disease problems is in regular use in Britain. This pocket guide succeeds remarkably well in summarising the information generally available.

However research proceeds at such a pace that inevitably such books are already dated. Some workers think the impact of AIDS on society will be similar to that of syphilis in the 15th Century. In some respects, for example, the cerebral atrophy in the chronic stage the diseases are similar. Also there is now evidence from various parts of the world of heterosexual transmission of AIDS. Only time will tell, and there will be time since the unstable chemistry of the LAV-HTLV III virus and the weak immune response it induces make vaccine production difficult.

Philip D. Marsden