

The Origins of AIDS

Jacques Pepin

Cambridge University Press,
Cambridge, UK, 2011

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(paperback)

Pages: 310; Price: US \$28.99

This excellent but frustrating book is essential reading for anyone deeply interested in the early history and dissemination of HIV/AIDS. Interest must be deep because the author spares few details about colonial medical systems in the former French and Belgian territories, Congolese politics around independence, and a host of other obscure matters.

The book's strengths include clear explanations of complex themes, such as the molecular evolution of simian and human retroviruses, and a comprehensive review of early events in the pandemic. Many of the book's sections are engaging. For nonspecialists, the book provides some of the most intelligible analyses of molecular epidemiology and the early history of HIV/AIDS, including consideration of different explanations of the origin of HIV. For example, the author usefully examines and dismisses the hypothesis still promulgated by Edward Hooper that HIV originated in eastern Congo during the 1950s after material grown in monkey or chimpanzee cell cultures was used for mass vaccination against polio. Nonetheless, readers will cover a lot of material that could have been omitted or skip sections not essential to the core theme.

Fascinating insights and anecdotes are scattered throughout the text. The reader will find commentaries on early tropical researchers and public health officials, as well as description of a cryptic wasting illness in the 1930s referred to as "Cachexie du Mayombe." The clinical description of patients with this syndrome is eerily reminiscent of patients with AIDS:

"an assembly of bones held together by skin... whose only life lay in their gaze." There is also an incidental but valuable discussion of the late Jonathan Mann, founding Director of the World Health Organization's Special (later Global) Programme on AIDS, who deserves his own full historical biography.

This book represents a personal mission for Jacques Pepin, a Canadian infectious disease specialist and epidemiologist with broad African experience who developed an abiding interest in human African trypanosomiasis (sleeping sickness). Pepin's thesis regarding HIV derived from findings from retrospective studies of HIV-2 that he then applied to HIV-1. He proposes that during the colonial era in central and western Africa, the extensive re-use of needles and syringes in medical practice and campaigns against endemic tropical diseases amplified the early spread of HIV-1 after cross-species transmission from chimpanzees. Kinshasa became the early HIV epicenter from which subsequent global dissemination occurred, principally through sexual transmission.

The evidence offered by Pepin for the iatrogenic hypothesis is probably better presented than ever before. Nevertheless, the evidence is speculative because it is based on circumstantial and ecologic associations, such as those between earlier medical practices and trends in hepatitis C virus infection. Despite excessive speculation in parts of the book, such as that concerning the role of the trade in plasma from Haiti, this work is still a "tour de force" and deserves widespread recognition.

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Eradication: Ridding the World of Diseases Forever?

Nancy Leys Stepan

Cornell University Press, Ithaca,
NY, USA, 2011

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Public health, like any dynamic field filled with social reformers, scientists, and passionate believers, generates conflicting views, approaches, and goals. Thus, on domestic and global fronts, public health advocates compete for priority and resources for vertical (single-disease) versus horizontal (infrastructure or systems) programs; infectious diseases versus noncommunicable diseases; targeting diseases to improve health versus emphasizing the role of economic development or social determinants; and primary health care versus eradicating diseases.

Eradication: Ridding the World of Diseases Forever? by Nancy Leys Stepan provides a rich context for the role of eradication historically and conceptually in public health and, along the way, touches on many of the fault lines that stress and enrich public health. The depth and breadth of the author's approach also enrich her book and broaden its appeal to readers whose interests go beyond the topic of disease eradication and include public health history, governance, leadership,

philosophy, and dependence on multiple disciplines.

The book's introduction and first chapter alone would provide a fine primer to begin the exploration of "what makes a population get healthier?" After this concise and clear context of eradication and its pursuit (eradicationism), the text then focuses specifically on eradication efforts and some key disease eradicators. Particular emphasis is given to a major 20th century public health leader and proponent of disease eradication, Fred Lowe Soper, and his role with the Rockefeller Foundation, his successful efforts in Brazil and other countries, and his global influence as director of the Pan American Health Organization. He targeted yellow fever and malaria, primarily through vector control (mosquito eradication), and became a champion for use of DDT. Stepan uses the colorful and compelling personality and strengths of Soper, the political complexities of international work, and the unforeseen conflict of insecticidal vector control with the advent of environmentalism to illustrate the considerable hurdles involved in any program of disease eradication, no matter how initially successful and promising. She continues with detailed examples of the successful program of smallpox eradication.

After a description of the guinea worm eradication program, which has made extraordinary progress, the book seems to end a bit abruptly. Only a handful of pages are devoted to the world's major current disease eradication program, polio, and there is little mention of measles. The book relies for information and opinion on distinguished leaders in eradication efforts, but almost all of them are American or live in the United States. Are European views different? What about having more insights from public health figures in the involved nations in Africa, southern Asia, and South America? The result feels

somewhat parochial and incomplete.

Nevertheless, this book provides an interesting and useful perspective on a major public health movement and is suitable for students beginning their public health studies as well as for their professors of epidemiology and public policy. Veterans of eradication efforts will enjoy reading it. Those currently involved in eradication campaigns and those considering joining them would be wise to read this book and absorb its lessons.

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Infectious Disease: A Geographic Guide and Atlas of Human Infectious Diseases

Eskild Petersen, Lin H. Chen, and Patricia Schlangenhau, editors

Infectious Disease: A Geographic Guide, Wiley-Blackwell, Oxford, UK, 2011

ISBN: 978-0-470-65529-0

Pages: 480; Price: US \$84.95

Heiman F.L. Wertheim, Peter Horby, and John P. Woodall, editors

Atlas of Human Infectious Diseases, Wiley-Blackwell, Oxford, UK, 2012

ISBN: 978-1-4051-8440-3

Pages: 306; Price: US \$130.00

Infectious Disease: A Geographic Guide and Atlas of Human Infectious Diseases, 2 books recently published

by Wiley-Blackwell, deliver to the global medicine bookshelf diagnostic adjuncts for expatriate clinicians and those who see immigrants or returning travelers, while also serving as pretravel references on regional disease risk and authoritative sources for anyone needing infectious diseases information. Mary Wilson, who contributed to the first book and wrote the foreword for the second, filled a similar need in 1991 with *A World Guide to Infections*. Now these new books remind us that even in the age of near-real-time, electronic references, a printed volume to hold in one's hands can be an unmatched resource.

Infectious Disease: A Geographic Guide, edited by Eskild Petersen, Lin Chen, and Patricia Schlangenhau, uses United Nations regions as an organizational basis, which achieves the objective of maintaining relevance with respect to by-country travel while reflecting the fact that pathogens do not recognize political borders. The regions are still country groupings, but the way this book cuts up the world integrates how transmission varies by topography, geoclimatic factors, and the fauna that include pertinent disease reservoirs and vectors. Well-written chapters also review background regional histories, evolving global disease patterns, and the impacts of migration, climate change, and public health interventions. Extensively published physicians who have experience in geographic medicine contributed to all of the book's clinical content. Fifteen of the 22 region-specific chapters include authorship from within that region. Nicely organized tables dominate over paragraphs of text. Occasional inconsistencies occur in the use of a unique font that sets off headings and subheadings, but this is a relatively minor side effect of a first printing.

The sequence that reliably characterizes nearly all of the region chapters is by organ system, with diseases then addressed categorically by du-