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**Review of: I. Maltzman (2000). Alcoholism. A review of its characteristics, etiology,  
treatments and controversies**

Rehm, J

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## Book Reviews

COMPILED BY SUSAN SAVVA & GRIFFITH EDWARDS

**Denial and Delay. The political history of smoking and health, 1951–1964: scientists, government and industry as seen in the papers at the Public Records Office**

DAVID POLLOCK

London, Action on Smoking and Health, 1999  
166 pp.; £7 ISBN 1 872428 44 4

This is real, vital public health history. The United Kingdom has much progress to make to catch up other countries, especially the United States, in making the records of government available to the people who pay for it, and this book suggests one reason why: dereliction of duty to act for the greater good can be shielded from the glare of public scrutiny until the senior figures responsible have either died or retired. The book's main title, *Denial and Delay*, is an all-too-accurate summary of the longer, factual subtitle. This is a fascinating volume which by any reading, even with the most generous allowance for the benefits of hindsight, reveals a scandal: the persistent reluctance of government to act in the public interest in the light of scientific discovery of unique importance, and the reprehensible behaviour of the tobacco industry in trying to ensure that any action taken was as late and as ineffective as possible.

Almost as depressing as the story that unfolds is the fact that in the same week as I read this fascinating book, I found myself editing news stories (for the benefit of tobacco control advocates in developing countries, now the industry's most important target markets) in which there appeared some of the very same weasel words and excuses used more than three decades ago by the civil servants who first faced the increasing evidence linking tobacco and serious disease, and by the tobacco industry executives who so energetically maintained a position of denial. Quoting liberally from official records, for which he scrupulously cites references, David

Pollock, a former Director of Action on Smoking and Health, has elegantly and engagingly summarized a shameful episode amounting to near-conspiracy.

We learn of endless prevarication and obfuscation. A Medical Research Council committee document intended to brief the health minister is tediously shuffled back and forth between interested parties, and progressively weakened. At the Ministry of Health, near total silence greets the first paper from the prospective study of British doctors, which answered many of the criticisms and queries levelled at the first strong, case-control studies. It seems to have been easier for tobacco executives to have their case heard, even by health ministers and officials, than for doctors who put public health before commercial considerations. Ultimately it was the doctors who won through: when the Royal College of Physicians of London published its landmark first report on smoking in 1962, pressure for government action became unstoppable, but even if outright denial was out, dilution of the message continued along with delay. For politicians, the strongest motivation for inaction was probably the perceived financial implications, for as one cabinet minister reminded a colleague, "we all know that the Welfare State and much else besides is based on tobacco smoking".

This book will be of great interest both to students and practitioners of public health, especially those whose duty is to change the *status quo*, as they will inevitably find themselves dealing with politicians and civil servants. History it may be, but sufficiently recent that the author had the benefit of communicating with some of the original players. These include Sir Richard Doll, whose pioneering epidemiological work with the late Sir Austin Bradford Hill was central to the whole story, and Sir George Godber, who as chief medical officer did his best to press for action against an establishment seem-

ingly more interested in heeding the sentiment of a Chancellor of the Exchequer (finance minister), who lightly told a meeting of his political party: "For goodness' sake, do not stop smoking." Both have added illuminating forewords to a book which, as Sir Richard notes, reads like a good detective novel.

DAVID SIMPSON

*International Agency on Tobacco and Health,  
London, UK*

### **Alcoholism. A review of its characteristics, etiology, treatments and controversies**

I. MALTZMAN

Boston, Kluwer Academic Publishers, 2000  
389 pp; NLG 290, US \$125, £86.25 ISBN 0  
792 386566

A review of alcoholism, its characteristics, aetiology, treatments and controversies would be an important contribution to alcohol science. However, Maltzman does not provide such a review, despite its promising title. A review must clearly state its subject; criteria for including or excluding relevant research and methods used in combining the information, which is a description of how the author arrived at his conclusions (Rehm, 1999). Maltzman does not provide any of this information.

However, his criteria for inclusion of material into his review became implicitly clear when reading the book. Relevant to the book is solely Irving Maltzman's personal controversy with other scientists, especially the Sobells, with respect to controlled drinking. The overwhelming majority of the book rehashes this controversy in great detail, full of personal anecdotes and unpublished material. Even chapters where the title would suggest otherwise contain mainly personal material, e.g. on the short point on Aristotle's contributions to psychology, most of the text is centred on Maltzman's distinction of prediction vs. causality, discussed at length using the example of his drive to UCLA.

While one may argue that this particular anecdote may serve a purpose within the overall topic of the book, such an argument is no longer valid when the majority of the book is composed of such personal incidents and judgements. Let me give some arbitrarily selected citations to illustrate the style: "Two books that I read during the

'70s helped me realize what I was up against in trying to expose the alleged fraud perpetrated by the Sobells ..." Then Maltzman goes on to name a mystery novel "that is on my list of the 10 best mystery novels of all time ..." and Orwell's 1984 (Maltzman, 2000, p. 114). "I will now correct the numerous errors in logic and fact, omissions as well as commissions, present in the Marlatt *et al.* (1993) paper on harm reduction" (Maltzman, 2000, p. 261).

And so on. Citations such as this could be found in every chapter or subchapter. I assume most readers of an academic review of the field of alcoholism would prefer a factual style and are not interested in the author's list of the 10 best mystery novels of all time.

As a result of the very personal and anecdotal style, the book is hard to follow unless one is interested in a biography of Maltzman. Important scientific developments such as the controversies on and resulting changes of criteria classifying alcohol dependence in ICD and DSM (e.g. Room, 1998) are missing almost entirely. In this respect, it would have been crucial to discuss whether the scientific progress in neuroscience implies changes for the current definitions of ICD-10 and DSM-IV. In addition, it would have been interesting to review what we really know about the aetiology of alcoholism taking into account recent developments in biological, social and psychological sciences. What is the role of culture in shaping alcohol dependence (e.g. Room *et al.*, 1996; Üstün *et al.*, 1997)? I could continue this list of lost opportunities.

It is not only the author who is responsible for the above-described shortcomings. The editor with "Academic Publishers" in its name should have insisted on a more academic text. The best example here would be the handling of part of the material from *Science* (see Pendery, Maltzman & West, 1982) carefully distinguishing between scientifically relevant factual statements and personal allegations, and printing only the former. The failure to distinguish between personal history and scientific developments has led to a book where the interesting and potentially important contributions of Maltzman are buried within seemingly endless personal tirades: a lost opportunity for alcohol science.

JÜRGEN REHM

*University of Applied Sciences,  
Hamburg, Germany*

## References

- MALTZMAN, I. (2000) *Alcoholism. A review of its characteristics, etiology, treatments and controversies*, (Boston, Kluwer Academic Publishers).
- MARLATT, G. A., LARIMER, M. E., BAER, J. S. & QUIGLEY, L. A. (1993) Harm reduction for alcohol problems: moving beyond the controlled drinking controversy, *Behavior Therapy*, 24, 461–504.
- PENDERY, M. L., MALTZMAN, I. M. & WEST, L. J. (1982) Controlled drinking by alcoholics? New findings and a reevaluation of a major affirmative study, *Science*, 214, 169–175.
- REHM, J. (1999) Review papers in substance abuse research, *Addiction*, 94, 173–176.
- ROOM, R. (1998) Alcohol and drug disorders in the International Classification of Disease: a shifting kaleidoscope, *Drug and Alcohol Review*, 12, 305–317.
- ROOM, R., JANCE, A., BENNETT, L. A., SCHMIDT, L. & SARTORIUS, N. (1996) WHO cross-cultural applicability research on diagnosis and assessment of substance use disorders: an overview of methods and selected results, *Addiction*, 91, 199–220.
- ÜSTÜN, B., COMPTON, W., MAGER, D., BABOR, T., BAIJEWU, O., CHATTERJI, S., COTTLER, L., GÖGÜS, A., MAVREAS, V., PETERS, L., PULL, C., SAUNDERS, J., SMEETS, R., STIPEC, M.-R., VRASTI, R., HASIN, D., ROOM, R., VAN DEN BRINK, W., REGIER, D., BLAINE, J., GRANT, B. F. & SARTORIUS, N. (1997) WHO study on the reliability and validity of the alcohol and drug use disorder instruments: overview of methods and results, *Drug and Alcohol Dependence*, 47, 161–169.

## Preventing Drunk Driving

ELSIE R. SHORE & JOSEPH R. FERRARI  
Haworth Press, New York and London, 1998  
89 pp; \$24 ISBN 0 7890 0511 5

Stronger enforcement and campaigns to change public attitudes are both blunt instruments for behavioural change, but in many countries over the last few decades they have been applied with considerable success to the drink-driving problem. A combination of increased driver testing for alcohol, harsher penalties for drink-driving and mass media campaigns highlighting the social unacceptability of drink-driving have led to significant reductions in deaths and harm caused by alcohol-related traffic accidents. The scale of the problem is such, however, that despite these gains many thousands of individuals are killed in traffic accidents involving a drunk driver, and alcohol is still an important cause of fatal traffic accidents.

What kinds of intervention will be needed to reduce the levels of drink-driving beyond those achieved by tougher enforcement and hardening public attitudes? There are two broad requirements: first, to target the individuals whose

behaviour has not so far been affected by existing measures and secondly, to go beyond the standard attitude change models that aim to enhance drivers' perception of the costs of drink-driving, and find new ways to facilitate more responsible driver behaviour. The kinds of intervention that meet those requirements cover a wide range, but might include identifying communities and individuals at high risk of drunk driving, in-car devices to test the breath of drink-driving offenders, providing feedback to potential drivers about their blood alcohol concentrations before they get in to their cars, "designated driver" schemes whereby one member of a group is identified as that evening's driver and encouraged not to drink, and helping the friends and partners of potential drink-drivers to dissuade them from driving when drunk.

Those are exactly the kinds of intervention that the six reports in this collection of papers by US researchers deal with. Previously published as a special issue of the *Journal of Prevention and Intervention in the Community*, this slim book offers little in terms of broad theory or integrative analysis, but provides a sample of the directions being taken by behavioural scientists who want to contribute to further gains in the control of drinks-driving. The studies showed, for example, that drink-driving offenders tended to live in geographical clusters that were related to the availability of alcohol; that questionnaire items unrelated to drinking helped to identify drink-driving recidivists; that "interlock" technology (an in-car device to test the breath of the driver) is helping to reduce the risk of further drink-driving by offenders; that participation in a designated driver scheme was increased by advertising the initiative and providing incentives; and that arguments that challenged the driver's competence were rated as more likely to persuade a friend not to drive when drunk.

The studies are strongly orientated to the problem of drink-driving as it presents itself in the United States at present, and the book is a dry read for non-specialists as there is no commentary on the issues raised or unifying theme for the selection of papers that are presented. Nor do the findings themselves represent really significant empirical developments in their fields. The papers do, however, point the way to the kinds of highly focused and targeted behavioural interventions that are likely to form the basis for future attempts to reduce drink-driving among

drivers who have proved resistant to the first wave of enforcement and attitude change interventions.

JAMES ELANDER

*London Guildhall University, UK*

**Enfermedades y Problemas Relacionados con el Alcohol [Diseases and Alcohol-Related Problems]**

MIGUEL SANCHEZ TURET

España, SA, Barcelona, Spain, 1999

223 pp., ISBN 84 7179 290 7

The title selected for this book pinpoints the widening spectrum of alcohol problems that clinicians or health professionals might encounter in any health care activity, where alcohol-using patients (either dependent or not) may ask for help. The author of the book and collaborators, both clinicians and academics from very respected medical and university institutions in Catalunya (Spain), have faced the challenge to write a piece of work on this matter, so deeply needed in the Spanish addictions literature.

This is not simply an “alcohol treatment book”, but rather a wider work with a distinctive medical approach deriving from the historic concept of the disease of alcohol, and the pharmacological, neurological and hepatic consequences which stem from the use of alcohol and alcoholic disease. One aspect that has very little space in this book is early diagnosis and intervention, which might prevent alcohol problems evolving into alcohol diseases.

An interesting historical introduction precedes a step-by-step explanation of the development of the “disease concept of alcoholism and dependence” which is probably one of the formerly most disputed medical disorders, although now recognized.

In two separate chapters, the author has analysed deeply the genetics and neurogenetics of alcoholic disease. This is the strongest topic represented in this book, due most probably to his experience in the field and his sound knowledge, which he has been able to share in a readable but nevertheless academic way. Once again the teaching experience of Sanchez-Turret appears evident in the chapter on pharmacokinetics and pharmacodynamics of alcohol, where in a brief but very clear chapter he re-

minds us of all the particularities of this ancient substance, alcohol.

A description of the effects of alcohol on the organism and later on the liver provides a classic summary, despite the fact that little has been said regarding carbohydrate deficient transferrin, and others as markers of alcohol consumption. The neurological disorders associated with chronic alcoholism are described by Estruch, including some basic details on neuroimaging by SPECT and CAT scans, and perhaps a too-brief description is given of the neuropsychological complications which may arise (mainly in the frontal lobes).

The pharmacological treatment of alcoholism is summarized briefly in chapter 9, pinpointing the fact (so important for medical students and physicians who might read this book) that there is no pharmacological treatment that can resolve by itself the problem of alcoholism, and emphasizing that therapy will need all the psychosocial strategies that boost any positive results from the medications, and vice versa. This view has been developed extensively by F. Freixa in one of the last chapters of the book with a thorough description and definition of the terms, such as treatment, detoxification, rehabilitation reinsertion and therapeutic process, that so commonly are not discussed adequately in other books in the field. Based on an obviously wide clinical experience, Dr Freixa answers some relevant questions that lie behind the whole treatment issue of alcohol problems: disease or symptom, progression of the disease, the premorbid state of alcoholics, controlled drinking and others that lie at the very root of the governing ideas in the alcohol field. A long treatment period and follow-up is what emanates as the necessary approach from the experience and knowledge of these authors, and tends to confirm the view of a chronic and relapsing disease that needs multiple and varied professional help to reach the other end—sobriety and a better quality of life.

Not usually considered in treatment books, the association between alcohol and road traffic accidents is a very important epidemiological finding strong enough to be included here as a clinical issue, since very few alcohol-dependent patients have not engaged in the risk of drinking and driving. The toll of death and disastrous consequences from this association challenges anyone working in the field to apply harm-reduction and risk-minimization approaches,

both for the benefit of our patients and other people. Therefore, the inclusion of this topic in the chapter by J. L. Pedragosa makes sense and pushes the frontiers of our work a little further forward, while strengthening connections with the environment and society as a whole.

In summary, this book is a good piece of work in the Spanish language. I will recommend it to my students, residents and colleagues who are engaged in clinical work in the alcohol field, to some others not in this area, and perhaps also to clinicians whose mother tongue is not Spanish.

DANIEL SEIJAS

*Addiction Unit, Universidad Catolica, Santiago, Chile*

### **A Babel of Bottles. Drink, drinkers and drinking places in literature**

JAMES NICHOLLS & SUSAN J. OWEN (Eds)  
Sheffield Academic Press, Sheffield, 2000  
207 pp., cloth £35.00, US\$55.00  
ISBN 18412070474

This proceedings volume derives from a meeting held at Sheffield University in 1997. The title is silly, and judicious editing could have shortened considerably the sometimes meandering text, which too often descends into wordy nonsense—for instance, on Ernest Hemingway, “Drink is at all times both a pivotal and undecidable medium of human exchange” and “Hemingway’s use of drink and the drinking space will later be read in conjunction with the Bakhtinian concept of the chronotone.” There is no evidence of Hemingway having rubbed off on the favoured style of Liverpool John Moores University.

That said, there are within this volume some individual contributions which amply support

belief in the potential for literary scholarship to illuminate understanding of the place given to drinking in society and culture. A chapter by Dominic Rowland on T. S. Eliot entitled “Down at Tom’s Place: public houses and gender in *The Waste Land*”, is writing of a truly exciting and intelligent kind. Rowland states that “Public drinking places are important in the poem as stages on which the drama of gender relations was played out, and as sites on which the distinction between the public and private becomes blurred.” Anyone reading this chapter will have their enjoyment and understanding of a great poem deepened, but will also discover new insights into the social meaning of the pub in an intensely changing post-World War I urban society. There are several other good pieces in this book, notably Susan Owen on drink in Restoration drama, Sue Vice on women’s drinking in contemporary fiction and Sharon Lowenna on Daphne du Maurier.

However, if further, sustained and incremental advances are to be made in the application of literary criticism to drink questions, at least two issues will need to be addressed. The first is the issue of method and the present style of essay writing, with its lack of any attempt at quantification, often failing to carry conviction. Secondly, there is the broad need for strategy. That would comprise a mapping of purposes, the making of relations with alcohol science and definition of a framework of questions, rather than the continued resting content with yet another essay drawn at whim. At present this field of endeavour looks a bit too like the reading of Tarot cards.

GRIFFITH EDWARDS

*Editor-in-Chief*

### **ERRATUM**

In the article “Prevalence, incidence and risk factors of anaemia in HIV-positive and HIV-negative drug users” by Van der Werf *et al.*, *Addiction* (2000) 95, 383–392, it has been pointed out that the upper limit for the MCV range was higher than would normally be used (104fL versus 100fL), but further data analysis indicate that this did not influence the key findings.

MARIEKE VAN DER WERF