

chival searches and her interviews with people who lived the history that she describes. This is a tale that spans nearly a century, and in a short book, some richness is inevitably lost. The material covering the early years tends to be more nuanced than that of more recent events, such as the failure of the Clinton health plan.

One difficulty with the book is that its audience is not clearly defined. On the one hand, Quadagno addresses sophisticated debates in political causality; indeed, in invoking stakeholder politics, one of her objectives is to put forth a kind of “unified field theory” to explain the failure of universal coverage. On the other hand, she takes the time to define rudimentary terms such as “filibustering” and to summarize the very basics of programs such as Temporary Assistance to Needy Families and welfare reform.

For physicians who share Quadagno’s taste for universal coverage, this look backward at a series of missed opportunities is rather bleak. This is not a history from which such readers can draw much professional pride. Nor does Quadagno’s analysis offer much hope that physicians will be central players in health care reform in the near future, given their current organizational fragmentation. In the final pages of the book, the author looks forward, presenting a brief sketch of how a coalition of diverse groups (including employers, the elderly, organized labor, and the uninsured) might work together to achieve what has repeatedly failed to come to fruition over the past century. Although some readers may consider this an unlikely picture of the near future, Quadagno’s sustained focus on interest-group politics seems right on target.

Jan Blustein, M.D., Ph.D.

Wagner Graduate School at New York University
New York, NY 10012

Book Reviews Copyright © 2005 Massachusetts Medical Society.

CORRECTIONS

Sudden Death in Patients with Myocardial Infarction and Left Ventricular Dysfunction, Heart Failure, or Both (June 23, 2005; 352:2581-8). On page 2581, lines 9 and 10 in the Results section of the Abstract should have stated that “83 percent of all patients who died suddenly in the first 30 days did so after hospital discharge,” rather than “83 percent of all patients who died suddenly did so in the first 30 days after hospital discharge,” as printed. We regret the error.

Bites of the Brown Recluse Spider (May 12, 2005;352:2029-30). In the letter by Swanson and Vetter, on page 2029 in the right-hand column, lines 7 through 12 of the second paragraph should have read, “Furthermore, the unverified diagnosis of a spider bite in areas where loxosceles spiders are nonendemic is insufficient proof of the local existence of brown recluse spiders or other allegedly necrosis-inducing spiders . . .,” rather than “in areas where loxosceles spiders are endemic,” as printed. We regret the error.

Standard and Increased-Dose BEACOPP Chemotherapy Compared with COPP-ABVD for Advanced Hodgkin’s Disease (June 12, 2003;348:2386-95). On page 2387, in Table 1, the dose of cyclophosphamide in the regimen of increased-dose BEACOPP should have read 1250 mg per square meter, rather than 1200 mg per square meter, as printed.

NOTICES

Notices submitted for publication should contain a mailing address and telephone number of a contact person or department. We regret that we are unable to publish all notices received. Notices also appear on the Journal’s Web site (www.nejm.org/meetings). The listings can be viewed in their entirety or searched by location, month, or key word.

VA—NATIONAL MEDICAL MUSICAL GROUP

The group is recruiting new members for its symphony orchestra and chorus. The MMG holds concerts around the country and overseas, including annual Flag Day/Independence Day and Veterans’ Day concerts. Physicians, dentists, nurses, other healthcare personnel, faculty and students, both VA and non-VA, and their families and friends may apply.

Contact VA—National Medical Musical Group, 1700 17th St., NW, Suite 508, Washington, DC 20009; or call (202) 797-0700; or e-mail vanmmg@hotmail.com; or see <http://www.medicalmusical.com>.

LUCILE PACKARD CHILDREN’S HOSPITAL

The following course will be offered: “Palliative and End of Life Care for the Adult and Child” (Kauai, Hawaii, Nov. 7–9). The course is jointly sponsored by Lucile Packard Children’s Hospital at Stanford and Stanford University School of Medicine.

Contact Lucile Packard Children’s Hospital, CME Programs, 725 Welch Rd., MC 5517, Palo Alto, CA 94304; or call (650) 497-8554; or fax (650) 497-8585; or see <http://www.cme.lpch.org>.

RETINAL AND VITREOUS SURGERY

The course will be offered in Prague, Czech Republic, Sept. 3 and 4.

Contact Prof. Ingrid Kreissig, University of Tuebingen, Breuningerbau, 72075 Tuebingen, Germany; or fax (49) 7071-29-5209; or e-mail ingrid.kreissig@augen.ma.uni-heidelberg.de; or see <http://kreissig.uni-hd.de/>.

THE JOURNAL’S WEB AND E-MAIL ADDRESSES:

For letters to the Editor: authors.nejm.org

For information about the status of a submitted manuscript: authors.nejm.org

To submit a meeting notice: meetingnotices@nejm.org

The Journal’s Web pages: www.nejm.org