

Some chapters, such as his discussion of the history of substance abuse in the United States, are especially interesting but still controversial and, in parts, inaccurate. For example, Califano blames the extensive use of drugs in the treatment of psychiatric disorders as a major cause of abuse without recognizing its necessity. He states, “The medical profession has pharmaceuticalized the normal stages of female life by prescribing mood-altering drugs for problems related to menstruation, marriage, motherhood, and menopause,” but he then fails to provide sound evidence to prove his point. Moreover, there is plenty of epidemiologic evidence that mood disorders are severely undertreated and frequently misdiagnosed when they do come to clinical attention.

An apparent aim of the book is to shock the reader with what Califano describes as the epidemic proportions of the problem and the lack of appropriate response from government, society, families, and the medical establishment. I found the following sentence glib (and many readers will take offense): “If Moses were an American at the dawn of the twenty-first century, the tablets he would bring down from the mountain would be Vicodin and Valium, not a set of commandments to guide our conduct.” On the other hand, Califano also admits to his own responsibility in facilitating access to Librium (chlordiazepoxide) and Valium (diazepam). As a lawyer for Hoffmann–La Roche in 1970, he successfully argued that these two drugs do not lead to addiction, which led to their removal from the controlled substances listed on the Food and Drug Administration’s Schedule III, such as amphetamines, hydrocodone, codeine, and short-acting barbiturates.

Califano strongly criticizes current treatment strategies and what he calls the lack of objective evaluations of treatment protocols — for example, those that do not count treatment dropouts. He proposes specific improvements in research, which he models (in regard to the size of the needed investment) on the Manhattan Project. Califano proposes a very large increase in the investment in integrated research on the causes of abuse to make the study of abuse more attractive. He also suggests that the alcohol industry suppresses the research budget of the National Institute on Alcohol Abuse and Alcoholism. Such a provocative statement merits careful documentation.

In short, the book is never boring, nor does it cease to be provocative, but it has some serious shortcomings. Califano presents abundant epidemiologic data but does so in a rather careless manner, and major methodologic aspects of the work that was used to generate the data are not discussed. This leaves the reader in the position of having to decide what to believe without the author having provided the tools necessary to make an intelligent evaluation.

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CORRECTIONS

Genetics of Warfarin Response (June 19, 2008;358:2741-4). The final sentence in the letter from Mannucci et al. (p. 2743) should have read, “Unfortunately, the primary outcomes of this trial are not bleeding and thrombosis, but surrogates such as the percentage of time that the INR is within the therapeutic range” (rather than “Unfortunately, the primary outcomes of this trial are bleeding and thrombosis or surrogates such as the percentage of time that the INR is within the therapeutic range”). We regret the error. The letter has been corrected on the *Journal’s* Web site at www.nejm.org.

Brain-Derived Neurotrophic Factor and Obesity in the WAGR Syndrome (August 28, 2008;359:918-27). The abstract (p. 918) included a trial-registration number, but since the article reported a further analysis of trial data, not the trial itself, the number should not have appeared. The article has been corrected on the *Journal’s* Web site at www.nejm.org.

Graves’ Disease (June 12, 2008;358:2594-605). An additional correction is described in the Correspondence section of this issue of the *Journal* (Graves’ Disease [September 25, 2008;359:1407-9]).

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.

ACOEM’S AMERICAN OCCUPATIONAL HEALTH CONFERENCE

The conference will be held in San Diego, CA, April 26–29. Contact the American College of Occupational and Environmental Medicine, 25 Northwest Point Blvd., Suite 700, Elk Grove Village, IL 60007-1030; or call (847) 818-1800, extension 374; or see <http://www.acoem.org>.