out early, that socially disadvantaged persons need counseling and practical assistance, that society would benefit from the expansion of treatment services — all this has long been obvious to professionals in the field. How to improve and expand the system remains controversial, and the report provides no new insights into this problem. While useful to historians, this report does not open paths into the future.

A more subtle limitation of this study, in my opinion, is the assumption that addictions reflect psychosocial disorders and not physiologic diseases in the medical sense. To be fair, this assumption is not put forward explicitly, but it is presumably the basis for stating that "a better understanding of how counselors and clients interact could lead to more efficient therapy, as could a better specification of the social and psychological changes that occur during treatment." At the same time, the authors fail to observe that the trend toward lower doses of methadone is associated with higher dropout rates and an increased abuse of heroin by patients in abstinence-oriented methadone programs.

This criticism obviously reflects my own bias toward a neuro-chemical explanation of the powerful and pharmacologically specific compulsion of addicts to dose themselves with particular neuroactive chemicals. From a physiologic perspective, social and psychological conditions may lead to experimentation with dangerous drugs; the subsequent compulsion to continue their use is neuro-chemical. For more efficient treatment we need to analyze not only the interactions between clients and counselors but also the behavioral consequences of interactions between drugs and cellular receptors. Good medical practice should be broad enough to make optimal use of both counseling and chemotherapy. If such is the future, then this report documents the past.

New York, NY 10021

VINCENT P. DOLE, M.D. Rockefeller Institute Hospital

## COCAINE: THE GREAT WHITE PLAGUE

By Gabriel G. Nahas, with Helene Peters. 300 pp. Middlebury, Vt., Paul S. Eriksson, 1989. \$19.95.

Anyone who works with substance abusers has to be impressed by the high prevalence of cocaine use and its medical, psychological, and social consequences. According to the National Household Survey of Drug Abuse of 1985, 22 million Americans had tried cocaine and 12 million used the drug during the preceding year. The most recent of these surveys (1988) estimated that 8 million people in the United States had used cocaine during the previous 12 months. The medical and social consequences of the use of cocaine are extensive. The obstetrical complications of cocaine use, including long-term neurologic and behavioral impairment of offspring, are of major concern and are largely unknown to the general public.

This book provides a wealth of information about past and current use of cocaine around the world. It details the effects of cocaine, from the neurochemical to the anthropological. Dr. Nahas is a respected and controversial scientist who is well known as an outspoken crusader against the use and legalization of marijuana. In this book, he takes on cocaine.

As he points out, the current explosion in cocaine use is not the first such occurrence. Between 1884 and 1900 there was a first wave of extensive cocaine use in the United States and Europe. Physicians and pharmaceutical companies of the time touted the drug for many ailments and for the treatment of alcoholics and opium addicts. Cocaine made its appearance in the patent medicines of the time, including Vin Mariani and Coca Cola.

During this time, many reports were published in the medical literature describing the untoward effects of cocaine. Many physicians and practitioners who promoted cocaine for others became dependent on the drug themselves (e.g., William Halsted and Sigmund Freud).

The accrued experience of the untoward effects of cocaine led to a decline in its use by both physicians and the public. As the use of narcotic drugs became criminalized, cocaine use faded into the background. The development of Novocaine (procaine hydrochloride) made its use unnecessary in local anesthesia. This book emphasizes that the medical and social effects of cocaine use were forgotten in the interim by the scientific community. Dr. Nahas is

outraged that some members of the scientific community supported the recreational use of cocaine during the 1970s and 1980s, when cocaine use was increasing.

This book is a diatribe against the use of cocaine and those who would support its use. It is directed to the educated general public, but it should be of interest to physicians and scientists. Dr. Nahas is clear about his biases and about his frustrations in dealing with those he feels are unenlightened. He strongly opposes cocaine use under any circumstances, including administration of the drug to human subjects under controlled laboratory conditions. He finds particular fault with members of the scientific establishment involved in research into substance abuse who do not share his antidrug zeal. His goal is to convince others of the horrors of cocaine use. Indeed, he quotes the UNESCO charter: "Since war starts in the minds of men, it is in the minds of men that it has to be fought." One chapter, devoted to the use of psychosurgery (cingulotomy) for the treatment of refractory cocaine abuse in Peru, was clearly included for its shock value.

In spite of its polemics, this book is an interesting personal account that takes the reader from the meeting rooms of scientific conferences around the world to the jungles of Peru. The author shows insight in his presentation of the international social and economic underpinnings of the cocaine trade. He points out that there is no simple or single solution to the problems wrought by cocaine, and he calls for international cooperation to address the situation.

It is clear that the medical, psychiatric, and social consequences of cocaine use are considerable. Even sporadic or recreational use of the drug may have immediate deleterious effects on health. All physicians should be familiar with the effects of cocaine on health and should be able to recognize cocaine use in their patients and be aware of the options and resources for treatment.

Although this book provides a wealth of information on the deleterious effects of cocaine and the social and economic systems that promote its use, it gives little in the way of practical advice to the practicing physician or scientist. Yet, if one needs convincing that cocaine use has deleterious consequences or needs data and ideas to support such a viewpoint, the arguments presented here are very persuasive indeed.

Providence, RI 02912

ROBERT M. SWIFT, M.D., PH.D. Brown University

## PUBLIC AND PROFESSIONAL ATTITUDES TOWARD AIDS PATIENTS

Edited by David E. Rogers and Eli Ginzberg. 136 pp. Boulder, Colo., Westview Press, 1989. \$28.50.

## AIDS AND THE ALLIED HEALTH PROFESSIONS

By Joyce W. Hopp and Elizabeth A. Rogers. 311 pp. Philadelphia, F.A. Davis, 1989. \$16.95.

The acquired immunodeficiency syndrome (AIDS) is a terrifying, relentless disease that is simultaneously acute, chronic, infectious, progressive, disabling, and ultimately fatal. Soon the number of newly diagnosed cases of AIDS is expected to reach 100,000 or more per year — a number equal to the cumulative total identified since 1981. While remarkable advances in biomedical research have been made in the first nine years of the epidemic of human immunodeficiency virus (HIV) in the United States, major problems remain in the organization, financing, and delivery of care for AIDS. Moreover, health care workers are increasingly concerned about contracting the disease while providing care to infected persons.

Rogers and Ginzberg have assembled an informative, provocative, and timely book that examines how well the public, health professionals, and the health care system are responding to the needs of the increasing numbers of people ill as a result of HIV infection, and how the nation's response to the AIDS epidemic should be improved. They give special emphasis to the attitudes and behaviors of health professionals and to methods of ensuring their adequate involvement in care for AIDS.

Among health care workers, fears of contracting HIV and passing it on to their families persist, even though the risk of occupation-