BOOK REVIEW

These are the collected and edited papers given at the Conference on Controlled Clinical Trials, called by the Council for International Organizations of Medical Sciences, and held in Vienna in 1959. All the seventeen contributors were from Great Britain, in contrast to the other participants, 64 of whom were invited leaders from European University Medical centres. Fittingly, the chairman was Prof. A. Bradford Hill, since in effect the Conference presented to the rest of Europe what some in Britain have called the "Bradford Hill Revolution", namely, the spread of the statistically controlled clinical trial throughout British Medicine. The story of how this change in medical thought came about has not been told in this book (nor was its object to do so), yet our European colleagues might have understood a little better how their neighbour managed to get ahead in this field if at least one paper at the conference had been devoted to the history of how these trials developed.
The trial of streptomycin in pulmonary tuberculosis, for example, although possibly not the earliest, was one of the best known in the early days and owed a great deal of its success not only to the foresight of those who organized it but also to the restricted amount of streptomycin then available. A trial in which the "haves" were compared with the "have nots" became administratively and ethically possible. The introduction of the National Health service in 1948 was perhaps the greatest stimulus, firstly because it overcame many of the financial or transport difficulties (to the patients) of the participating in such trials, and secondly because the authorities of the Health Service needed very much to know the true worth of expensive imported drugs.
The first paper in the book, on "Aims and Ethics", is from Prof. Bradford Hill himself and is a model of clarity. All those who feel instinctively that controlled trials are unethical because the controls may possibly be deprived of some beneficial treatment should read this paper and ask themselves whether they would not agree that in many settings "the carefully controlled clinical trial is far more ethical than the uncontrolled experimentation with unproven products to which unsuspecting patients are so frequently exposed". Indeed, if there were no prior doubt as to the superiority or inferiority of a method of treatment under test, there could be no need for doing a trial at all. As Dr. R. Paterson says elsewhere in the book, when discussing controlled trials in cancer, "The first requirement is that everybody concerned must feel convinced that they could not guess the probable outcome of the study."
The remainder of the book is mainly concerned with technical problems and the presentation of illustrative results. Dr. P. Armitage discusses the problems of the construction of comparable groups, and Dr. D. D. Reid the advantages and disadvantages of using the patient as his own control. Dr. P. Armitage discusses sequential analysis, its application to short-term treatment and its rather more limited application to long-term treatment of the type usually required in the rheumatic diseases.
Dr. I. Sutherland discusses the design of records and follow-up procedure, and Prof. J. Knowelden the analysis and presentation of results.
In a paper on rheumatoid arthritis, Prof. J. H. Kellgren discusses the special problems of defining this disease in a reproducible manner. He proposes the following practical definition (for the purpose of clinical trials): "Inflammatory polyarthritis of over 3 months' duration with bilateral involvement of hands or feet associated with a positive sheep-cell agglutination test." He goes on to discuss the various ways in which improvement or deterioration of the disease can be evaluated. Prof. E. G. L. Bywaters discusses the various designs of clinical trial which may be used in rheumatoid arthritis, the problems of what to do about patients who have to be withdrawn before treatment is completed, and other details, and illustrates them with results of the 1955 Empire Rheumatism Council trial of cortisone against aspirin in the treatment of early rheumatoid arthritis. Other papers in the book deal with clinical trials in tuberculosis, cancer, myocardial infarction, and acute respiratory diseases.

HEBERDEN SOCIETY

ANNUAL REPORT, 1960

At the Annual General Meeting held on December 3, 1960, the following decisions regarding membership of the Society were made:
1. Non-medical scientists will be eligible for Full and Associate Membership.
2. Associate Membership will be increased to fifty, vacancies being filled gradually.
3. No alterations will be made to the maximum number of Full Members, but the position will be reviewed in 2 to 3 years.

The following new members were elected:
Ordinary Members: Dr. Rhys Davies, Dr. C. J. M. Clark, Dr. P. S. Davis.
Associate Members: Dr. Charlotte Feldman, Dr.