quantitative and qualitative reasoning, and avoiding a deep examination of the mathematical aspects of the models. Although the content of the book is a good testimony of the authors’ commitment to achieve this objective, it seems that the mathematical rigor sometimes overshadows the delivery of conceptual elements to readers who have different levels of familiarity with mathematics.

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Bennett & Brachman’s Hospital Infections
Edited by William R. Jarvis
Philadelphia: Wolters Kluver/Lippincott Williams & Wilkins, 2007. 832 pp., Illustrated. $210.00 (hardcover).

A lot has happened in the field of infection control since Bennett and Brachman produced the last edition of this classic textbook. A continuous parade of pathogens has emerged that could conceivably be introduced into health care settings and become widespread. In 1998, resistance to vancomycin in Staphylococcus aureus was possible only in theory. Recent transmission of avian influenza from birds to humans did not result in efficient spread from human to human, which raised hopes that such an event would not recur in one’s lifetime. The coronavirus was a common cause of mild self-limited upper respiratory tract infections. Smallpox had become a pathogen of historical interest. Although the use of anthrax for purposes of bioterrorism was well recognized, preparation for such an attack was low on the list of local and national priorities. In hindsight, we recognize only too well that increased vigilance to detect and contain these organisms is required from a health care system that has limited resources.

Changes in medical technology and treatments have facilitated the emergence of these infectious agents. More patients receive care in nonhospital settings, and rates of infection continue to rise as the population ages and survives illnesses that were previously fatal. Transmission of infection has become an issue of much wider scale and reaches beyond the walls of hospitals and, in some instances, assumes global proportions. Epidemiologists and infection-control practitioners can no longer confine their practices to within acute care hospitals.

A bright new cover announces that the latest edition of this textbook has been extensively revised to meet the needs of the 21st century. The new editor, Dr. William Jarvis, has taken the helm and has conscripted an impressive list of experts with national and international perspectives. Although the book title remains Hospital Infections by necessity, the content of the 5th edition clearly focuses on the bigger picture of health care epidemiology and infection control.

New chapters discuss important topics that range from hand hygiene, antimicrobial stewardship, sterilization, and disinfection to global issues. Public reporting of rates of health care–associated infection and patient safety and making a business case for infection control are also included as areas of recent and significant concern for the field. Not surprisingly, there is also a proliferation of electronic resources for infection-control surveillance and regulatory issues.

The index provides an exhaustive listing of potential pathogens, new and old, that have been associated with health care–associated infection; metapneumovirus, severe acute respiratory syndrome, and West Nile virus are just a few of the newer agents listed. The chapter about blood-borne infections is extended well beyond a discussion of HIV. Fungi have also assumed their rightful place as the cause of increasingly important infections that occur in compromised hosts.

This book is well written and organized, with up-to-date references and graphics that help to amplify points made in the text. Overall, a “how to do it” format for the neophyte is liberally interspersed with “pearls” for the experienced epidemiologist and practitioner.

Needless to say, there is always room to improve even the best textbook. Omissions from this textbook are few. In recent years, acts of terrorism and natural disasters have prompted health care facilities to develop disaster and epidemic preparedness plans. This new and time-consuming challenge for the infection-control community is mentioned all too briefly. In future editions, a chapter providing some practical guidance would be most welcome.

There is some overlap of information between chapters that could be more extensively cross-referenced; mechanisms of antimicrobial resistance and infection-control definitions are some examples of redundancy. In addition, there are only so many ways that infections can be clinically defined, transmitted, and prevented, even if they occur in different health care settings. However, when areas of controversy arise, discussion of a topic from multiple viewpoints is always welcome.

In summary, Hospital Infections is a most worthy successor to the previous 4 editions. This authoritative textbook will continue to educate newcomers and to provide advice to both experienced epidemiologists and practitioners as they anticipate new challenges in the ever-changing field of health care epidemiology and infection control.

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New Books Received
Barton LL, Friedman NR. The Neurological Manifestations of Pediatric Infectious Diseases and Immunodeficiency Syndromes. Totowa, NJ: Humana Press, 2008. 409