**Fraud and Misconduct in Biomedical Research**


This is the third edition of a book which was first published in 1993. The need for three editions in less than ten years highlights not only the importance of the topic but also the rapid developments in the field, particularly in the area of setting up appropriate national structures to deal with the problem. The chapters have been extensively revised and new chapters added since the last edition by eminent authors not only from the United Kingdom but also from other European countries and the United States. Topics cover such issues as what is fraud and misconduct in medical science, why do researchers venture into this area of deceit, how common is the problem, and how have various governments, national medical bodies, journal editors and the pharmaceutical industry responded to the problem. Chapters also discuss statistical and other techniques useful in detecting suspected fraud. Perhaps most importantly is a discussion on how to prevent fraud from occurring. It may be argued that South Africa is far from the pressures of ‘publish or perish’, but the increasing use of health professionals in South Africa to conduct pharmaceutical contract research should make all those concerned with maintaining the name of research in South Africa wary of dismissing the problem as being something that really does not concern us. In fact, the recent much-publicised infamous case of the oncologist in Johannesburg should make this book essential reading for all those who sit on ethics or research committees, or who are members of national structures governing the practice of medicine and research in this country. Although at R760, it may be felt that this is an expensive book for only 267 pages, it is a book that should be in every medical library in South Africa and should be prescribed reading for all who are studying bioethics in our universities. Finally it is a book whose chapters are well written and easy to read, thus making the content readily available to those who may not be well versed in medical jurisprudence or ethical discourse.

*John M Pettifor*

**Asbestos Blues**


Asbestosis mining and industries are in the spotlight in South Africa because of ongoing legal battles to obtain compensation for workers and others who have developed asbestosis or mesothelioma as a result of exposure to asbestos fibre. The appearance of the book *Asbestos Blues* by Jock McCulloch is therefore timely.

McCulloch explores the history of the rise and fall of the exploitation of asbestos in South Africa. His study draws on a comprehensive body of documents from government, industry and medical sources. It was also timely as he was able to interview a large number of important players and ordinary citizens with experience of the industry.

Europeans discovered asbestos in South Africa in the early 1800s and early production commenced in the latter part of the 19th century. The asbestos mining industry developed in different ways to gold mining in terms of the organisation of labour and regulation of the environment. It was also subject to the vicissitudes of the markets and had many ups and downs, although at its peak it employed tens of thousands of people.

The book provides a fascinating story of asbestos and its uses. But it is the part played in the abuse of people (including women and children) and the environment by government, big industry and others, that is thoroughly documented and makes chilling reading. It will be of particular value to those with an interest in legal, environmental and industrial health fields.

*JP van Niekerk*

**In Memoriam**

**John H Youngleson**

With great sadness I report the sudden death of John Henry Youngleson on 4 March 2003. John was born on 8 January 1926 in Harrismith, the son of a farmer. When he was a boy the family moved to Durban, and he was educated at Michaelhouse School where he excelled academically and at sport. During the school holidays Dr Alan Taylor, the superintendent of McCords Hospital (and later first dean of the Natal Medical School) invited him to help in the operating theatre, giving him his first taste of and stimulating his love for surgery.

He started his medical education at the University of Cape Town and was able to complete 2 years of study before he joined the South African Army. He served in North Africa and Italy until the end of World War II. He was a top rugby player and at the end of the war was selected to represent the Army as scrum-half on a tour of Europe. Sadly he had to rush back home...