

The Einstein College of Medicine is in an embarrassing fix, according to some e-mails passed to me by Yale University mathematician, Serge Lang. The rumpus concerns that irrepressible scourge of the HIV community, Peter Duesberg. A graduate student, Charles Weaver, read Duesberg's book *Inventing the AIDS Virus* and, convinced that Duesberg had something interesting to say, nominated him to be a student-invited speaker at the college.

Two other well-known scientists were proposed—namely, Harold Varmus, Director of the National Institutes of Health, and David Baltimore (of Imanishi-Kari fame). Votes were cast among members of the Graduate Student Council. Result: Baltimore 9 votes; Varmus 14 votes; Duesberg 20 votes. Weaver wrote to Duesberg, "You have won, and someone from Einstein will be contacting you soon. I hope we can arrange a date suitable for your presentation". A date was set—April 28, 1999—and Weaver informed Duesberg that "excitement is really starting to build around here". Duesberg made arrangements to visit New York with his wife and son.

Then disaster. On March 22, Weaver wrote to Duesberg saying that, "I am very embarrassed to inform you that Einstein is withdrawing its invitation to you as its "student-invited speaker". I cannot explain such ridiculous reasons via e-mail . . .". Duesberg was "a bit disappointed" but remained calm. Weaver went on to explain that "the faculty had their hand in on this decision. They scared the graduate student council into withdrawing the invitation". An e-mail from Robert Glover, one of the chairmen of the council, suggested that Einstein could not afford Duesberg's airfare. When Weaver offered to pay for Duesberg's visit himself, Glover came clean. ". . . The general consensus is that many people would be frankly offended by Dr Duesberg's visit."

Lang has sent this electronic exchange to *Science*, *Nature*, *New Scientist*, *Die Zeit*, and the *New York Review of Books* among many others. He comments that, "I regard as scandalous the continued ostracism of people and points of view which go against the orthodoxy on HIV. Shame on the Einstein College of Medicine faculty for participating in this ostracism or tolerating it . . . I object".

Do doctors care about books? Often only glancingly, I am afraid. In a mournful essay dedicated to the life of poet-cum-fearsome-critic Ian Hamilton (*Another Round at The Pillars*, Cargo Press), Julian Barnes writes that, "Nowadays a literary editor tends to be someone once caught with a hardback propped open in the office canteen, and constantly under pressure to turn literature into news stories". At most medical journals one might say that the "literary editor", if there is one, is a person commonly caught with a volume of the *Oxford Textbook of Medicine*, still in its wrapper, doubling as a doorstep. Pragmatic doctors have a leaning towards philistinism.

The mechanically laid out pages of many medical journals prove the point, although there are signs of encouraging change. We must begin, as one always must, with the journal against which all others are to be compared—the *New England Journal of Medicine*. After a weighty mass of the world's best medical research comes a section labelled, in modest italic type, *Book Reviews*. Two or three pieces follow, sandwiched between



correspondence and ponderings about, for example, the merits of how to deduct health insurance from US employees, the weaknesses of the Congressional Budget Office's philosophy on the matter, and intergovernmental fund transfers from Medicaid. One can see how readers might not quite make it to the carefully crafted but all too few literary pearls so lovingly nurtured by my old friend Robert Schwartz, the *Journal's* long-serving book-review editor.

The *Annals of Internal Medicine* is a journal that has gone from minor-league star to super-bowl giant. The mix of material is a must read for all intelligent physicians—but not if you are a lover of books. Inexplicably, unless you subscribe to the absurd ideology of evidence-based book reviews, the editors have adopted a structured format that dismembers the so-called "review" into "Field of medicine", "Format", "Audience", "Purpose", "Content", "Highlights", "Limitations", and "Related reading". The results produce intriguing but no-less irritating tautologies. A book entitled *The French Impulse in Nineteenth-Century American Medicine* might have inspired a wonderful narrative review full of allusion, metaphor, historical reminiscence, contemporary re-interpretation, and just sheer good writing. Instead, the review stalls with the blank categorisation, "History of Medicine". Doctors with less acute intellects, it is true, may have missed this connection. Just in case they still didn't get the point, the "Audience" section clears up any ambiguity: the book is for "Historians of Medicine". And the "Limitations"? "Of limited value to readers with no background in the history of medicine".

Other journals do have dedicated and obviously book-loving editors. Take the astonishingly delightful *Occupational and Environmental Medicine*, which is replete with fascinating vignettes concerning maladies among painters, the complaints of New Zealand welders, and—a recent favourite—"Health effects among workers in sewage treatment plants". Of eight books reviewed in the May, 1999, issue, RL Maynard, the journal's book-review editor, has written sparkling accounts of five of them himself. He obviously adores his job, and so he should.

JAMA, which has had a highly successful recent re-design, clearly likes books, but cannot escape the austere climate created by its Bostonian associate. The *BMJ's* review pages are also much improved, although they look suspiciously like a redraft of those seen in a friendly competitor.

However, the winner of the best book pages must go, present company necessarily being excluded, to the *Canadian Medical Association Journal*, and the editor of its review section—the Left Atrium—Anne Marie Todkill. She has created a cushioned corner for all those who desire the company of words and who wish to escape the dutiful brutalities of other worthy periodicals.

The death of a medical journal is always a sad event. And so we must say farewell to *Health Trends*, which undergoes autolysis with issue 4, volume 30. Michael Abrams, chairman of its editorial board, laments the lack of "articles we have wanted to publish but which alas are no longer being submitted to us either in quality or quantity enough to justify our continued publication. . . Adieu". Goodbye, indeed. You will be missed, even in Monte Carlo. RVB