Book reviews

Concordance in Medical Consultations: A Critical Review

By Kristian Pollock, Radcliffe Publishing Ltd, 2005, PB£24.95, 155pp. ISBN-10: 1-85775-841-2, ISBN-13: 9781857758412

This slim and well written book is a pleasure to read. Pollock held a Department of Health-funded Research Fellowship in Concordance from 1999 to 2004, and the book comes out of her experiences during this fellowship. She observed (and the data support this observation), a mismatch between the official welcome given to the concept of concordance, and the lived experience of patients. She found this mismatch perplexing, and the book is an exploration of the wider factors influencing clinical practice, and how these have interacted with, and in some cases subverted, the concept of concordance.

There are 10 chapters to the book. The first sketches the history of the concept of concordance, and its emergence from work on non-compliance. Pollock states that:

Concordance opens up the problem of non-compliance by explicitly recognising and valuing the patient perspective in medicine taking, rather than confining consideration of the issue to a narrow focus on medical values and rationality.... It is accepted that, in all ordinary circumstances, the final decision about treatment rests with the patient. The outcome of a concordant consultation may be that patient and practitioner disagree about the best course of action.

Chapters 2–9 examine the factors which Pollock believes have impacted on the concept of concordance and its implementation. These factors, which include the medical construction

of compliance, the lay perspective, the doctor–patient relationship, the social rules governing a medical consultation, evidence-based medicine, shared decision making, the expert patient policy and patient satisfaction, are clearly described. Overall, Pollock has written an excellent summary of current thinking in these areas, and how they impact on the principle of concordance. She argues that the medical profession has used approaches such as evidence-based medicine, to bolster its credibility, and hence re-convert ‘concordance’ back to ‘compliance’ – as how could any sensible person want to go against evidence? Her chapter on the doctor–patient relationship neatly summarizes the social and power relations which have formed and characterize the relationship, and how resistant this relationship is to the ‘seismic social, economic and professional changes’ that have occurred over the past few decades. She argues that both patients and professionals have an investment in maintaining the expected social order in medical consultations: patients feel dependent on their health professionals and are anxious to be seen as ‘good’ patients. Being a ‘good’ patient requires not challenging the doctor, abiding by the normative rules of the consultation, including only dealing with one problem per consultation, and, according to Pollock, maintaining a relative taciturnity (not interrupting, not directing the conversation). Equally, professionals are committed to maintaining the relationship, as part of their self-image as a competent and caring doctor. This joint desire to maintain and develop the relationship along fairly strict normative social rules mediates against overt disagreement, making it

hard for the patient to state a position which differs from the doctor's, and hence preventing a truly concordant consultation.

There are many reasons for buying and reading this book. Perhaps the most compelling in my mind is the enjoyment to be derived from the way Pollock presents her argument. It is a wonderfully lucid critique of much of medical practice. However, there are some disappointments. There is no mention of the legal framework which constrains clinical practice. Despite a social move towards 'patient-centred medicine', shared decision making and a more consumerist approach to medicine, the legal framework is still firmly paternalistic. This has an influence on practice, and the absence of discussion about this is unfortunate. I was also hoping for more attention to the role of the Internet and other new technologies – Pollock does include a section on this, late on in the book (p. 103), but it comes over as rather an afterthought. My other reservations were that some of the literature cited seemed out of date – for example in the chapter on shared decision making, Pollock cites work from the US suggesting that decision aids can reduce demand for expensive interventions (prostate surgery). These data have since been shown not to apply to the UK,¹ presumably because the UK has a much lower rate of prostate surgery than the US. These are relatively minor criticisms, and overall I recommend this book.

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 doi: 10.1111/j.1369-7625.2007.00448.x

Reference

- 1 Murray E, Davis H, Tai SS, Coulter A, Gray A, Haines A. Randomised controlled trial of an interactive multimedia decision aid on benign prostatic hypertrophy in primary care. *BMJ* 2001; **323**: 493–496.

The Self in Health and Illness Patients, Professionals and Narrative Identity

Edited by Frances Rapport and Paul Wainwright, Radcliffe Publishing Ltd, 2006. PB £24.95, 134 pp. ISBN-10: 1-84619-112-2, ISBN-13: 978-184619-112-1

It is difficult to write a book that can be read and appreciated by a multi-disciplinary audience, given their diverse conceptual languages. However, as someone who is familiar with the conceptual languages of Health Services Research, Sociology and Health Psychology, I found this book a good introduction to those, and other languages that come under the umbrella term of Social Science.

The book originated from a call for papers by the editors Frances Rapport and Paul Wainwright. They requested papers that focused on 'constructions of narrative selves' that would be collated and published together in an edition of the journal *Medical Humanities*. As the journal *Medical Humanities* is targeted at a diverse audience (doctors, students, artists, other health-care workers, university lecturers and professors), the resulting book succeeds in bringing together a broad spectrum of international social scientists, who have written about the self in relation to health and illness with respect to their own theoretical perspective.

The papers are diverse in that they focus on different clinical areas, which are viewed from different theoretical perspectives, and in addition, they are written from different personal view points. Authors include patients who have personal experience of the self in illness, and researchers who reflect on what it means to consider the self in relation to different illnesses (e.g. HIV, breast cancer etc.) and different roles (e.g. parent, professional and researcher).

The reflective accounts included in the book are insightful, in that they reflect upon the process of undertaking research, which is seldom presented in papers that are published in scientific journals. Elliot Mishler notes in his foreword that publishing this particular collection of papers