The anthrax letters: a medical detective story

Author: Leonard A. Cole
Publisher: The Joseph Henry Press, Washington, DC; 2003
ISBN: 0 309 08881 X; 280 pages; price: US$ 24.95

Leonard Cole’s book is one more in an increasingly long line of books which reflect the dramatic focusing of minds among politicians, the media and the public over the last decade on the putative use of biological agents for nasty intent, brought about by (or perhaps even partly engendering?) the plethora of bioterrorist hoaxes, threats and events characterizing that period and leading up to the “anthrax letter” events of September/October 2001 in the USA.

Books of this sort are unlikely ever to be literary classics; they are written in haste with a view to catching the market before that notoriously fickle entity, “public interest”, switches to the next subject of fear, concern, or anxiety. Thus, although their research into the subject matter generally cannot be faulted, they do seem to share a similar lack of that literary and editorial input of time and effort which, in a truly well-written book, results in a good story. Three things in particular strike this reviewer about these books. The first is a sameness of style; if you read three or four of them at the same time, or in

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close succession, they simply merge into one in your mind. The second is the invariable failure to sift out what is truly relevant to the central story; the authors appear to feel that every fact recorded while researching for the book and the name and description of every person interviewed or referred to must be included. The third is the struggle by the authors to explain the background science; often it seems they are really trying to explain it to themselves. The result is that the detail is redundant, inadequate or erroneous for readers with relevant scientific knowledge but too complex for the lay person.

Leonard Cole’s book is no exception in these respects. The storyline is interrupted throughout with countless biographical, historical or scientific deviations and explanations making it often hard work to read. Vast numbers of characters come and go throughout the book. As most of them make their brief appearance on the stage, one is treated to such information as the colour of their hair, what they were wearing at the time of interview, little actions they performed such as buying a bottle of water, or where they were educated, mostly contributing nothing to the real matter in hand. Conversely, one or two individuals get entire chapters devoted to them. Chapter 6, for example, is devoted to Dr D.A. Henderson, of smallpox eradication fame, and at least half the chapter, albeit a very interesting half, is about his exploits in this respect. The overall result is that the book is too long and meandering and the central theme loses impact. A chronological summary of the events central to the book would have been such a boon; it was almost impossible to keep track of the order of events and distracting trying to do so.

For those seriously interested in the “anthrax letter” events, there is interesting and genuinely informative reading, but it has to be ferreted out. The humanity of the individuals who contracted anthrax is effectively brought home and what they felt and how they and those around them reacted are enlighteningly described, mostly between pages 46 and 105. Pages 157 to 168 describe the dreadful and almost unbelievable experiences of the victims of earlier anthrax hoaxes at the hands of inadequately informed and improperly trained HAZMAT responders in essentially uncoordinated response scenarios. The “whodunit” chapter covers the range of viewpoints on this subject effectively. ■

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**Terrorism and public health: a balanced approach to strengthening systems and protecting people**

Editors: Barry S Levy & Victor W Sidel
Publisher: New York: Oxford University Press; 2002
ISBN: 0-19515-834-2; hardback; 408 pages; price US$ 49.95

This book accomplishes its primary task: to provide a comprehensive review of lessons learned from September 11 and the dissemination of anthrax and their aftermath. However, from a global public health perspective, it misses a major opportunity. It says surprisingly little about the origins of terrorism and its roots in poverty, alienation, and cultural and religious differences. This omission will unfortunately reduce the appeal of the book for general public health audiences outside the USA. In contrast, the specialist audience concerned with responses to terrorist attacks will find the book invaluable, in so far as lessons from the USA have a more general applicability — and many of them do.

Two other major omissions might be rectified in a second edition. First, there could be a more in-depth exploration of the reasons for the weak state of public health practice in the USA (and many other relatively wealthy countries), how it can be strengthened to respond to the full range of public health challenges, and how this weakness affected the responses to September 11. Second, there could be a discussion of what are the prospects that the new resources to fight terrorism will contribute to a strengthening of public health practice in the USA and elsewhere. ■

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