specific information activity” (p. 19). The authors cover a wide range of topics, from designing workstations to designing computer screens, from the use of computers in school libraries to the development and use of community Free-Nets. What they have in common is a forward-looking commitment to information access and management or, to cite one of Lucier’s guiding principles, “entrepreneurial responsiveness to environmental changes, opportunities, and emerging information technologies” (p. 15).

The collection balances theory and practice. Ruth Small, an educator, reviews current learning theory as it applies to the design of computer-mediated instruction. Joe Rader, a librarian, describes a successful computer-based training program for library staff. Ronnie Peters, a graphic designer, points out the principles of good screen design. Virginia Tiefel et al., librarians, discuss the design of screens for the extended OPACS at their respective institutions.

There is something of interest in this volume for all librarians. As Katharina Klemperer, another contributor, points out,

While libraries still provide the same service they always have—access to information—the tools and skills are entirely different from those that were taught in library schools a decade ago. The volume and variety of electronic information resources, the increase in desktop computing power, and the pervasiveness of networks have combined to challenge the resources of information providers [p. 178].

As a midcareer practitioner, I found reading this book a convenient way to measure my own knowledge and skills. I learned a few things and was inspired to learn more. Anyone contemplating a career in librarianship, or “informationship,” as a friend and colleague prefers to call it, would benefit from this sampling of what some librarians do now and many more will be doing soon. Other collections—yearbooks, annual reviews, conference proceedings—might serve the same purpose. The book is well written and edited. It combines scholarship and practice and could be used as a reader in an introductory course in library science.

All of the reasons to read this book have to do with it as a snapshot composite of very current practice. My chief criticism is that the book and review publishing process delays availability and reader awareness almost beyond the point of usefulness. The clinic was held in April 1992. The copyright date is 1993. MLA received the book for review in July 1993. This review was submitted in October, and it is scheduled for publication in April 1994. By publishing standards, this project was probably on the fast track, but, two years after the fact, when you read this, the snapshot is bound to be a little dated. It is ironic that the dissemination of timely material about designing new information systems depends on what Lucier points out as “the limitations of this prevailing model for scientific communication” (p. 7).

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Since the first published report appeared in the early 1980s, the body of literature on HIV and AIDS has grown dramatically. As more information was discovered and then disseminated, a new language developed to describe the myriad of medical, legal, social, psychological, and religious aspects of the pandemic. It is therefore not surprising to see the publication of the first dictionary to focus on the topic of AIDS. Author Jeffrey Huber has done an admirable job of compiling a guide to some of the most common terms to be encountered, but he has also acknowledged in the preface the importance of current information available from AIDS service providers.

The format of the work is alphabetical, with terms highlighted in bold print, and brief, concise entries. No illustrations or appendices accompany the text. Key words, names, and phrases are included with ample cross-references from abbreviations and acronyms. The most notable inclusions are the significant number of slang or alternative terms and concepts such as “freebasing,” “buyer’s group,” “gay plague,” and “rimming.” Although the author has stated that the entries were written for a broad readership, the definitions for most medical and scientific terms still incorporate technical writing more appropriate for a professional audience than for the general public.

Information on individuals is sketchy and inconsistent. Factual data such as birth date, education, and position is included in some entries, but not all. One or two sentences describe the person’s significance in the AIDS arena. However, the addresses (and indeed the inclusion of names in general) will prove to quickly outdate the dictionary. The information provided on organizations is similar to that found in other directories, but the coverage of specialty AIDS organizations and projects is not as comprehensive. For example, there are no entries for the Physicians As-
sociation for AIDS Care or Body Positive.

Overall, the dictionary is recommended as a useful addition to academic health sciences libraries and other libraries that have collections focusing on AIDS or that serve populations with special interests in this topic. The true value of the work is that it represents a significant recognition of the new vernacular spawned by the HIV/AIDS pandemic.

With increased attention on the AIDS pandemic, the need for information on available resources has also grown. The AIDS Directory is a direct result of the burgeoning information about HIV- and AIDS-related institutional and educational organizations. The preface notes that there are more than 20,000 organizations serving the AIDS community, and the directory focuses on an estimated 1,500 of these. Criteria for inclusion in the work is not clear from the prefatory remarks, but the compilers indicate that the work was written to provide “comprehensive coverage” of state health education departments, national organizations, hospitals and medical centers involved in research initiatives, regional service organizations, and hospices.

Appendix information is provided at the front rather than the back of the text and includes such items as federal programs that fund AIDS-related research and services, current congressional contacts, AIDS hot lines, and a selective bibliography of other print resources.

Almost 450 pages are devoted to profiles of organizations, arranged alphabetically with each entry including names of key personnel, addresses and phone numbers, mission statements, a classification of organization type, services provided, focus areas, and publications. Additional information is also included in notes to the profile.

Nearly 300 pages of the directory constitute the index section. There are indexes to organizations by location, type, services, focus groups or areas, names of officers and key staff, and type of support received. Additional indexes identify grant-making organizations and recipients of funding. The “Master Index” is the only referral point to specific pages. As is often noted in reviews, this text would benefit greatly from a combined index.

The information in The AIDS Directory is not new or even unique. It would take a Herculean effort to keep such a directory up to date. Many print and online resources that will do the same job are currently available at low cost. The work does not even include (or acknowledge) the existence of online resources for current information. The publishers should be advised to be wary of their claims of comprehensiveness, and librarians should not fall prey to the slick advertising. With a high price tag of $250.00, this text is only recommended for those libraries that purport to have comprehensive collections on HIV/AIDS literature.

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This extravaganza of pathology presents a potpourri of diseases, from AIDS to yellow fever. It represents a history of human susceptibility to a variety of bacteria, viruses, inflammatory processes, and invasions by hostile elements. Covering virtually the span of recorded knowledge, the book is arranged in major divisions consist-

ing of “Medicine and Disease: an Overview,” “Changing Concepts of Health and Disease,” “Medical Specialties and Disease Prevention,” “Measuring Health,” “The History of Human Disease in the World Outside Asia,” “The History of Human Disease in Asia,” “The Geography of Human Disease,” and “Major Human Diseases Past and Present.” One has to marvel that it has taken only eight years since the start of the Cambridge History and Geography of Human Disease Project to collect the 4,000 pages of manuscript material from 160 contributors and edit it to a compact volume of less than one-third as many pages.

Written by social and medical scientists, each contribution was peer reviewed by one or more members of a board of specialists, with the overall purpose of providing an understandable and accessible history of disease. Similar in purpose to the New Sydenham Society’s Handbook of Geographical and Historical Pathology published from 1883 to 1886, this global compendium of humanity’s encounters with disease depicts the social, political, economic, legal, and ethical medical considerations of this process.

Disease is discussed within a broad context, developing the thesis that “...pathogens have wielded (and are wielding) a similar dramatic and decided power over the history of all peoples everywhere throughout the whole of mankind’s stay on the planet” (Preface). Because the less-developed nations of the world mirror the more historical causes of illness and death, these areas receive greater emphasis. Modern countries are discussed in terms of disease entities that have generally replaced the historical agents.

Some contributions span centuries and survey broad health-related topics. The reference librarian would be well advised to become familiar with the section.