

that puts its author and the young rebels on different planes, between which lies the generation gap.

The reviewer sees as the other kind of weakness in Etzioni's major theoretical stance the use of basic concepts and the formulating of propositions that are extraordinarily difficult to operationalize and test. This kind of problem has preoccupied generations of social scientists in their efforts to do social science with the very abstract and so-called grand theories of such theorists as Marx, Freud, and, to take a more recent example, Parsons. Yet such problems provide the grist of the intellectual's mill, and if the work is sufficiently compelling or engaging the necessary scientific effort may follow and provide the breakthrough for the master's thought to be made useful rather than simply provocative. It may be, despite Etzioni's wordy and often complicated prose, that such will happen with this work. Anyone who wants to know what kind of pursuit many social scientists are likely to be engaged in over the next decade or so, at least, should read *The Active Society*.

ROBERT E. AGGER

*Department of Political Science,  
McMaster University,  
Hamilton, Ontario, Canada*

## Medical State of the Nation

**Currents in American Medicine.** A Developmental View of Medical Care and Education. JULIUS B. RICHMOND. Harvard University Press, Cambridge, Mass., 1969. xviii + 142 pp., illus. \$5.50. Commonwealth Fund Book.

This view of the state of the nation in medical affairs is a clinician's judgment on the health of American medicine. The author is neither historian nor sociologist, but he is an extremely able physician who has been at the eye of the storms in medical education and medical care as teacher, as medical school administrator, and most recently as director of Project Head Start and for Health Affairs at the Office of Economic Opportunity. As a participant for many years in the teaching institutes of the Association of American Medical Colleges, he has wrestled with the conceptual problems of the day in medical education and has attempted to conquer them. As a government administrator, he has had responsibility for one of the most significant efforts to implement change.

The aim of his book is "to attempt a historical analysis of evolution of medical services, education, and research in the United States since 1900 and, on the basis of this analysis, to raise questions for the future development of medicine as an institution in our society." There have been a number of such efforts, but this is certainly one of the best. The essay is consistently both objective and optimistic as it reviews the "educational revolution" from 1900 to 1940, the "scientific revolution" of 1940-1960, and the "consumer revolution" of 1960-1968. Particularly cogent is the discussion of the impact of the Flexner Report (published in 1910) and the Report of the Committee on the Costs of Medical Care (published in 1932); the former had great and far-reaching effects that are still felt on medical education, whereas the latter, as the author points out, has yet to be implemented today. He documents the good and the bad results of the massive federal commitment to medical research since World War II and suggests, quite logically, that the consequence of leaving the consumer out of the benefits of government spending enjoyed by practitioners, medical schools, and medical researchers is the current demand that the fruits of this effort be now made immediately available to the people, particularly to the poor. The analysis of legislative efforts to accomplish this end in recent years is particularly well done.

In looking to the future the author-clinician proclaims a favorable prognosis for further improvement in American medicine. He points out that the next new emphasis will very likely be on preventive health services. He has reservations, however, about the role of the teaching medical centers in this phase, and believes that community-based programs may hold the answer, if they are provided with institutional sponsorship. This is a curious view for a medical dean to hold at a time when the greatest difficulty is actually the lack of leadership in the delivery of health services. If the medical schools do not take the responsibility, it will inevitably be seized by others, possibly to the detriment of professional standards. The author does look upon some current problems with alarm, such as rising costs of care and overutilization of services, but he places faith in solutions by a so far nonexistent and nebulously conceived Presidential Council of Health Advisors.

As a whole, though, the essay is a

useful analysis by an enlightened and perceptive participant. If it fails at all, and it does not in terms of its stated goals, it is by neglecting the pressing crisis of population growth, the shortages in health manpower, the inequities of the nonsystem of health care, the growing expense of an irrational distribution of services, and the lack of leadership from the medical profession. Perhaps there are no satisfactory answers to these problems today, and the next generation will have to find new approaches.

GEORGE G. READER

*New York Hospital-Cornell  
Medical Center, New York City*

## Proteolytic Enzymes

**Natural Proteinase Inhibitors.** ROSEMARIE VOGEL, IVAR TRAUTSCHOLD, and EUGEN WERLE. Translated from the German edition (Stuttgart, 1966) by Express Translation Service. Academic Press, New York, 1968. xiv + 162 pp., illus. \$10.

Interest in protein molecules that are capable of specifically combining with proteolytic enzymes to form inactive strong complexes is at present quite high. It stems in part from the recognition that important biological functions other than digestion and catabolism are carried out by proteolytic enzymes. Among these functions is the turning on (and off) of various enzyme and hormone systems and thus the control of many biological activities. Protein inhibitors can in turn control the controllers. Since the study of control is the height of scientific fashion, the study of protease inhibitors has become fashionable.

The second impetus for the study of protease inhibitors stems from the great advances of techniques in protein chemistry, which now allow us to ask and occasionally answer detailed questions about the nature of the enzyme-inhibitor interaction. Until quite recently this was not a profitable endeavor, but present techniques of isolation, separation, sequence study, protein modification, fast kinetic analysis, and x-ray crystallography raise realistic hopes of sizable success. Since the association of proteases with their protein inhibitors is one of the simplest and most specific protein-protein association phenomena, a rather large effort to achieve this success appears to be worthwhile.

These considerations have spawned a huge literature and have interested