Middle Articles

CONTEMPORARY THEMES

Are Medical Books too Dear?

Wanted, a Change in Attitudes

From Dr. David Pyke, Consultant Physician, King's College Hospital, London

In a recent issue of the *British Medical Journal* (21 June) the authors of the first three book notices comment on the prices of the books they are reviewing. Professor R. A. McCance says of *Carbohydrate Metabolism and Its Disorders* (price of two volumes £11 10s. 0d.), "the price will convince most of them (the readers) that it is best read in a library." Dr. G. W. Dolphin comments on *Clinical Radiation Pathology* (£19 2s. 6d.), "the cost of the book may limit it to libraries," and Mr. D. L. Morrison on *Septic Abortion*, a volume of 153 pages published at £5, "the price, however, seems forbidding—similar, albeit less detailed, information can be obtained from general textbooks costing only a little more." The price of the other three medical books reviewed in the same issue—£2 14s. 0d., £11 0s. 0d., and \$22—was not remarked upon.

A few weeks earlier Professor L. J. Witts, an experienced reviewer and judge of books, wrote of the latest edition of Copeman's *Textbook of the Rheumatic Diseases* (959 pages, £10 10s. 0d.), "if the book is not to price itself off the market, a cheaper paper and a grouping of illustrations may become necessary." Other reviewers have also commented on the cost of books in the last few weeks. Mr. Peter Schurr on *Operative Neurosurgery* (269 pages, £18 0s. 0d.) and Dr. F. J. C. Roe on *Methods in Cancer Research* (673 pages, £15 17s. 4d.). In other reviews no mention of cost was made, though it might have been expected; *An Atlas of Roentgenographic Positions* (878 pages, £20 18s. 6d.) and *Functions of the Nervous System* (671 pages, £18 0s. 0d.).

These are examples taken from book reviews in this journal appearing between 12 April and 21 June, 11 issues containing 56 reviews, excluding popular and non-technical books. Of 100 consecutive books listed under the title "Books Received" 12 cost over £10 0s. 0d.

In one case—Lord Platt reviewing *A Handbook for Research in General Practice*—the reviewer comments on the book's modest price.

Some books are very expensive. In H. K. Lewis's catalogue for 1969 there are 12 books costing over £20 0s. 0d. for a single volume, and several others exceed £20 0s. 0d., but are published in two or more volumes.

The subject of the books seems to have little to do with their price; of the 12 £20 volumes no two are on the same subject. Apart from such obvious factors as number and type of illustrations, the country of publication is important—American books being generally more expensive than European. Another national difference is that American books seldom show their price, British books nearly always do. The publisher seems to be an even more important factor in deciding the price of the book. In the Excerpta Medica list there are 11 books over £20 0s. 0d., and the price of books from Charles C. Thomas, Academic Press, and Pergamon Press are seldom low.

The range and type of medical books are great. Some are textbooks for undergraduates, and large sales can be expected;

others are detailed atlases with only specialist interest. Some books are expected to remain in date for a relatively long time (though that time is becoming shorter in most subjects), whereas others become out of date before they are published.

To judge from the medical books sent to the *B.M.J.* for review—about 3,500 a year—it seems that textbooks are relatively few. Many are highly specialized and about 10% are reports of conferences. Conferences are now very numerous and becoming more so. There is no reason to think their number will decline; though some conferences now limit their membership, it will probably not affect the publication of their proceedings. As new subjects develop or are created new international associations are formed and their members confer. It still seems to be common practice to publish conference proceedings. This is a complicated and frustrating task, as many people must now know. Contributors are late in submitting their texts, manuscripts contain errors, authors want to make retrospective changes, the language may be strange to the author and the text may show it. There are difficulties enough without the much greater troubles of editing discussion. For all these reasons, presumably, the publication of conference proceedings has come to be handed over to firms specializing in this type of work, Excerpta Medica and Academic Press in particular.

I am not entirely happy about this. To explain why I will quote the example of the recent publication of the proceedings of the Sixth Congress of the International Diabetes Federation by Excerpta Medica, under the title *Diabetes* (the corresponding volume for the fifth congress three years earlier was given the deceptively authoritative title, *On the Nature and Treatment of Diabetes*). The congress was held from 30 July to 4 August 1967, the proceedings appeared in January 1969, 17 months later. They are far from complete; many papers are not included (some will appear in a supplementary volume); some papers are printed in full, others merely as abstracts; and there is no report of discussions. The value of this book is thus limited by the delay in its appearance and by its unevenness. Furthermore, much of the work reported at the congress has now been published elsewhere (if it had not been before the meeting) and in more detail. The production is lavish—indeed too lavish; the paper is heavy and so shiny as to be dazzling. The cost of this volume is £22 0s. 0d.

Now if this is the price set by an organization which describes itself as non-profit-making it means that something must be done or we will not be able to read the proceedings of conferences in future. For at this sort of cost the publishers should be pricing themselves out of the market. I say "should" because libraries ought to be warned not to buy conference proceedings at this price. If libraries stand firm—and this must apply mainly to American libraries, since most others have to be selective in their buying—publishers will turn to new methods of production and then prices will come down. At present one has an uneasy feeling that some medical publishers may not mind that few individuals buy their books, calculating that libraries must. If so, it is time they were proved wrong.

There seem to be two groups of publishers ; a small group whose lists include books which, as far as one can judge, must have very little appeal to individual buyers because of high price, late publication, or poor content (translations of inferior works, for example). The financial success of Pergamon Press, now sold to an American firm, was attributed in a "Profile" in the *Observer* (22 June) to Mr. Maxwell realizing "that the customers for his learned journals and abstruse collections of abstracts had to have them and were willing to pay high prices." If these are the terms on which we must deal with medical publishers, both as authors and as purchasers, we shall have to change our attitudes. Fortunately such publishers are few, but they exist.

The second, much larger, group of publishers consists of those whose titles and prices are reasonable and whose products might be expected to sell on their merits. There may be other criticisms to be made of these publishers, but not that they do not give fair value.

Can anything be done to reduce prices and increase sales ? Simpler printing processes, such as photo-reproduction, lighter

paper, and soft covers might help. With books which have soft-cover and hard-cover editions the soft-cover version is often 30 to 50% cheaper. This large difference can hardly be due only to the material in the binding. If it is due to the publishers' calculation of a greater turnover might this not be a pointer to the way to reduce book prices, by attempting to increase sales by producing volumes as cheaply as possible ? Since many books become out of date quickly it would be an advantage to have the chance to buy them for lower prices in a form which might not last as long as most volumes do at present. From talking to colleagues in hospital and in general practice I have the impression that they buy relatively few books and that they represent an undeveloped market. The great need and difficulty in medicine is to keep up to date, even in one's own specialty ; hence the success of lectures, courses, and conferences such as those on advanced medicine at the Royal College of Physicians. There is a corresponding, even greater, need for publications of the same kind. But they will not succeed at a high price.

DAVID PYKE.

Outpricing the Private Market

From Dr. C. W. H. Havard, Consultant Physician, Royal Northern Hospitals and Royal Free Group of Hospitals, London, and Medical Tutor, St. Bartholomew's Hospital, London

In December 1968 the rise in book prices prompted a Parliamentary question to the President of the Board of Trade asking him whether he would refer rises in prices of books to the prices and incomes board. The problem is therefore not confined to medical books ; thirty years ago the price of a standard Penguin was sixpence, and today the equivalent price is about five shillings—a tenfold increase. We are all aware of the rise in costs of paper, printing, and labour, but these have risen only fourfold over the same period. The publisher claims that progressive under-pricing over a period of years with its associated lack of income is responsible.

Medical books do pose special problems, as they cater for a limited public. The numbers of copies of a first edition will rarely exceed 3,000, so that obviously the cost of a 600-page book of specialist interest will differ enormously from a 600-page book of general interest. Nevertheless, there is a real feeling that a corruption of the profit motive has led to abuse in medical publishing and is responsible for the inflated prices of medical books. Though publishers make a handsome profit they do in general provide value for money. A minority, however, are unscrupulous and fail to abide by the general standards, thereby damaging the reputation of British publishing. One of the iniquitous practices is to charge libraries a fee three to four times that demanded of an individual subscriber for an essential journal.

Because medical books outprice the private market, and so soon become obsolete, individual ownership dwindles while the demand from medical libraries grows. The publisher can rely on an assured market from libraries in Britain, and more particularly overseas, and content himself with a safe profit and quick return. There is thus little incentive to increase the circulation and thereby reduce costs or to lower the book price by producing it in paperback form. The libraries have come to be regarded as an endless source of revenue, and so the vicious spiral is allowed to continue. Libraries operate on fixed budgets which are subject to close scrutiny. They are committed to standing orders for essential periodicals, and the steady increase in these subscriptions leaves less funds available for the purchase of books. The time is approaching when the

library will prove incapable of absorbing further increases and unwilling to encourage the duplication and publication of monographs of limited literary and scientific merit.

The person who derives least financial benefit from the rise in prices of books is the author. An independent survey carried out by Research Services Ltd. in 1966 showed that only one author in six earns more than £1,000 a year from his books, one in ten between £500 and £1,000, and the remainder very much less, many only thirty shillings a week. This group must surely include most of the authors of medical books.

It is now 18 years since the novelist John Brophy proposed a scheme whereby each reader would pay a fee of one penny for every volume borrowed from a public library, and that this fee should go to the author. Numerous public lending right schemes have been proposed since but have come to nothing. Michael Holroyd—writing in *The Times* earlier this year—implored the Government to implement some such scheme as a matter of urgency.

Unlike authors in general, the specialist body of medical writers seems to proliferate. Publishers seek authors. The medical profession do not depend on their writing for their livelihood. They are tempted to accept the invitation to write (even if they should not) because they welcome the stimulus to master their subject and because they hope it may give them recognition in their profession.

One of the disconcerting aspects of contemporary medicine is that the aspiring consultant is measured more by the quantity than by the quality of his output. For many years medical journals have been flooded with indifferent work because of the recognized choice of "publish or perish." This model of mediocrity has now been extended to include medical books, motivated by the incentive of "publish and profit." All publishers and too many authors are content with the status quo. The purpose of books, however, is that they should be read and the reader is barely considered. For him the poor medical book costs as much as or more than the good one.

WILLIAM HAVARD.