

WEAKNESSES Loosely organized; sometimes lacks supporting data
AUDIENCE General

Child's Play offers a thought-provoking message about the importance of natural outdoor play to the well-being of children, families, and communities. The author, a well-known Canadian Olympic rower, documents reductions in activity levels in the last generation, associated with problems of increasing childhood obesity and stress levels. Laumann provides inspiring suggestions for recapturing natural playfulness in all our environments. Written in a friendly first-person narrative style and directed at a general audience, the book is easy to read. Integrating her own observations and interviews with researchers and innovators, Laumann addresses modern challenges, such as environmental issues, pressured lifestyles, parental expectations, and neighbourhood fearfulness, and presents a practical model for promoting active, healthy, creative, well-adapted children with good peacemaking skills.

The main weakness of this book results partly from the conversational style. The book is loosely organized, and at times it lacks the supportive data that would make the author's case more effective. Information is buried in her narrative reports of personal interviews with experts. The addition of a few referenced summary tables could better motivate the educated parent most likely to read this book. This could include a systematic listing of potential benefits for motor and perceptual development, future bone and cardiovascular health, weight management, academic achievement, sleep quality, social problem solving, enhancing creativity, stress reduction, and other specific areas. She does touch upon recent research documenting the benefits of physical education and, specifically, contact with the world of nature on emotional well-being, cognition, and academic performance. Parents and professionals interested in more on this topic might also want to read *Last Child in the Woods: Saving our Children from Nature-Deficit Disorder* by Richard Louv (Algonquin Books, 2005). Meanwhile, Laumann's book makes a good start in a much needed campaign for preserving child's play.

—E. Jane Garland MD FRCPC



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Healthy at 100

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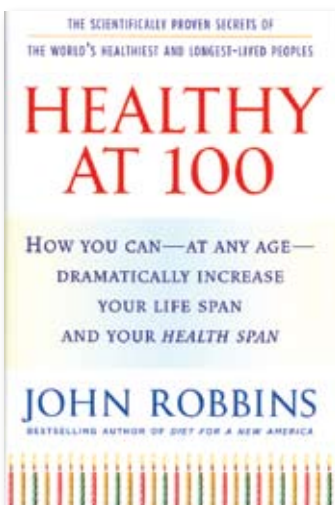
PUBLISHED 2006/384 pp/\$34.95

OVERALL RATING Poor

STRENGTHS Author has interesting Canadian connections

WEAKNESSES Information from studies is presented in a selective fashion

AUDIENCE General



This book is intended to inform the public of the “scientifically proven secrets of the world’s healthiest and longest-living peoples”—inhabitants of Abkhasia, Vilcabamba, Hunza, and Okinawa. In addition to the frugal diet and vigorous exercise of these remote peoples, Robbins hypothesizes that personal relationships, love, and interconnectivity additionally increase lifespan and health.

The author has some interesting Canadian connections. Forswearing any gain from the success of his father's company, the Baskin-Robbins ice cream empire, he lived for 10 years off the land on a gulf island in British Columbia teaching yoga and meditation. Later he became a successful guru of the links between the environment, diet, and health.

The book is characteristic of its genre. Information from studies is presented in a selective fashion. For example, the author provides reference to the study that indicates that Okinawans have fewer than half as many hip fractures as North Americans. No mention is made that the study also reports an even lower incidence among the Japanese on the mainland (in Niigata). This leads to questions as to the putative contribution of the distinctive lifestyle in Okinawa. In addition, comparisons are consistently presented as the percentage rather than the absolute differences between groups (a favourite

technique of the pharmaceutical industry). Thus, Okinawans are reported to have half the incidence of osteoporosis of North Americans. The facts provided in the reference (and not the book) are that the percent probabilities of hip fracture per woman are as follows: Japanese in Okinawa 10.6%, Japanese in Niigata 5.1%, and Caucasians in the United States 19.1%. For men the likelihood

is 4.1% in Okinawa, 2.2% in Niigata, and 3.0% in Washington, DC. Stating incidences in percentage rather than in absolute differences is misleading.

The only reason to read the book is that your patients will read it.

—John Ruedy MDCM FRCPC LLD(Honorary)

Dr Ruedy is a Professor Emeritus of Pharmacology at Dalhousie University in Halifax, NS.

|Bulletin Board|

Give a day

One day can make a world of difference. World AIDS Day (December 1) has taken on a new dimension as health care workers across Canada donate a day's income to confront the AIDS pandemic.

Give a Day to World AIDS started on World AIDS Day, December 1, 2004, when a group of Toronto-area doctors responded to the AIDS pandemic by giving a day's income to the Stephen Lewis Foundation. In 2005, 8 hospitals were involved. Hundreds of Ontario health care workers donated a day's pay, giving \$100 000 to organizations caring for those affected by AIDS—notably the Stephen Lewis Foundation and Dignitas International. In 2006, the movement grew far beyond the health care sector as several large law firms became involved, along with businesses, teachers, and many others. More than \$530 000 was given to help those affected by AIDS.

The crisis of AIDS in the world is the story that will define our generation. A West African proverb says, "Silence, too, is speech." In light of the AIDS pandemic, Canadians cannot remain silent. Give a Day to World AIDS is one

way to raise our voices together. More information is available from www.giveaday.ca.

Caring for strokes

Did you know that any patient with suspected acute stroke should have their blood glucose checked immediately? Or that all patients with acute stroke should be given at least 160 mg of acetylsalicylic acid (by enteral tube or rectal suppository, if necessary) once intracranial hemorrhage has been ruled out by imaging?

The Canadian Stroke Strategy Best Practices and Standards Working Group is an arm-of-a-mammoth effort, incorporating the Canadian Stroke Network and the Heart and Stroke Foundation of Canada. This collaboration has recently resulted in the release of *Canadian Best Practice Recommendations for Stroke Care: 2006*; this document has been created using the highest standards of evidence-based medicine. It's available on-line from www.canadianstrokestrategy.ca or can be obtained in bound copy or on CD by contacting Laurie Cameron at laurie@canadianstrokenetwork.ca.