Is it still nowadays important writing books in Italy on the history of asbestos twenty-seven years after the entry into force of the national law n. 257 that banned the production, trade and consumption of this material? Is it still relevant to describe the impact of asbestos use on health and environment considering the growing awareness on the risks of asbestos exposure among experts and in the population?

The reading of this book corroborates the notion that the answer to these questions is positive for at least two reasons. First, the book is a primary source of information, data and witnesses on asbestos use in the city of Brescia and its Province, which were not available until today in the literature, including the scientific literature. Second, the book is written with a narrative style that is accessible to a broad readership including experts of the topic and non-expert readers. The narrative accompanies the reader to know the stories of the numerous workers exposed to asbestos in that territory and, at the same time, to gain access to information and data from a text that assumes the true characteristics of an essay.

The book provides an historical perspective, retracing most of the industrial development in the area at study, and merges it with the professional perspective of the Author who worked for more than thirty years as an occupational physician in the Prevention and Safety Service of the Brescia Local Health Authority, dealing with asbestos risks and asbestos-related diseases. He was responsible for the Mesothelioma Registry of the Province of Brescia. Hence his knowledge of risk and asbestos-related diseases, his familiarity with many stories of unaware asbestos ex-exposed workers and his ability to share the suffering with sick people.

The industrial development of the Brescia Province has been characterized by the simultaneous presence in the territory of companies manufacturing asbestos-cement products, friction materials (brakes and clutches) and asbestos gaskets. Nonetheless, there was much more in that period. The raw asbestos arrived in massive quantities at these industrial plants from Italian mines and from overseas in jute sacks: in the mid-80s around 200,000 sacks per year, 50 kg each (p. 123). These sacks were then recycled in special factories where predominantly unskilled female workers were employed, so that the material containing asbestos could be re-packaged for use in agriculture and zootechnics. The extremely high asbestos risk exposure and the consequent impact of asbestos-related diseases, such as asbestosis and since 1990 mesothelioma, is documented in the book through reports of health professionals operating in the prevention services, by results of epidemiological studies, and witnesses of workers who described unsafe working conditions and the lack of any protection from asbestos dust.

The book also documents the presence of textile factories in the Brescia territory where exposure to asbestos fibers occurred in cotton spinning, weaving, hosiery and silk spinning, in the production of felts as well as in the production of nets and dry cleaners. Moreover, the book contains impressive images, which integrate the technical documentation and the narrative.

One of the most important messages of the book has to do with the need of a high quality standard in the investigation of asbestos exposure and health effects. In the early stage of his activity, the Author was impressed by the occurrence of asbestos-related disease in occupational (later, also in environmental) contexts where environmental and health data were quite difficult to link. This could be due to either actual lack, or scarcity, of data, or by insufficient communication between experts from different disciplinary backgrounds. Typically, clinicians were trained for diagnosing and treating mesothelioma, but were not able to detect the etiological role of the work environment, while occupational physicians were knowledgeable about asbestos exposure circumstances, but often had no access to patients’ medical records, especially for retired subjects. The appreciation of these crucial issues drove the Author to build a system of epidemiological surveillance of mesothelioma in Brescia Province by creating a multidisciplinary team including pathologists, pneumologists, thoracic surgeons, industrial hygienists and occupational physicians who operated in an integrated way. This approach proved to be valid, as shown by a sequence of publications that appeared in the international scientific literature, that are quoted in the rich bibliography of the book. The Brescia Province experience has strongly contributed to the Lombardy Region Mesothelioma Registry and the Italian National Mesothelioma Registry, and appears now to have the potential for cooperating at the international level with scientists and public health authorities in countries were the use of asbestos has not yet been prohibited.

The Author proposes a reflection on the preventable death burden and suffering despite the well-known as-
bestos risk and health-related impact for exposed workers, their families and the general population. This is evident from reading the title of the book. The Author highlights the need for justice of the asbestos victims and their families, who are forced to experience long lasting judicial trials in the Italian Courts. In this perspective, the Author solicits a reflection by both experts and non-expert readers on the relationship between science and society as well as on the responsibility and ethics of those who play a role in public health prevention and population health protection. This book is a valuable contribution and a best practice on how to build a common language between experts and citizens on public health issues.

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This nice essay is dedicated to health-care professionals: individuals who help people suffering from chronic stress conditions and/or pathologies in which stress is involved as the worsening or triggering cause.

In the rather original cultural framework of the Authors, the book is about health workers desiring to overcome the impasse of cure reductionism, in order to enter the flow of connections between physiological systems and organs, to monitor the “relapse therapy” effects in favour of well-being and restoration of each individual “regenerative capabilities”.

Overall, the text was also designed for teachers and parents who deal with the various developmental stages (sensu Jean Piaget) of human ontology, while attempting to understand what actually happens to support the transformative process rather than simply and passively suffer it. It should be emphasized that stress remains a crucial factor for its repercussions in the future of “personal health”, especially in three moments during the course of individual prenatal life existence: in perinatal life, the first four postnatal years and during adolescence.

Authors therefore hope that this volume will be (eventually?) accepted and read by all those who want to understand the “red nature” of the human stress, while disentangling the mechanisms of the human body and the potential of leading others through change, in an historical era characterized by ultra-rapid economic, social and cultural transformations.

According to them, presently Public Health is facing a time of crisis due to three main courses:

i) inability to cure some diseases, despite the high possibility of treating them, with an increase in the prevalence of the pathology and the care burden, leading to “intoxication” of treatment and access routes to services; ii) accumulation of unfulfilled expectations from the citizenship, accustomed to having fast answers and solutions to overt, and not always “curable”, pathologies; iii) lack of increase in investment capacity and responsibility for health and lifestyles, which leads to a net and progressive alteration in the relationship between citizen and service operators, also leading to aggression episode, especially when mutual discomfort is neglected.

They underline that difficulty in implementing healthy lifestyles in a rapidly evolving society renders families and individual situations precarious. This in turn leads to a radical change in the working scenario and in unprecedented social networks, a destabilization of habits and a progressive sense of ineffectiveness in coping with important steps in one’s life. In this should reside the basis of the subjective perception of stress and of the consequent sequence of metabolic, nervous and endocrine deregulation phenomena.

In their perspective, such aspect is getting even more damaging to health workers, wagging their transmission of a sometimes and somehow inconsistent image to people who are looking for a professional answer. It is a matter of recovering professional dignity by handling complexity while integrating new knowledge on these issues with current protocols. Unfortunately the protocols are often a guarantee of professional legitimacy and transparency towards the “client”, but if they are not subject to continuous updating they could in some cases become limiting in the therapeutic result, above all for the globalized information that attacks the more and more hyper-connected citizen and becomes faster than the actual updating of clinical procedures.

Furthermore, authors state that operators need to be aware and willing to become reference figures able to act as an example of efficacy. They should activate context-depending coping strategies, which are the most requested mode by the personnel involved in helping relationships. It is crucial to share the updated situation, to work in team and to know each single individual own energy level just to guide her/his in really managing her/his limits.

The crucial coping response absolutely depends on the metabolic energy level the particular situation requires. It is also based on the individual and social network availability in supporting the particular “stress load”. Wherever possible, it is therefore necessary to identify some fixed points determining a periodic “maintenance of the body”, with particular attention to sleep, to activity and rest as well as hydration and feeding rhythms. In any case, there’s a high toleration of exceeding limits for important purposes in the presence
of strong and extended social and emotional networks.

According to the authors, yet in a quite original perspective, currently the therapist finds herself/himself crushed between procedures that sometimes force strict adherence to specific protocols, but she/he herself/himself expresses doubts about their real effectiveness. Empathic resonance therefore, instead of transmitting motivation seems to become a hidden factor of doubt that fuels a dysfunctional therapeutic relationship.

The coping mechanism that an exhausted individual has to act to face a very hard duty and his/her (possibly) ineffectual efforts to copy with a given problem, makes this person particularly emotional and detached.

An exhausted operator obviously may get sick, is demotivated while arguing more easily. According to the authors’ views, this is the result of body coping with dissonance between actions, rewards and available resources. Naturally, they suggest some strategies to avoid the emotional collapse caused by stress. For example, health-care professionals have consistent work to perform on self-assessment, personalized nutrition, environment and physical activity.

As for the message of such a pretty editorial work, we do not have to aim for a stress-free world, but for a world of interindividual relationships just to satisfactorily increase, consolidate and achieve new skills for achieving personal potential.

Authors underline that bad opinions toward health and educational figures reflect a loss of authoritative attitudes. This means that an urgent intervention to increase professional skills should been soon required. Otherwise, each individual could take every kind of information online, incurring the risk of misinformation, bad information or (more dangerously!) commercial manipulation.

It should be only a matter of integrating the historical protocols with the new advancements. This gets an evolution in the role of the therapist, that becomes more credible, empathic and motivating. Currently the clinician and the therapist are often crushed between operations that force adherence to procedures, protocols or other, yearning for results which are no longer efficacious in a variety of chronic diseases. Some pathologies, even when under control, do not heal sufficiently, increasing the incidence and prevalence and worsening the resulting workload.

This text was essentially elaborated to provide professional operators with information to help people in stress situations. However, it can be somehow usefully exploited also by some (highly educated) parts of the general public. In particular, in addition to the potential medico-legal implications and the responsibilities that intertwine on this subject in the professional world, the “instructions for use” provided to adolescents and young people in the section devoted to developmental age, are relevant. In fact, during this period of life, conditions of interference, with respect to individual well-being, are matured. These conditions affect the individual’s positioning in the society they live in. Moreover, it can also determine their exclusion from the community to which they belong and, sometimes, their subsequent medicalization. Hence the need for collective cultural sharing, including parents and teachers, on the issue of stress relapse during growth, based on the most recent scientific evidence.

A wide variety of public health officials are somehow involved in this theme and therefore may possibly benefit from reading it as “testimonials” of a new kind of way of dealing with the issue of health (which is not the absence of illness but a state of complete physical, mental, social and relational well-being), or with the aim of assisting people who need treatment and appropriate cure. Perhaps it is precisely the aspect of healing that (the Authors state) is currently facing a pause in our hyper-specialized communities.

The need to integrate the knowledge of specialists and operators regarding the connections between CNS, “psyche”, endocrine and immune systems as well as the main chronic pathologies allows activating collaboration with the single individual who asks to be helped in the healing path.

It is necessary to know that stress experiences – good or bad – are often very contagious. Aguzzoli and De Santi write that the fear of change must be replaced with the skills of creativity.

Therapists and educators can form a network to treat the “pain of living”, very often linked to the mismanaged stress. They can possibly invert the passive point of view towards an attitude of presence, indispensable for awakening the “dormant abilities” of individuals towards their personal fulfilment and the professional dignity of the involved operators.

It is noticeable that the present booklet is also available as E-book. Why not translating it in English and in other languages?

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I PRODOTTI DI FRONTIERE: IL CASO DEGLI INTEGRATORI ALIMENTARI BOTANICI
Pamela Lattanzi
531 p.
€ 35,00.
[Frontier products: the case of botanical food supplements]
reviewed in our biomedical journal *Annali ISS* for the hot and increasingly relevant issue it covers. In fact, the critical problems caused by the widespread use of “food supplements” by European and non-European consumers deserve increasing attention by public health officials, health product regulators and by high-level specialistic actors in the media scenario. The book contains the juridical qualification of this type of products, involving their “static nature” problems as well as their “dynamic nature” components.

In turn, this deals with comparisons among different European countries (European directive 2002/46/CE) in managing safety, labelling and providing the consumer with compulsory information. Legislation, shopping, medicinal and health claims, and “botanicals” (UE n. 1924/2006 and directive n. 2004/24/CE), REFIT are thoroughly and critically presented and rather precisely discussed. The limits to the free circulation of food integrators at the European Union level, as well as in the globalised markets, is outlined and “digested”, according to a narrative likely to be exploited also by biomedical and public health officials.

The final part (products and geographical borders) mainly deals with criteria and instruments for the correct and uniform juridical qualification of those products, with tasty final paragraphs about the future “nutritional” politics of the European Union and the very last one provocatively entitled “Toward a Pharma Food (World)?”

In our Institute (Istituto Superiore di Sanità, ISS) a research and regulatory group (presently Section of Human Nutrition and Health, Department of Food Safety, Nutrition and Veterinary Public Health) is active since about 20 years. This unit, embedded in a European and global network of regulatory, of expression of formal suggestions for socio-political strategies, and scientific issues has a robust tradition of research in human nutrition and associated pathophysiological aspects.

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