



debt, say Mian and Sufi. More aggressive debt forgiveness after the crash helps, but as they illustrate, we can be rid of painful bubble-and-bust episodes only if the financial system moves away from its reliance on inflexible debt contracts. As an example, they propose new mortgage contracts that are built on the principle of risk-sharing, a concept that would have prevented the housing bubble from emerging in the first place. Thoroughly grounded in compelling economic evidence, House of Debt offers convincing answers to some of the most important questions facing the modern economy today: Why do severe recessions happen? Could we have prevented the Great Recession and its consequences? And what actions are needed to prevent such crises going forward?

**PRESCRIPTION DRUGS ARE THE THIRD LEADING CAUSE OF DEATH AFTER HEART DISEASE AND CANCER.** In his latest ground-breaking book, Peter C. Gotzsche exposes the pharmaceutical industries and their charade of fraudulent behaviour, both in research and marketing where the morally repugnant disregard for human lives is the norm. He convincingly draws close to

Each year, hospital-acquired infections, prescribing and treatment errors, lost documents and test reports, communication failures, and other problems have caused thousands of deaths in the United States, added millions of days to patients' hospital stays, and cost Americans tens of billions of dollars. Despite (and sometimes because of) new medical information technology and numerous well-intentioned initiatives to address these problems, threats to patient safety remain, and in some areas are on the rise. In *First, Do Less Harm*, twelve health care professionals and researchers plus two former patients look at patient safety from a variety of perspectives, finding many of the proposed solutions to be inadequate or impractical. Several contributors to this book attribute the failure to confront patient safety concerns to the influence of the "market model" on medicine and emphasize the need for hospital-wide teamwork and greater involvement from frontline workers (from janitors and aides to nurses and physicians) in planning, implementing, and evaluating effective safety initiatives. Several chapters in *First, Do Less Harm* focus on the critical role of interprofessional and occupational practice in patient safety. Rather than focusing on the usual suspects—physicians, safety champions, or high level management—these chapters expand the list of "stakeholders" and patient safety advocates to include nurses, patient care assistants, and other staff, as well as the health care unions that may represent them. *First, Do Less Harm* also highlights workplace issues that negatively affect safety: including sleeplessness, excessive workloads, outsourcing of hospital cleaning, and lack of teamwork between physicians and other health care staff. In two chapters, experts explain why the promise of health care information technology to fix safety problems remains unrealized, with examples that are at once humorous and frightening. A book that will be required reading for physicians, nurses, hospital administrators, public health officers, quality and risk managers, healthcare educators, economists, and policymakers, *First, Do Less Harm* concludes with a list of twenty-seven paradoxes and challenges facing everyone interested in making care safe for both patients and those who care for them.

In this controversial new account of the history of medicine, David Wootton argues that, from the fifth century BC until the 1930s, doctors actually did more harm than good, and asks just how much harm they still do today.

"Crammed with provocative insights, raw emotion, and heartbreaking dilemmas," (The New York Times) *First, Do No Harm* is a powerful examination of how life and death decisions are made at a major metropolitan hospital in Houston, as told through the stories of doctors, patients, families, and hospital administrators facing unthinkable choices. What is life worth? And when is a life worth living? Journalist Lisa Belkin examines how these questions are asked and answered over one dramatic summer at Hermann Hospital in Houston, Texas. In an account that is fascinating, revealing, and almost novelistic in its immediacy, Belkin takes us inside a major hospital and introduces us to the people who must make life and death decisions every day. As we walk through the hallways of the hospital we meet a young pediatrician who must decide whether to perform a risky last-ditch surgery on a teenager who has spent most of his fifteen years in a hospital; we watch as new parents battle with doctors over whether to disconnect their fragile, premature twins from the machine that keeps them breathing; we are in the operating room as a poor immigrant, paralyzed from a gunshot in the neck, is asked by doctors whether or not he wishes to stay alive; we witness the worry of a kidney specialist as he decides whether or not to transfer an uninsured baby to the county hospital down the road. We experience critical moments in the lives of these real people as Belkin explores challenging issues and questions involving medical ethics, human suffering, modern technology, legal liability, and financial reality. As medical technology advances, the choices grow more complicated. How far should we go to save a life? Who decides? And who pays?

Stories of Life, Death, and Brain Surgery

Health Professions Education

To Kill a Mockingbird

The Science Beyond the Controversy

How to Get Things Right

An Evidence-based Handbook for Nurses

Laudato Si'

Are your kids being indoctrinated in school? Unfortunately, it's increasingly likely. From "social justice" to critical race theory, and from advocacy and activism campaigns to planned "action weeks," teachers and schools nationwide are abandoning neutrality in the classroom, embracing political agendas and partisan aims, and expecting students to get on board. Meanwhile, students with doubts or misgivings decline to voice objections due to fears of lowered grades, impacted college recommendation letters, social ostracism, "cancellation," public shaming, ridicule, and other formal and informal means of "correcting" them and making them toe the ideological line. Is this what we want for our kids? Will this kind of "education" produce able citizens or independent thinkers capable of self-government? The range of opinion has been narrowing in higher education for some time; now, heavy-handed thought constriction and chilled speech are choking our secondary, middle, and even elementary schools. The situation is dire—and America urgently needs a response. This book provides the tools we need to confront and remove hidden agendas, to uproot and reject educational biases, and to restore balance and integrity to America's classrooms. It's time to indoctrinate our schools!

**An Intersectional Approach to Creating a Culture of Belonging at Work**

The Transgender Craze Seducing Our Daughters

A Bridge to Quality

Undoctrinate

A Doctor Confronts Medical Error

Irreversible Damage

How People Do Harm and Live with Themselves