

U.K. to know that Klein advocates very small doses of imipramine, even as low as 10 mg., to counteract panic attacks.

Finally, Chambless acts as the diplomatic chairman emphasising positive ideas of all the contributions, and suggesting that an interactive multidimensional approach is the correct one. All the authors provided thought-provoking material, and anyone looking for ideas about agoraphobia to confirm or refute would find a rich source here.

RICHARD STERN, *Consultant Psychiatrist, St George's and Springfield Hospitals, London*

The Treatment of Drinking Problems. By GRIFFITH EDWARDS. London: Grant McIntyre. 1982. Pp 334. £6.96, £14.95 (paperback)

This book is above all else practical. It should help psychiatrists, physicians, social workers, nurses and counsellors develop their confidence in responding to drinking problems. We know that clinicians shy away from recognising and dealing with the alcoholic because they feel pessimistic about being able to help and believe they will be entering into a longterm and unrewarding treatment relationship. Professor Edwards 20 years' experience is a healthy antidote to this therapeutic nihilism. His enthusiasm for treatment is all the more cogent because it comes from someone who in the Addiction Research Unit has not only treated alcoholics but critically monitored the effectiveness of his work.

At first he unpacks the portmanteau phrase, alcoholism—describing its constituent elements, such as the alcohol dependence syndrome and a range of other alcohol related problems. He counsels against focusing on the extreme case to the exclusion of the individual whose drinking is beginning to cause problems, and reminds us of the special needs of the woman with drinking problems and the link between psychiatric illness and alcoholism. I was particularly impressed by the way in which he presented technical information in a manner which is understandable to a range of professions without losing interest for the psychiatrist—he genuinely writes for the whole team. His approach to history taking, the need for a drinking history and his delineation of a formulation should be required reading for trainee psychiatrists.

Assessment of the problem drinker and his or her family leads on to a consideration of treatment. Having recognised the protean manifestation of alcohol problems a range of treatment strategies are described and we are advised to tailor the treatment to suit the needs of the patient. Matching therapy to clients remains an unresolved issue. The reader will of course still find he

lacks the magic key to unlock just the right door for the individual needs. The best we seem to be offered is a mixture of good sense, good will and trial and error.

This is a very frank book and it is refreshing to see rarely described clinical problems presented with such clarity. Under "special presentations" alongside the young problem drinker, and the violent alcoholic we find "the very important patient"; that is the individual with a public reputation to preserve whose treatment is clandestine, furtive and often consequently inadequate. He offers sensible advice about ways of ensuring that their position of influence does not paradoxically ensure that they receive second class treatment.

I particularly enjoyed the chapter entitled "when things go wrong, and putting them right". Every situation described is instantly recognisable and the ideas combine humility which recognises that there is no panacea, with originality that sustains optimism.

This is an excellent book which should be read by those who frequently encounter alcohol problems in their clinical work—and that includes all of us.

BRUCE RITSON, *Consultant Psychiatrist, Royal Edinburgh Hospital*

The Cry for Help and the Professional Response. By JACK KAHN and ELSPETH EARLE. Oxford: Pergamon Press. 1982. Pp 133. £10.00, £4.95 (paperback).

This book, like a dragonfly, moves rapidly from one subject to another, alighting here for a second, there a moment longer. Succinctly it raises issues in an authoritative style which invites questioning and discussion.

"Each profession has . . . an authoritarian role which can be the basis of reciprocal seduction and exploitation". If an appropriate response is to be made to a "disease, dysfunction, or deviation", then careful diagnosis using different frames of reference is necessary. Moving beyond his area of specialist skill the professional leaves his authority behind him, and possibly enters an area of uncertainty which may be creative. Both the relationship between helper and helped, and some of the difficulties which arise are discussed.

Written to add a "little complexity and challenge" to the limited views and frames of reference of different professionals who respond to a "cry for help", this book achieves its aim, and particularly the latter two thirds make exciting and valuable reading. Important references being included, it could make a useful text for teaching.

KEITH HYDE, *Consultant Psychotherapist, Hope Hospital, Salford*