

The Practitioner's Guide to Psychoactive Drugs. 2nd edition. Edited by ELLEN L. BASSUK, STEPHEN C. SCHOONOVER and ALLAN J. GELENBERG. New York and London: Plenum Medical Books. £27.50.

This is the second edition of a multi-author book which has obviously found favour in the eyes of the American audience to which it is primarily addressed.

How well does it travel? Not too badly. It presents a generally sensible and practical approach to the prescribing of psychotropic drugs, clearly pointing out the clinical situations where drugs are unlikely to be of much benefit as well as indicating those which are amenable to drug treatment.

The book is organised according to clinical syndromes rather than by pharmacological categories, an arrangement more helpful to the practising doctor. The editors have added chapters on psychotropic drug prescribing in children, the elderly and pregnant women plus a section on temporal lobe epilepsy.

I do, however, have a number of reservations. Firstly, because of the longer time lag in getting newer drugs introduced into the US the range of compounds discussed is somewhat limited; for example, among the antidepressants mianserin is listed as an experimental drug and zimelidine only briefly mentioned once. Secondly, certain of the authors have a penchant for long, exhaustive and undigestible lists of every potential drug interaction, a reflection presumably of the very real concern over possible litigation.

Finally, the price appears inflated for a basic text of this type. but things do come more expensive in America: the final chapter on legal issues cites an award of over three quarters of a million dollars to a patient with tardive dyskinesia. Not, I hope, the shape of things to come this side of the Atlantic!

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The Evolution of Group Analysis. Edited by MALCOLM PINES. Henley-on-Thames: Routledge & Kegan Paul. 1983. Pp 393. £17.95.

This volume, originally intended as a *Festschrift*, for Michael Foulkes, is a fitting memorial to one of the most outstanding pioneers of group psychotherapy and the founder of group analysis. The contributions by James Anthony and Pat deMare tell us much about Foulkes the man;—a complex person who inspired all those close to him, not so much by what he said or did, as what he stood for. Unfortunately he failed to disseminate his ideas widely so that his influence is seldom given the recognition it deserves. This book

will help to put Foulkes work in its proper perspective.

Tom Main's chapter on the concept of the therapeutic community gives an exceptionally clear account of the application of systems theory to psychiatry and should be regarded as a key contribution to an important topic. Malcolm Pines gives an admirable account of Foulkes contribution to group therapy, and should perhaps have formed the introductory chapter. Robin Skynner makes a bold attempt to integrate, marital, family and group psychotherapy. His reference to group analysis as proxy group psychotherapy fails to acknowledge that the surrogate family provided by the group may have greater therapeutic potential than the family which created the problem in the first place. His ability to tolerate the many uncertainties about how groups work is as refreshing as his ability to poke fun at his mentor.

Wilfred Abse contrasts group and individual analysis, while Homes writes on the effects of numbers on transference patterns. Those who have struggled with adolescent groups will enjoy John Evans' contribution and there is much else besides. A few chapters are obscured by pretentious jargon but these cannot detract from the overall merit of the book. Foulkes once said that a message not received and understood is not a communication in group analysis. The book overall does communicate many important messages about the contribution of group analysis to the wider field of group psychotherapy and it contains much of interest to anybody involved in therapeutic groups.

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Aging Sensory Systems and Perception. By JOHN F. CORSO. Eastbourne: W. B. Saunders. 1983. Pp 282. £22.50.

John Corso is deservedly noted for his experimental work on changes in sensory systems with advancing age. He is even more notable for his lucid and comprehensive reviews of this literature. His new book is now the best, elementary, general introduction to this field.

Corso devotes separate chapters to general biological correlates of ageing and, in turn, to the visual system, the auditory system, the vestibular system, to taste, to smell and to the somatosensory system. He concludes with chapters on the behavioural implications of sensory decrements and on management and rehabilitation. Chapters on individual sensory systems each begin with a general, elementary introduction to the systems discussed. This may be useful to readers

who are in need of revision of first principles. It is also a necessity since the sketchy information now available on age-related changes in sensation can hardly be stretched to fill a book of this size. This is, of course, not Corso's fault. His own empirical work has been exemplary and he must cover the literature as he finds it, showing how even the small amount of information we have is nevertheless interesting and useful.

The review shows that we are not dealing with a process of sad, progressive decay, documented in the forest of Arden. It is not just the case that sensory modalities gutter out one by one eventually leaving the elderly in a dark, silent anomic world, sans everything. Losses are seldom total and it is important to appreciate that qualitative changes in sensation are as important as across-the-board losses in sensory resolution. We lose high frequencies before low frequencies in audition, and relative sensitivity for some wavelengths of light declines before sensitivity for others. The nature of change depends on the precise locus of change in sense-organs, in sensory pathways and in the representation areas. Even when all these sub-systems show degenerative changes some fail before others and partial compensations are often possible. Patterns of qualitative losses in sensory experience can often expose the loci of underlying pathologies. Corso is humanely concerned to show how precise diagnosis of pathology allows better prosthesis and rehabilitation.

This bias will be welcome to readers of this *Journal*. It is important to know when people are at risk both because vestibular changes impair their balance and the speed with which they detect changes in tilt, and because progressive losses of peripheral vision deprive them of useful visual cues. It is important to know that for an elderly person a near-normal pure-tone audiogram may give no indication of severe losses in speech comprehension, particularly in noisy environments. It is crucial to know that people fall at risk from hypothermia partly because they cease to notice drops in body temperature, and so do not feel cold. It is very relevant to know that changes in patterns of sensitivity to taste and smell can qualitatively alter dietary preferences for older people who eat too little. It is extremely useful to have this review, and its extensive bibliography, as a starting point for personal excursions into a voluminous, scattered, but very important literature. Finally, it is important that Corso, by this unpretentious and thorough survey, should illustrate how much we still need to know before our interventions are as useful as we would wish.

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Care of the Long-Stay Elderly Patient. Edited by M. J. DENHAM. Beckenham, Kent: Croom Helm. 1983. Pp 236. £14.95.

Mental Health Interventions for the Aging. By ARTHUR MACNEILL HORTON JR. (and contributors). Eastbourne: W. B. Saunders. 1983. Pp 198. £24.75.

In the running of services for the elderly attention tends to centre on ways of supporting patients in their homes and of increasing the 'productivity' of hospital beds for treatment, crisis intervention, rehabilitation and regular relief as part of this process. The more active the service the more disabled and irremediable will be the patients who come to occupy the long-stay beds and the greater the risk of interest and resources being drawn from them to keep the 'sharp' end of the service going. One must therefore applaud Denham and his collaborators for focussing back on the question of the quality of care for long stay patients and on ways of making life pleasanter and more meaningful for them. Admittedly they get off to a rather dry start on the topics of institutions and the measurement of quality of life, and most readers would get more help with the latter from the checklists appearing as appendices to some of the later chapters. The most interesting sections, rich in practical details, were those dealing with the setting up of educational, musical, art, reminiscence and other group activities, with aspects of communication and reality orientation and with the involvement of volunteers. It is true that it was difficult to relate these, and even the chapter on psychogeriatric units, to the severely demented patients I see in our long-stay wards. Indeed it is clear that this book is primarily for the shelves of the geriatric unit library. Nevertheless the psychogeriatrician and his O/T and nursing officer should borrow it for its many useful hints and ideas.

I would not stir so far for *Mental Health Interventions for the Aging*, though at £24.75 it is certainly a book to borrow rather than buy. It actually starts off quite well with chapters tracing the gradual recognition that psychotherapy can benefit the elderly and describing some of the shifts in emphasis, technique and goals that are necessary. Like the other book it deals well with reality orientation but it was too vague on the applications of behavioural therapies. The chapter on therapeutic design was almost incomprehensible and, like the book as a whole, failed to indicate any links with medical lines of management (unless one counts some case illustrations in which the latter seemed glaringly neglected).

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