

outside the gate with £10 given by a charity for discharged prisoners, and boxes and boxes of personal effects. He received no after-care or follow-up arrangements and presumed this was because he 'had the audacity to achieve discharge through a Tribunal.'

The author's proposals for reform are (i) to change the name of Broadmoor, (ii) set up a national system for the rehabilitation and after-care of patients from the Special Hospitals, (iii) establish 'half-way homes' for patients discharged from Special Hospitals, (iv) change Broadmoor into a teaching hospital for psychiatrists and nurses, (v) separate administration and medical care within the hospital, (vi) give periodic tests of suitability to all nurses in Special Hospitals, (vii) establish a patients' committee at every Special Hospital and prison. Clearly this is a biased account and it makes no pretensions to be otherwise and, clearly, not all these suggestions are immediately practical but they could provide a background for thought. Is it possible that Peter Thompson is correct in saying that 'we are destroying men by neglect'? If so, it is a rather odd use of psychiatric and nursing skill. Our new College is having its teething troubles; perhaps it could strengthen its dentition and set new patterns of Royal College activity by examining some of the issues raised in this book.

JOHN GUNN.

TEXTBOOKS

An Introduction to Clinical Psychiatry. By BRIAN DAVIES. International Scholarly Book Services, Inc., for Melbourne University Press. 1971. Pp. 204. Price £1.70.

During the past ten years there has been a great increase in the number of text books on psychiatry for medical students, and this area of education is now well covered. *An Introduction to Clinical Psychiatry* was published in 1966, but this is the first Melbourne University Press edition in paperback. Professor Davies was trained at the Maudsley Hospital, and, as one would expect, the subject-matter is presented in a clear concise style. The section of child psychiatry is written by Dr. Winston Rickards. This book will be widely read in Australia, but the British medical student is unlikely to abandon the text favoured by his medical school.

DESMOND KELLY.

An Introduction to Physical Methods of Treatment in Psychiatry. By WILLIAM SARGANT and ELIOT SLATER, assisted by DESMOND KELLY. Edinburgh and London: Churchill Livingstone. 5th edition. 1972. Pp. xvi + 318. Price £3.00.

The new edition of this well-known book is a

landmark in British psychiatry. Its preface tells us why. 'In a few months now, at this time of writing, the last of us (W.S.) to retain clinical connections will be leaving his Teaching Hospital and National Health Service beds . . . This is, then, the last edition of this book which we shall write.' It goes without saying that all psychiatric trainees and every psychiatrist who uses physical methods of treatment should read it. Not only are all the physical treatments in general use described clearly, but largely obsolete techniques, such as insulin coma, are discussed so that the temporal development of the authors' practice, such an important facet of the post-war psychiatric scene, can be understood in its historical context. New readers will readily understand the authors' reputations as clinicians and therapeutic enthusiasts, for this book is a crystal-clear exposition of their approach to psychiatric problems.

J. P. WATSON.

BEHAVIOUR THERAPY

Behavior Therapy with Children. Edited by ANTHONY M. GRAZIANO. Chicago: Aldine-Atherton. 1971. Pp. 458. Price \$15.00.

This is a collection of 39 papers published between 1964 and 1969 in some 20 journals, here arranged in six sections dealing with the laboratory-to-clinic transition, the retarded, the psychotic (although 'these labels actually are irrelevant to the major therapeutic tasks'), the anti-social, the difficult pupil, and the new therapists (involving 'recognition that behavior is affected primarily by contingencies controlled by "direct care" persons such as parents and ward . . . staff, rather than by a psychotherapist in an hour's weekly meeting'). Mostly they concern basic habit training, talking, hyperactivity, self-injury and the like. Some treat 'multiple-problem and higher social behaviours', with programming of both respondent and operant procedures, and both positive reinforcement and aversive control.

In his neat, historical-summary-introduction, Graziano remarks on the limited availability, apparent irrelevance and unproven effectiveness of traditional, adult-oriented psychotherapy for childhood problems. Unfortunately, 'the pursuit of professional-political power has replaced both humanitarianism and science in the mental health field', hampering innovation, including the development of behaviour therapy.

A predictably mixed bag, in predictably pedestrian psychogese, but useful—particularly to readers with limited library facilities.

J. EWIN MACDONALD.