

On the surface this book appears to be a basic textbook but the authors also use it to discuss their "integrative model of adjustment" in more detail. Not surprisingly, this model incorporates a variety of factors including stimulus, personality and appraisal factors and is supported by fair discussion of research findings.

This book concerns itself solely with a psychosocial perspective, which no doubt accounts for the absence of comment on the psychobiology of PTSD and lack of consideration of pharmacological treatment approaches. Readers hoping for more detailed consideration of psychodynamic approaches will also be disappointed. These omissions prevent the book from being a comprehensive introductory text on PTSD but Joseph, Williams and Yule have produced a very good book which is shorter and considerably cheaper than many of the others currently available.

Jonathan I. Bisson Consultant Liaison Psychiatrist, Gabalfa Clinic, 213 North Road, Cardiff CF4 3AG

The Aftermath of Road Accidents: Psychological, Social and Legal Consequences of an Everyday Trauma

Edited by Margaret Mitchell. London: Routledge. 1997. 261 pp. £45.00 (hb), £15.99 (pb). ISBN 0-415-13053-0

Medico-legal work has been one of the silent growth areas of clinical psychiatry. Much of this growth has involved the assessment of victims of accidents, particularly road traffic accidents, as the law has belatedly come to recognise that psychiatric disorders are a frequent cause of prolonged distress among accident victims. Given the prevalence of road accidents and also the fact that approximately a third of all people seriously injured embark on a compensation claim, surprisingly little is known about the course of psychological sequelae and the indications for psychiatric intervention.

This book, edited by a Reader in Psychology at Glasgow Caledonian University, is therefore a timely publication which includes contributions from several experts who have been involved in clarifying some of the issues in this area of medico-legal practice. The book is divided into three parts which deal with psycho-

logical and psychiatric consequences, legal consequences and social consequences of accidents; the latter part also includes contributions on the role of psychological treatment.

Of particular interest to psychiatrists are the chapters on post-concussion syndrome by Youngjohn, the spectrum of psychiatric disorders by Mayou and the legal issues involved in establishing a claim for damages by Wheat & Napier. It is now recognised that a large number of psychiatric disorders can follow accidents, even when there has been no significant brain injury. An acute stress disorder, depression, travel anxiety and alcohol misuse are all recognised as potential consequences of accidents but the condition which has attracted most attention is post-traumatic stress disorder, which can also involve 'secondary' victims, namely those who witness an accident involving a close relative or friends.

It is clear that much more needs to be understood about why certain individuals develop psychiatric problems whereas other individuals make a rapid recovery and resume their normal daily activities. Vulnerability factors need to be identified and the course of the various syndromes needs to be established by more long-term, prospective studies. The role of psychological intervention needs to be clarified, particularly in the light of two negative studies which have found no benefit for psychological debriefing during the immediate aftermath of accidents. Another cherished belief which has been undermined by recent research is the status of compensation neurosis. For the great majority of accident victims there is no substantial evidence that the prospect of litigation is a major determinant of psychiatric symptoms and only a small minority deliberately simulate or exaggerate the extent of their disabilities. Nevertheless, the impression remains that victims frequently perceive the legal process as frustrating and unduly protracted, often adding to the distress that is directly related to the trauma.

This book is a well edited, authoritative and contemporary source of information which should provide a useful reference for any psychiatrist or psychologist involved in the assessment or treatment of road traffic accident victims.

Geoffrey Lloyd Consultant Psychiatrist, Royal Free Hospital, Pond Street, London NW3 2QG

The Neurobiology of Cocaine Addiction. From Bench to Bedside.

Edited by H. Joseph and B. Stimmell. New York: Haworth Press. 1997. 129 pp. \$24.00 (US) (pb). ISBN 0-7890-0031-8

This book has been very helpful to me coming at a time when cocaine use has become more prevalent on the UK scene. First published as volume 15 of the *Journal of Addictive Diseases* in 1996, it has the status of a series of peer-reviewed research articles compiled into a book, with an editorial and a selective guide to current reference sources.

The editorial aim is to bring these together to make researchers and clinicians aware of current research on biological, environmental and social factors associated with cocaine use. The expectation is that this knowledge will help to shape the clinical response to patients who present with problems due to cocaine.

The research was conducted by workers from New York and has a parochial flavour in the sense of using as its subjects patients who are in methadone maintenance programmes there. Thus, the extent to which all the results might pertain elsewhere is not clear as there might be selection bias. Also, the use of high-technology apparatus such as quantitative electroencephalography for predicting treatment response is an interesting theoretical exercise, but few services have access to that type of sophisticated investigation. However, a tantalising glimpse is given of the way cocaine might sensitise dopaminergic cells with persisting effects in some individuals, and of the possibility that patients' responses to antidepressants could be predicted.

There are many other good points in this volume, particularly in the section on cocaine, dopamine and the endogenous opioid system. The neural networks through which substances work are of great theoretical and clinical importance and this chapter gives evidence that effective methadone maintenance for patients with opiate dependence might well be protective against cocaine use through action on the mu receptor.

I am unaware of a book that brings together the current state of knowledge in this way and am happy to recommend it to libraries and to all who work in substance services for a short, easy and informative read with many references.

Andrew Robinson Consultant Psychiatrist, Substance Misuse Service, Royal Cornhill Hospital, Aberdeen AB25 2ZY