

Children of Battered Women. By PETER G. JAFFE, DAVID A. WOLFE and SUSAN KAYE WILSON. London: Sage Publications. 1990. 132 pp. £10.95.

This little book is the latest in a series from the publisher which brings together information on specific aspects of child psychiatry, which might otherwise be scattered through a range of publications for different professionals. In this wide area of children involved in domestic violence this means that developmental child psychology, child psychiatric symptoms, sociological data and the law can be brought together to develop a rationale for intervention and treatment in a coherent framework. This is not just informative and helpful for focusing on the problem but also gets around the false dichotomy which sometimes arises in topics like this between 'real psychiatry' and 'social problems'.

The material is logically organised. Chapter 1 gives an overview of domestic violence, although only from North America. Chapter 2 reports on specific studies on children in refuges, using a developmental perspective to understand the different responses that children can display. Chapter 3 looks at theoretical aspects of the link between domestic violence and future problems in the children and the fourth chapter draws this together in a logical framework for assessment and treatment at primary, secondary and tertiary levels. The last chapter is possibly the least directly helpful, as it looks at the implications for various agencies if they take the needs of this group of children seriously. Again, it discusses the North American structure, although there are some similarities.

This is not a book which develops new theories, but it usefully organises theoretical aspects around clinical findings in children who, as part of the spectrum of victims and survivors of abuse, form a significant part of clinical practice but often an insignificant part of standard textbooks. Adult mental health workers would find it equally useful as a reminder of the importance of this problem and its relevance to psychological functioning.

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Human Aggression: Naturalistic Approaches. Edited by JOHN ARCHER and KEVIN BROWNE. London: Routledge. 1989. 284 pp. £35.00 (hb), £12.95 (pb).

The editors suggest that the naturalistic approach to the study of aggression offers the best basis for identifying, preventing and treating violent behaviour. Given that the naturalistic approach eschews the laboratory in favour of viewing aggression in the context of the interactions, relationships and situations in which it occurs, that might seem a statement of the obvious. What is less easy to accept is the assertion that human aggression is

one of the most pervasive and serious problems facing modern societies. What are the others? Put another way, the editors claim to have identified in aggression one of the major issues for modern mankind. By following their approach you stand the best chances of preventing and treating violent behaviour. This is too good to miss!

With that promise it is not surprising that the book is disappointing. The eleven psychologists who have contributed to this well edited and cohesive volume all adopt a common-sense approach to the subject which left this reader with the impression that he had not learned anything new. The book's weakness lies in an absence of almost any reference to the psychopathology and phenomenology. Its strengths are in Beynon's chapter, "A school for men: an ethnographic case study of routine violence in schooling", and Howells' chapter "Anger management methods in relation to the prevention of violent behaviour".

Surely psychiatrists, like general practice receptionists, would benefit greatly from a proficiency in anger management?

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Psychology in Prisons. By DAVID J. COOKE, PAMELA J. BALDWIN and JACQUELINE HOWISON. London & New York: Routledge. 1990. 147 pp. £25.00.

This book aims to give a deeper understanding of why offenders sometimes behave in unusual and unexpected ways when held in custody. The main emphasis of this book is to explain how a knowledge of psychology would improve prison officers' ability to deal with offenders. The book argues that by applying psychological principles, behaviour within prisons can be better understood and violence and stress can be limited.

The three authors are all psychologists who have worked extensively with prisoners and prison staff. Their book is divided in two sections; the first section is concerned with the origins of criminal behaviour, while the second half of the book attempts to show how psychology can be applied to be more effective in the day-to-day job of dealing with prisoners.

The 13 chapters deal with virtually the whole range of crime. The chapter on understanding violence and aggression is of particular interest. Chapters on coping with disturbed prisoners and facing violence will be of direct relevance to most staff working in prisons.

Highly topical are the chapters on the impact of AIDS in prison life, and hostage-taking in prison.

The book is primarily geared towards prison officers; this will somewhat limit the interest of mental health professionals working, for example, in the field of forensic psychiatry. Further limitations are a non-existing list of references and a rather limited two-page index. The price for the hardback appears rather steep; a possibly less expensive paperback version is not available.

The book will probably not find its way into the recommended reading list of psychiatrists or other mental health professionals working in the forensic field. Nevertheless it might have its place in the field this book is intended for: training and helping prison officers to understand the behaviour of prisoners and to help them to deal with the aggression, the distress and the difficulties of the prisoners in their charge.

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Epidemiology and the Prevention of Mental Disorders.

Edited by BRIAN COOPER and THOMAS HELGASON.
London: Routledge. 1989. 367 pp. £40.00.

This is a compilation of reports and review articles presented at the ninth scientific symposium of the World Psychiatric Association's Section of Epidemiology and Community Psychiatry. The theme is prevention in psychiatry. The editors suggest that a cursory glance through the best known American and British textbooks suffices to show that "prevention remains today a grossly undervalued theme" in psychiatry. Sartorius, in his summary of the World Health Organization's view on prevention concurs – "work in the field of mental health is not seen as a public health effort and mental diseases are not considered a public health problem". In compiling these papers the editors are attempting to redress the balance with, as they put it, a "small but significant landmark in the development of psychiatric epidemiology as a public health discipline". How far do they succeed?

At first glance this book creates a 'heart-sink feeling' similar to that produced by some patients. There appears a disparate collection of articles, ranging from "the sociodemographic risk factors of depression in octogenarians" to "multilevel approaches to the prevention of mental disorders in the community: the Athenian experience". On the face of things, just another collection of loosely related topics gathering together data, much of which has been published elsewhere.

A closer inspection shows this to be a quite misleading impression. The editors must be congratulated on their skilful organisation of the material in line with their overall objectives. The introduction by Cooper gives a superb overview of the issues related to prevention in psychiatry; naive and grandiose designs for "transforming the health of the community" are firmly discarded, while the reader's enthusiasm is kindled for goals that are both realistic and attainable. The book is worth looking into for the introduction alone.

A series of papers are organised into six sections, each dealing with some aspect of prevention. Inevitably, given the variety of authors, the material varies considerably in both style and quality. The editors have

selected presentations of a generally high standard, however, and the chapters on vulnerability, the epidemiology of Alzheimer's disease and unravelling the causes of homelessness are notable.

Most readers will not wish to attempt to assimilate detailed data on so many widely differing subjects. This is perhaps a book to be dipped into rather than read from cover to cover. Nevertheless, the editors have probably succeeded in their ambition – this is a small but significant landmark in thinking about strategies for prevention in psychiatry.

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Clinical Pharmacology of Psychotherapeutic Drugs. (3rd

edn). By LEO E. HOLLISTER and JOHN G. CSERNANSKY.
London: Churchill Livingstone. 1990. 194 pp. £27.00.

The previous edition of this book appeared in 1983 and clearly it was due for a revision, given the changes in psychopharmacology over this time. The book is written jointly by the authors, thereby avoiding the problems of multiple authorship. It succeeds in its aim to provide a brief, readable and useful reference to the main groups of psychotropic drugs. The main problem for readers on this side of the Atlantic is that it is written from an American perspective with emphasis on DSM-III disorders, and the literature cited is predominantly from US sources. UK readers will find some differences in prescribing habits, for example, in the use of benzodiazepines, and will be frustrated that a number of drugs are not described because they are not available in the USA.

The book is divided into seven chapters, including a new chapter on the drug treatment of childhood disorders. Each chapter begins with a brief history of the drugs in question, followed by a discussion of the relevant disorders, their epidemiology, nosology and aetiology, and how our understanding of these disorders relates to psychopharmacology. The different types of old and new drugs are considered, in terms of their structure, pharmacokinetics, mode of action, dosages and dosage schedules, treatment duration, side-effects, effects of overdose, drug interactions and consideration of their uses clinically.

The first chapter provides a general overview. The second chapter on antianxiety drugs encompasses newer drugs, such as those acting on 5-hydroxytryptamine (5-HT) receptors. Although reasonable guidelines are provided for the prescription of benzodiazepines, they are viewed with less circumspection than in the UK and are considered appropriate in a number of disorders, including alcohol withdrawal, mild depression and schizophrenia. Chapter three deals with the pharmacotherapy of sleep disorders, although narcolepsy is not mentioned until the final chapter. The next chapter