

work was followed by research in physiology, at a time, the author says, when respiratory failure was scarcely recognised. He became an expert on breathlessness, leading to the Foundation Chair of Medicine at McMaster and, as is not uncommon in the vulnerable, achievement of a major ambition was then followed by severe depression, and in turn by mania.

Piling Pelion on Ossa, another manic episode was the cause of a severe road accident, in which his wife suffered particularly badly. This time in the relative's role, Professor Campbell makes trenchant criticisms of the culture of intensive care units, finding that whatever their technological sophistication, no one doctor would assume overall responsibility for the patient and no one told him what was happening to her. Mania stepped in again, when he was invited to return to London but became psychotic at the critical time.

Latter parts of the book were written while he was actually experiencing manic episodes and offer some insights into the upside-down logic that provokes their characteristic behaviour. Reading such an account, the armchair clinician should resist the temptation to believe that he could have done better than his colleagues on the job, yet when the author says of his condition that "drugs have not worked", it is hard to escape a feeling that perhaps they did not get a proper chance—difficult as he must have been as a patient.

This very frank story brings home the havoc that can still be wreaked on an individual and his family by severe affective illness. At the same time, the author is able to describe two cases in which his own determined efforts and clinical nous saved the lives of patients who had been given up by luminaries of the profession. That is not a bad record for any medical career.

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The Medical Evaluation of Psychiatric Patients. By RANDOLPH SCHIFFER, ROBERT F. KLINE and ROGER C. SIDER. New York & London: Plenum. 1989. 247 pp. \$35.00.

Psychiatrists in most branches of the profession should find this book very useful. Rather than evaluate the psychopathology of organic disorders directly, it deals in a very practical way with the differential diagnosis and investigation of potential organic causes of common psychiatric conditions.

Doubts over the diagnosis of atypical cases of, for example, anxiety, depression or mania, are often not fully relieved by available textbooks. How many of us could name 46 causes of secondary mania? What is the detailed differential diagnosis of organic causes of paranoid psychoses or of physical fatigue? How should hypoparathyroidism be detected? It is for extensive answers to those kinds of questions, applied in a psychiatric context, that this book is valuable.

The authors impart a strong sense of practicality and experience to the text. Discussion of the causes of a wide variety of psychiatric symptoms, the description of numerous procedures and investigations, the provision of clinical examples, evident good judgement and plentiful references make it enjoyable to read and create a sense of diagnostic sufficiency.

The only section which may seem a little odd to clinicians trained to eclectic psychiatric practice with an organic flavour is the first chapter where the case for examining and investigating patients is pleaded with an almost desperate air. Breaking psychoanalytic taboos by palpating the patient's body or taking blood is still evidently difficult in some quarters despite the implications of negligence.

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The Future of Mental Health Services Research. Edited by CARL A. TAUBE, DAVID MECHANIC and ANN A. HOHMAN. Washington: US Government Printing Office. 1989. 324 pp.

This volume consists of papers presented at a conference on the future of mental health services research held in Florida in February 1987. The main themes were the structure and organisation of systems providing mental health services; costs, financing, reimbursement and regulation; determinants and patterns of service use; outcome of service use; and the definition, classification and measurement of mental illness and services.

Two ideas immediately came to mind as I began to read. First, how refreshing it is to hear research managers in the United States being so up-beat about the possibilities for mental health research and funding. Secondly, the telling words of a former colleague: health service research is intellectual death.

In the event, the Americans discussed a range of issues important enough to stimulate and encourage even European observers. Perhaps of particular current interest to British psychiatrists are articles on the pursuit of quality services and the effectiveness of services for people with severe mental illness. Professor Morrissey with the final word, identified four specific topics as future research priorities: conceptualisation and measurement of severity of illness; content of services; measurement and analysis of service packages; and system of care as a unit of analysis.

We have a long way to go to match the approach taken by the NIMH in these matters. Regrettably, this valuable resource may be difficult to get hold of, but it is "for sale by the Superintendent of Documents, US Government Printing Office, Washington DC 20402".

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