

Basic interviewing skills are not adequately covered, and there is no clear guidance on, for example, how to take a drinking history, how to plan what investigations you might wish to carry out, or even on how to draw up a psychiatric formulation. It is also rather weak in the areas of psychiatry appropriate to general medicine, and would have benefited from a chapter on dealing with psychiatric emergencies.

Nevertheless, despite these omissions, it is an excellent resource text and is likely to appeal to the student with a keen interest in psychiatry who wants to read and know more about the subject. As such, it will complement other student textbooks that reflect the relevance of psychiatry to other branches of medicine. It would serve the newcomer to the specialty well into the first few months of his or her Senior House Officer training.

LINDA GASK, *Lecturer in Psychiatry, University Hospital of South Manchester*

HLA in Narcolepsy. Edited by Y. HONDA and T. JUJI. Berlin: Springer-Verlag. 1988. 298 pp. DM156.

The title of this book at first sight appears daunting, combined with the fact that the authors are unfamiliar and the book is yet another conference compilation. However, delving deeper we find that just over 100 years ago Jean Gelineau published the first paper proposing the term narcolepsy, clearly differentiating it from epilepsy and linking the intractable daytime sleepiness with cataplexy. There is a valuable chapter on the Japanese experience of the disorder, picturesquely called the 'napping disease'. The vivid sleep hypnogogic hallucinations, sleep paralysis, and poor nocturnal sleep are emphasised, as well as the distinction between narcolepsy and other types of daytime somnolence – attempts to combat napping being crucial in the former. General management and the worldwide founding of a network of 'narcoleptic societies' organised by patients is mentioned.

The book provides an overview of the human leucocyte antigen (HLA) system. The narcoleptic HLA disturbance DR2 and DQw1 positive was discovered in Japan and has been confirmed worldwide. There is a near 100% association reported, which is not found in other forms of daytime sleepiness. Indeed, it is the strongest association for any HLA-related disease. This is therefore a disorder of special importance for the rapidly advancing molecular biology field which is currently adding immensely to the understanding of disease genetics. Its complexity is apparent from the fact that the HLA system is concentrated only on the short arm of chromosome 6, and the proteins encoded by use of these genes. The disappointment is the failure to demonstrate immunological disorder in narcoleptic patients. The most acceptable hypothesis is that the HLA gene itself, or one nearby, encodes an essential protein for normal sleep.

Clearly this admirable book is specialised, but of value to those with interests in sleep disorders. It shows clearly that a new laboratory technique must be accompanied by a careful re-examination of diagnostic criteria for the disorder under study.

D. F. SCOTT, *Section of Neurological Sciences, The London Hospital, Whitechapel*

New Developments in Clinical Psychology Vol. 2. Edited by FRASER N. WATTS. Chichester: Wiley and BPS Books. 284 pp. £29.50.

The second volume in this series lives up to standards set in the first. Watts is to be congratulated on bringing together another useful, varied, and well-presented collection of chapters.

The 16 chapters provide the reader with a well-completed selection of current topical issues in the field, mostly orientated towards therapy issues. Clarke & Greenberg open the volume with an interesting review of research on the two chairs method derived from Gestalt therapy. This is followed by the usual scholarly review from Brewin on attribution theory and therapy and a chapter by Marx on problem-solving therapy. Watts' own chapter covers some of the problems and developments in behaviour-based therapies for agoraphobia, and offers a short but useful review of the evidence for and against the role of the spouse. The emphasis on safety issues is also appreciated.

Parry gives an up-to-date account of social support. I especially liked her effort to highlight the fact that the current emphasis on autonomy and individuality as a therapeutic goal may be out of step with what we know about mammalian evolution. Hanley provides a discussion of treatments for emotional disorders in the elderly. With the growing shift in population demography this area is likely to become more urgent. The role of social factors as preventive variables requires further consideration. MacCarthy provides us with a view of the often neglected area of ethnic minorities. She highlights the point that some of the assumptions of our cognitive-based therapies may be culture-specific. As in Parry's chapter, there is a challenge to the assumption that self-determination and autonomy are always the pillars of good mental health. This may only be true in some cultures.

Dunn Smith explores the topical area of child sexual abuse, highlighting the fact that there is much we still do not know. Aldridge alerts us to the importance of applying psychological knowledge to prevent difficulties in children. Richer's chapter on the role of nutrition on mood and behaviour acknowledges the generally poor methodologies in this area, but offers a reasonable plea not to throw the baby out with the bathwater. Tyerman & Humphrey offer a very good review on the findings relating to the consequences of head injury and rehabilitation. They point out that there has been neglect of

work on the personal and emotional consequences. Their chapter suffers slightly from a failure to tabulate the mass of statistics presented, leading one to get bogged down at times in figures. A chapter on forensic psychology by Sharrock examines eye witness testimony.

The book closes with three chapters on the theme of service evaluation. Clifford & Damon explore some of the assumptions around the rush into the community, and highlight helpful cautions to those not ideologically committed. Mangen discusses the difficult area of cost-effectiveness assessment, giving some good practical advice. Finally, Brown explores the issue of consultancy in non-National Health Service settings.

As in all multi-author books some chapters are stronger than others, and I cannot claim to be competent in all the areas covered here. Nevertheless, the chapters read well, and are relatively short and concise with good and up-to-date bibliographies. I have no doubt that this will be a useful reference book for all those working in the field of mental health and disorder, and I recommend it highly.

PAUL GILBERT, (*Head of Speciality*), *Pastures Hospital, Derby*

Babies and Their Mothers. By D. W. WINNICOTT. London: Free Association Books. 1988. 125 pp. £6.95.

This is a collection of talks by Winnicott to a variety of professional workers, including doctors and midwives, who might be in the position of advising mothers. Here his genius is readily apparent in his capacity to convey profound and subtle insights about infancy in easily grasped and totally non-technical language. Much of Winnicott's insights stem from his understanding that "in the special context of early relationships, the behaviour of the environment is as much a part of the baby as is the behaviour of the baby's inherited drives towards integration and towards autonomy and object relating". This quote illustrates the close similarity with the more recent theorising of the American analyst, Heinz Kohut, but when Winnicott was first developing his ideas in the 1950s, this recognition of the crucial role of the environment in supporting or failing the child's development was by no means commonplace within psychoanalysis. Winnicott saw that the baby is absolutely dependent on the responses of the mothering person, and her capacity to 'hold' the baby reliably, first literally and then more metaphorically. Without reliable holding, the baby experiences the "unthinkable anxieties" of going to pieces or falling forever. Winnicott describes how the mother ordinarily prepares herself emotionally for the task of holding her baby by entering into a special state of mind he terms primary maternal preoccupation.

The first chapter concerns the "ordinary devoted mother". Winnicott describes how this famous phrase was actually the invention of a BBC producer who was

looking for a slogan to illustrate the talk. Perhaps more than any other psychoanalyst, Winnicott was able to describe normal development and to appreciate the complexities of the skills which mothers intuitively bring to their task. In a talk on "Communication between infant and mother", he argued that his concern in studying infants and mothers was not in order to be able to prescribe good mothering, suggesting that at best, "We can avoid interfering". Instead, he found that through learning from mothers and babies, "We learn about the needs of psychotic patients or patients in psychotic phases". Throughout these talks he repeatedly emphasised the dangers of intruding on a mother's or baby's natural responses and instincts. This parallels a similar theme in his writings on the psychoanalytic process where he shows a great respect for a person's spontaneous developmental strivings and the importance of the analyst's non-interference. He comments here, "All we do in a successful psychoanalysis is to unhitch developmental holdups and to release developmental processes."

This is an excellent introduction to Winnicott, especially for anyone who works with children. Here he is highly accessible, provocative and thoroughly English – a delight!

PHIL MOLLON, *District Psychologist and Adult Psychotherapist*

Mother, Madonna, Whore, The Idealisation and Denigration of Motherhood. By ESTELA V. WELLDON. London: Free Association Books. 1988. 179 pp. £11.95 (pb), £30.00 (hb).

This book on female perversion draws on the author's experience of more than twenty years of psychoanalytic work with individual and group patients, mainly seen at the Portman Clinic. In the first part she explores the reasons why society has hitherto failed to recognise female perversion. She argues that a man's sexuality is rooted in his penis, and is aimed externally at a part-object. A woman, on the other hand, feels and expresses her sexuality with her whole body, and in her procreative drive. When expressing hostility by perversion she may, therefore, damage her own body – or the extension of her own body, her baby's body. Motherhood gives her enormous power and control to do this. Weldon thus sees women as capable of perversion in two main ways: by damaging her own body, as in anorexia, bulimia, or self-mutilation; and by physical, sexual, or psychological child abuse.

The second part of the book deals with perverse motherhood, and the third part with prostitution. She acknowledges that we do not yet fully understand female sexuality or its perverse manifestations, and that the theories propounded in this book are only a beginning. She emphasises, however, that understanding of the psychodynamic causes is essential for treatment to be undertaken.