authors on chemical theories of mental illness. This is an excellent book containing valuable information for the clinician and research worker.

W. LINFORD REES.

Mental Illness in London. By Vera Norris. Maudsley Monograph No. 6. London: Chapman & Hall, 1959. Pp. 317.

This outstanding book by the late Dr. Norris is a survey of patients admitted to two observation units and to certain mental hospitals in the London area during the years 1947–1949. Patients were followed up until December, 1951. The investigation is both comprehensive and extensive, involving in all the examination of 7,000 case records and the analysis for each patient of thirty different items. The results show that, notwithstanding advances in treatment, the resident population in mental hospitals during the period under review was still increasing, and 85 per cent. of the patients on any given day will have been there for more than one year. In general it was found that the prognosis of almost all mental illnesses severe enough to require mental hospital treatment was bad. This is borne out by the duration of stay in hospital and also by the unusually high mortality risk.

This book is a model of statistical and scientific enquiry into a difficult problem and can be strongly recommended.

W. LINFORD REES.

Family and Class Dynamics. By Jerome K. Myers and Bertram Roberts. London: Chapman & Hall, 1959. Pp. 295, 565.

This book is the second report in the New Haven study of social class and mental illness and is a companion volume to Hollingshead and Redlich's Social Class and Mental Illness. Based on ten years' research it reports investigations into the significance of social class differences on the development, manifestation and course of (1) schizophrenia in 25 subjects and (2) neurosis in 25 patients. The age range in both groups was from 22-44 years, and members of the families were studied by a team consisting of psychiatrists, sociologists and other social scientists.

Significant differences were found between Hollingshead's Social Class III patients (small business and clerical class) and Social Class V patients (lowest unskilled labouring class). The differences found related to parent-child relationships, psychosexual development, community pressures, attitudes to psychiatric illness and symptomatology.

The authors consider that social class factors, although not the main cause of illness, may precipitate serious psychiatric illnesses in vulnerable persons.

In a study of this kind the possibility of the results being influenced by bias, by the methods used in collection of data and their subsequent analysis is difficult to rule out.

This is an important book meriting serious study by everyone interested in the social aspects of psychiatry.

W. LINFORD REES.

Area of Residence of Mental Hospital Patients: Studies on Medical and Population Subjects, No. 16. London: H.M.S.O., 1960. Pp. 177.

This report, published in December, 1960, lists the numbers of admissions to designated mental hospitals in England and Wales during 1957 by the area of residence of the patients. "Area of residence" is the Local Authority area of the patient's address at the time of his admission. First admissions are distinguished from those other than first, and the figures are given by sex, 5-year age-groups, and seven diagnoses. It was felt that such figures would be of value to research workers studying local variations in the frequency of different diagnoses of mental illness.

The bare numbers of admissions mean little, but with the aid of the Registrar General's Annual Estimates of the Population of England and Wales and of Local Authority Areas, 1957 (London, H.M.S.O., 1958, price 1s.), rates of admission can be calculated. Such rates show differences which at first sight seem surprising. Why