

The veteran Zubin is determined to be optimistic and to reject chronic disability as being inherent in many cases, although this seems to strain the limits of acceptance. His vulnerability model regards the patient as being essentially well, although subject to one or more episodes of illness; the natural healing process may be impeded to varying degrees by "ecogenic forces", but enhanced by good social networks, ecological niches, or premorbid personality – which may mitigate the impact of stresses. Zubin says that outcome studies must use controls which are concordant for all important psychosocial variables, but it is far from clear how this could be done.

Ciampi lists no less than eight integrative models, and maintains that chronicity depends more on psychosocial than on genetic/biological factors, although the case for this is not strongly argued. He also proposes a three-phase model to establish connections between vulnerability and information-processing, based on Piagetian theory. It is elegantly argued, but largely translates well-known concepts into different terminology. There are also nine therapeutic principles for the psychosocial management of schizophrenia, including the suggestion that psychosocial measures may act as alternatives to medication, but the work of Leff and Hogarty does not support that view.

Other papers deal particularly with social skills training and with self-help by schizophrenics. The contributions which were originally in German show a number of translation problems, but overall this book stands out through its unusual quality.

HUGH FREEMAN, *Consultant Psychiatrist,
Hope Hospital, Salford*

A Primer of Human Behavioural Pharmacology. By ALAN POLING. New York: Plenum. 1986. 246 pp. \$29.50.

The author, in his preface, writes that this book is intended to introduce principles of behavioural pharmacology to readers with little or no knowledge of the discipline but with an interest in how drugs affect human behaviour, but it is hard to know for whom the book is intended. The book is written in a lively style with each new concept being clearly defined, but once a reader's interest has been stimulated few references to more specialised textbooks are given (and where listed are, in at least one case, an out-of-date edition). The coverage of topics is varied. The section on basic pharmacology is very basic, while the chapter on clinical drug assessment touches on many topics, including the DSM-III diagnosis of schizophrenia and methods of measuring behavioural change by direct observation. Although the author graphically illustrates the measurement error inherent in different methods of observing behaviour, this can be of limited value to people embarking on

clinical drug assessments when few references to methodology have been included.

This book is recommended as a stimulating introduction to the subject, but should not be regarded as a basic textbook in behavioural pharmacology, in spite of its title.

ELIZABETH GOODALL, *Research Fellow, Medical College of St Bartholomew's Hospital, London*

A Textbook of Clinical Neurophysiology. Edited by A. M. HALLIDAY, S. R. BUTLER and R. PAUL. Chichester: John Wiley. 1987. 730 pp. £32.50.

This book comprises a series of didactic lectures given at the International Congress of Electroencephalography and Clinical Neurophysiology, held in London in 1985. Distinguished clinicians and scientists were invited to lecture on specially chosen topics, so that the series formed a complete course covering all three branches of clinical neurophysiology: electroencephalography, evoked potentials, and electromyography. The speakers were asked to emphasise their views on clinical practice rather than research in progress, and texts based on those lectures have been published here. The result is a remarkable book in that it contains the views of so many international experts under one title. However, as might be expected of a volume compiled in this way, the chapters are very varied, particularly in the level of complexity addressed. They range from a section on signal averaging with instructing equations to a chapter describing the most elementary principles of nerve conduction studies. However, each contains interesting and useful information, as would be expected from this authorship.

The book has been produced and published promptly and is inexpensive (possibly to the slight detriment of one or two of the illustrations). As stated in the preface, it cannot really be regarded as a primer, and indeed there must be some question as to whether 'textbook' is the most appropriate title. It is, however, excellent value and mandatory reading for any modern clinical neurophysiologist. Presumably the sections on EEG and long latency evoked potentials would be of interest to psychiatrists.

CLARE J. FOWLER, *Consultant Clinical Neurophysiologist, The Middlesex Hospital and St Bartholomew's Hospital, London*

Community Clinical Psychology. Edited by HUGH C. H. KOCH. Beckenham: Croom Helm. 1986. 349 pp. £22.50.

This multi-author book has as its stated aim "To determine the main components of what clinical psychology

has to offer within a community framework". It does not claim to be comprehensive overview, but covers a wide range of topics. There is an emphasis on "using psychologists' knowledge and skills that will help (other) staff". There is also an emphasis on the growing importance of prevention. The editor states that it is intended not only for those working with clients but also for managers, which is perhaps an interesting comment from a practitioner who became a manager shortly after completing this book.

The eighteen contributors all write from the basis of clinical practice and the majority from a British setting, with only four American contributions. Four of the chapters are concerned with particular lifestages ranging from childhood to old age, and emphasise those aspects of psychological practice the authors consider important. Two chapters are concerned with specific groups: the mentally handicapped and the chronically psychiatrically ill. Four chapters are concerned with very specific conditions: alcohol, drugs, smoking, and obesity. The chapter by Koch on anxiety and depression deals with management of these common conditions, not only in terms of therapy but also the location of services and the need for a preventative approach. The two remaining chapters deal with behavioural marital therapy and behavioural medicine.

This book provides a useful survey of the views of a number of active and experienced clinical psychologists and succeeds in providing an overview of much of the present scene. It inevitably raises questions as to the boundaries between the work of clinical psychologists and psychiatrists, as in places it seems to claim for clinical psychology that which, no doubt, many psychiatrists would see as falling within their own field. There is an emphasis on team work. This is a book that should be available to all psychiatrists and certainly should be included in every psychiatric and clinical psychological library. The print and format is not particularly attractive nor particularly easy to read, and it seems a pity that at this price it could not have been better. Alternatively, perhaps such books should be produced in paperback and therefore more likely to be purchased by individuals rather than mostly by libraries.

A. C. BROWN, *Consultant Senior Lecturer in Mental Health, University of Bristol*

Hypnogogia: The Unique State of Consciousness Between Wakefulness and Sleep. By ANDREAS MAVROMATIS. London: Routledge and Kegan Paul. 1987. 360 pp. £30.00.

This book has made a timely appearance. It examines hypnogogia at a time when there is a renewed interest in cognition and subjective experience within both psychiatry and psychology.

The first part of the book gives a comprehensive historical background to the phenomenon together with numerous descriptive accounts and pictorial illustrations. The second part relates hypnogogia to other states such as dreams, psychic experience, schizophrenia, and creativity. Finally, an attempt is made to determine its brain correlates and function.

According to the author, hypnogogia is a state, often initiated consciously and deliberately but frequently becoming automatic, in which original revelations of a psychic, artistic, or scientific nature may occur. It is usually pleasant and can be therapeutic.

"Hypnogogia" certainly makes fascinating reading to both the layman and those with some knowledge of the field. It also serves as an encouragement to the reader to initiate his own personal investigation of what is essentially a subjective experience.

ALYSON BOND, *Lecturer, Institute of Psychiatry, London*

Functional Psychological Testing: Principles and Instruments. Edited by RAYMOND B. CATTEL and RONALD C. JOHNSON. New York: Raven Press (distribution for Brunner/Mazel). 630 pp. \$88.50.

The term 'functional' in the title of this book could mislead readers into expecting its contents to deal with the testing of practical, everyday functioning of human beings. In fact, the editors use the term in its most mathematical sense, the concern of the contributing authors being with exactness of measurement and principles of testing rather than with perhaps more fundamental questions concerning the ecology of testing. One of the editors states that functional psychological testing is 'based on quantitative personality theory', and readers who find this statement comfortable might find the book instructive and useful.

The book is in three sections: 'Psychometric principles in testing', 'Available structured tests for functional psychometry', and 'Art of testing in psychological practice'. These titles themselves are indicative of what I found to be the over-ambitious intentions of the editors, who have produced a book which is unnecessarily complicated. The section on psychometric principles is an example of intellectual overkill, which Anastasi (1982) avoids in her much more succinct coverage of the topic.

While I approve of Cattell's scorn for sloppy science and tests such as the Rorschach, I am not convinced that subjectivity does not enter the text of this book on a number of occasions. I was offended by the value judgements in chapters 8 and 20 on the ending of the Eleven Plus examination in Britain. On page 154, for example, the contributors write: "... in Britain, the labor (*sic*) government's abolition of selection by intelligence test for more advanced education ... was frightful." Statements of this kind - and there were others of similar ideology - should have been rooted out of this book