

even further by the authors' literary style; for example: "The interaction of local circuit neurones is described as being dependent upon small compartmental units or modules, desmosomes, serial and peripheral synapses, uni and bidirectional gap junctions etc." The feeling on finishing the book is that little has been gained for what in many parts has been very heavy going.

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The Psychology of Women: Ongoing Debates. Edited by MARY ROTH WALSH. New Haven and London: Yale University Press. 1987. 484 pp. £36.00 (hb), £10.95 (pb).

This book makes no attempt to provide a comprehensive overview of female psychology, but instead, as its subtitle indicates, focuses on issues that are subject to continuing debate. Significantly, the selection includes several topics specifically related to psychiatry, such as the relevance of menstruation and the menopause to the aetiology of mental disorder; the excess of women among psychiatric patients; and the old chestnut of whether psychoanalytical theory has anything valid or helpful to say about women. Interestingly, however, it may actually be the more 'general' sections, relating to wider issues of women's normal psychology, that could contribute most to the psychiatric understanding and assessment of female patients.

There are fascinating sections, for example, describing recent research on whether women's moral reasoning is typically different from men's, and whether the mental health of either sex might be enhanced by minimising sex differences and fostering a psychological 'androgyny'. Equally pertinently, there are sections exploring some of the apparently self-destructive and self-defeating aspects of women's 'normal' psychological adjustment, such as the alleged masochism of female sexuality, and the motivation of women to avoid success in order to maintain an acceptable 'femininity'. No psychiatrist dealing with troubled women (who are, after all, the majority of psychiatric patients) can afford to ignore the conflicts that women face in balancing the struggle for personal health with the potentially destructive demands of the 'feminine role'. Sometimes such conflicts may be at the heart of the patient's psychiatric problems; at the very least, they frequently confuse the clinical picture, raise dilemmas for diagnosis, and impede effective treatment.

Structurally, the book is divided into fourteen linked 'debates', each with a brief introduction by the editor, followed by two opposing papers by authoritative writers in the field. Numerous disciplines are represented, including psychiatry, general medicine, and psychoanalysis, as well as academic psychology, sociology, and feminism. Inevitably, some of the papers are

better than others, and the rigid procession of introduction-argument-counterargument, repeated through fourteen sections, makes occasionally monotonous reading. The format has two obvious advantages, however. Firstly, it offers balanced, bite-sized introductions to the areas covered, and in so doing combines the accessibility of a textbook with the appeal of using primary sources. Secondly, and perhaps less obviously, it allows insight into the many levels of controversy, both within and between disciplines, whereby accepted knowledge of an area is continuously modified and reconstructed. Most of the book focuses on the respectable presentation of research and counter-research. But on both sides of the various debates the book also exposes something of the interplay of opinion, theory, and political commitment, that in every field (psychiatry no less than feminism) influences the construction of questions, the development of theory, and the interpretation of findings.

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The Psychoanalyst in Psychiatry. By THOMAS FREEMAN. London: H. Karnac. 1988. 198 pp. £20.00 (hb), £9.95 (pb).

This is an important book for psychiatry and psychoanalysis. Freeman is one of the very few psychoanalysts practising as a general psychiatrist in this country. He brings his psychoanalytical stance to bear upon a lifetime's experience of clinical adult psychiatry. The book is primarily about psychosis in general psychiatry – its diagnosis and management.

He takes the view that patients have a self-healing capacity, and that this resource can be facilitated or impaired by the way professionals approach their diagnostic and therapeutic tasks. He feels that drug treatment has been successful in dispelling the positive symptoms of schizophrenia, but it has failed to influence the core of the morbid process (negative symptoms). He recalls the influence of Hughlings Jackson on Freud, who took the view that damage to healthy neurological or psychological life led to a loss of higher functions (i.e. negative symptoms) and the release or exposure of primitive maladaptive mental activity such as delusions and hallucinations (positive symptoms). Thus, restoring the lost higher functions is a crucial treatment task, and is sorely neglected in current psychiatric management of psychotic patients. This Freeman sees as the place for psychotherapy of the psychoses and the importance of the psychoanalyst's role as a member of the psychiatric team.

He then challenges the prevalent Kleinian psychoanalytical view of the aetiology of the psychoses. His criticism is that psychoanalytic views of schizophrenia are homogeneous for all forms of the disease, and he feels that there is an important difference between remitting