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psychological literature, to the exclusion of almost everything else. Both the largest section (six chapters) on social factors and the section on treatment (which is entirely psychological) digress to a considerable extent from the stated aim of the book. The clinical chapters, however, are more balanced in their review of the literature, not withstanding certain notable omissions; they all address the separability of anxiety and depression in a fairly systematic way.

Overall, this book suffers from a familiar set of short-comings: there is little constancy of theme developed since the book is multi-authored; the psychiatric literature is irritatingly neglected since the authors are all psychologists; and being American, the style is earnest, and dense, yet somehow insubstantial. While overall this is not a book that will have general appeal, some individual chapters are thorough, well referenced and provide useful reviews for psychiatrists with an interest in psychological theory and cognitive therapy.

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Drinking and Casualties: Accidents, Poisonings and Violence in an International Perspective. Edited by Norman Giesbrecht, Rene Gonzalez, Marcus Grant, Esa Osterberg, Robin Room, Irving Rootman and Leland Towle. London: Routledge. 1989. 444 pp. £30.00.

With contributions from 38 international authors and editors, this book is divided into five sections.

Section I reviews the relationship between alcohol and trauma and examines alcohol-related casualties in Latin America, Africa and Oceania. The latter is particularly interesting because of its geographical fragmentation into the geoethnic regions of Melanesia, Micronesia and Polynesia.

Section II examines conceptual issues and methods and argues for a systems model to understand the complex relationship between alcohol consumption and injuries. It examines the role of alcohol in accidents, poisoning and violence, and there is a useful chapter on the pharmacology and method of analysis of alcohol. The section ends with research into and registration of alcohol-related non-fatal casualties in Finland.

Section III reviews studies of national systems of alcohol-related casualty statistics in Australia, Finland, Canada, Poland and Mexico, and again stresses the importance of more uniform data and record keeping, with recommendations of how this could be achieved.

Section IV covers exemplary analysis, and a chapter deals with biological matters of alcohol intake among 4796 subjects in accidents in France (a reprint of a paper appearing in the *British Medical Journal*, 1986). Other

chapters in this section examine accidents and injuries among treated alcoholics and their families; trends in alcohol and violent deaths in Norway; sex differences in alcohol-related casualties in cases of self-destructive behaviour; and opportunities and problems in conducting research on alcohol and casualties in developing countries, by giving five case studies (the Sudan, Nigeria, Costa Rica, Argentina and Mexico).

Section V concentrates on research and policy. It emphasises that research on alcohol-related casualties must be recognised as a political and social undertaking and hence a redefinition of research and the roles and responsibilities of researchers within a sociopolitical context is needed. A further chapter looks at the similarities and differences in the researchers' and policy makers' agendas and a postscript outlines future directions in research and policy.

An appendix deals with the alcohol dimensions in casualty reporting systems and another proposes a model establishing an alcohol-related casualty surveillance based on US data systems.

As a clinician I found that this book was informative and allowed further insight into the topics discussed. I would recommend it to psychiatric libraries as a source of reference. It is also reasonably priced.

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Problem Drinking (2nd edn). By NICK HEATHER and IAN ROBERTSON. Oxford: Oxford University Press. 1989. 359 pp. £5.95.

This is the second edition of a book for the intelligent layman first published in 1985. It is complementary to the monograph for the professional (*Controlled Drinking*, 1981) by the same author.

The fundamental tenet of the book is that problem drinking is best understood as a learned type of behaviour with biological phenomena playing a limited role. After critically reviewing the history of the disease concept and emphatically rejecting it, the authors examine problem drinking as a social-psychological paradigm, giving a useful summary of different types of learning behaviour and the practical consequences including treatment and professional strategy.

Changes to the first edition include an update on the controlled drinking controversy, reports on controlled studies on early intervention attempts to modify drinking behaviour, and political developments in relation to control policies within the UK.

The book remains a valuable and clearly written exposition of problem drinking from the social-psychological perspective, although at times one is suspicious of the authors' attempt to explain practically all abnor-

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mal drinking behaviour using this model alone. For example, nothing is said of the phenomena of tolerance and withdrawal symptoms emerging at the same level when drinking is commenced after abstinance.

Finally, in a field of endeavour where few specialised workers of any discipline show any professional interest in the subject, it seems a pity that the work and role of the specialised alcoholism treatment unit is so summarily dismissed. Under the new National Health Service contract, there will be quality assurance assessments and investigations of patients' levels of satisfaction. It will be interesting to see whether patients who attend such units are also so dismissive.

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Benzodiazepines: Current Concepts – Biological, Clinical and Social Perspectives. Edited by I. HINDMARCH, G. BEAUMONT, S. BRANDON and B. E. LEONARD. Chichester: John Wiley & Sons. 1990. 302 pp. £32.50.

In retrospect, all organisations involved with benzodiazepines since 1970 should have employed the services of a public relations officer. The high profile of these compounds in the last ten years has ensured that little can be said or written about them without some eager beaver of a journalist reporting the information to a far wider audience.

It is possible to detect the influence of public relations in this book. Ostensibly, it is a hard-nosed look at benzodiazepines from the viewpoints of animal pharmacology and clinical practice. We move from the benzodiazepine receptor (Haefely) and its role in dependence (Nutt) through to pharmacodynamics and pharmacokinetics (Leonard et al). Differences between benzodiazepines are explored further by Hindmarch, mainly through human volunteer studies. We then read about the range of use of benzodiazepines from general practice through to forensic populations. There are also chapters on epidemiology of benzodiazepine use (Katschnig & Amering), and sociological (Bury & Gabe) and legal implications (Brahams).

The message that comes over time and time again throughout this book is that benzodiazepines are useful and effective drugs and far too much fuss is being made about their disadvantages. Even in the two chapters on abuse (Katz et al) and dependence (Rickels et al) the disadvantages of benzodiazepines seem minor when compared with their benefits. Even one of the widely accepted modifications to clinical practice following from recent research—that it is wise to discontinue long-term benzodiazepine treatment—is questioned, as "it is not at all clear that this is appropriate, much less necessary—at least until such time as it can be shown either that long-term use provides no benefit to these

patients or that long-term use poses some particular risks that have not appeared to date "(p. 194). This advice is only countered by Birley in the preface, who argues for the opposite viewpoint that such patients should "try to take them (benzodiazepines) intermittently or stop taking them altogether".

I was left with the uneasy feeling that despite the independence of many of the contributors, the primary motivation behind this book was to 'soft sell' the benzo-diazepines rather than to look at them dispassionately. Although the temptation is strong to compensate for the many tendentious statements that have been made about them in recent years (delightfully illustrated in Bury & Gabe's chapter), it should nonetheless be resisted. This book is rather like a solemn treatise on gunpowder, detailing its chemical properties and widespread usage for peaceful purposes, with just the occasional footnote here and there that it can sometimes be used to kill people when used by a few irresponsibles, who, tut-tut, could hardly be numbered among this book's readers.

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Geriatric Psychiatry. Edited by EWALD W. BUSSE and DAN G. BLAZER. Washington, DC: American Psychiatric Press. 1989. 725 pp. £55.00.

It is ten years since the appearance of the *Handbook of Geriatric Psychiatry* edited by the same authors, and this new book adequately reflects what has changed, and what has not. It generally stands up well to sampling.

There are 26 contributors, all from the United States, and they include well known as well as less well known names. By and large they have done a good job. It is not fair to any textbook to judge it on its up-to-dateness in the neurobiology of the brain and particularly of dementia, for this subject moves so fast that any textbook must, by the time it appears, be well behind the front line; this one, however, does as well as any.

The wholly North American base of the book means that it is unlikely to become popular as a standard text here, although it does notice much, but not all, of the important literature from outside the United States. Astonishingly (for the authors are good friends of British psychogeriatricians), they seem to have missed out on the history of the development of psychogeriatrics as a specialty in this country. From the section on Britain in the last chapter, which reviews the future of geriatric psychiatry, it could not be guessed that this field had any definable existence yet in Britain, let alone that it was now a part of district services.

Readers of the earlier volume will see many similarities, and there is overlap of structure and of authorship. An important advance is that this book, by contrast with the earlier two-column small-print volume, has a