

the editor refers to it as a syndrome. DSM III creates no such confusion, although of course emphasizing that people with this personality type can have "short-lived psychotic episodes". Such illnesses are often mistaken by unknowledgeable psychiatrists as serious endogenous psychoses and treated with misplaced pharmacological, institutional or electrical vigour: one of the common mistakes in clinical psychiatry. In the present book Gallahorn (p. 78) perhaps does not deal in sufficient detail with this crucial point in differential diagnosis when merely he comments in passing that borderline personalities with Brief Reactive Psychosis have only transient (and not pervasive and generalized) lack of reality testing.

Inevitably Dr Lion includes a chapter on narcissistic personality; the adherents of Kohut and Kernberg who "collectively conceptualized it" are described as "begging for its inclusion in DSM III". Dr Lion seems to single out especially the grandiosity of the individuals whom the concept is intended to designate. However, in Chapter 4 on the subject, Dr Phillips acknowledges that the features of the condition have been derived from psychoanalytic investigation when, inevitably, they emerge in subtle, gradually unravelled, revelations of complex interlocking tendencies. Thus the Narcissistic personality is defined on the basis of hypothesized pathology, the external traits often being unobvious to the hasty clinician, not alert to the fact that "such traits as exhibitionism and interpersonal exploititiveness may be effectively disguised" (p. 69). DSM III can be misleading in its effort to be behavioural, when not differentiating sufficiently between observable and psychodynamic phenomena. Psychodynamics can too glibly be equated with observable traits.

There are also separate chapters on behaviour therapy, family therapy, hospitalization, milieu therapy, private practice, and drug treatments; and the court, prisons and military service each have their own chapters. So also does psychological testing, psychodynamics and socio-cultural determinants.

Negligence in proof-reading gives rise to irritation the more unfortunate because this is an impressive, clinically significant book with great implications for patient care, about an enormous area of clinical and investigative work still waiting to be done on abnormal personality.

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**Coping with Crisis and Handicap.** Edited by AUBREY MILUNSKY. New York: Plenum. 1981. Pp 358. \$19.50.

Aubrey Milunsky, the editor of this book, is a

paediatrician with a special interest in birth defects and genetic diseases. Much of his clinical work involves working with families who have to cope with the pain of caring for a severely handicapped or dying child. In 1979 he helped organize in Boston a 'National Symposium on Coping with Crisis and Handicap'. This book brings together the papers presented at that conference. The twenty contributions cover many of the most severe crises families could have to face; the dying child, suicide in the family, having an autistic child, the effects of severe burns. The contributors include not only health professionals, but also bereaved parents, clergyman and a philosopher.

This could have been a book almost too painful to read. In fact, the experience, compassion and strength of the various authors make it easier than might have been expected. It should be possible to commend certain chapters and criticize others for omissions or lack of objectivity. This would not really be appropriate. What makes the book so very worthwhile are the many small items scattered throughout which point to the day to day experience and wisdom of the authors. One example which illustrates this is a discussion on how long the family of a child who has died at home should remain with the body before the undertaker arrives. I found this deeply moving. The fact that a nurse had given great thought to the implications of what could be seen as a small practical point demonstrates the quality of care that can be achieved. That she has put these thoughts into print should help many others look at the meaning of this and many similar practicalities surrounding death and grief.

This is not a book that can tell you what to do. It is perhaps not a book that is meant to be read straight through. Its real use would be as a source of seminar material for staff working with death and handicap. Almost any one of the chapters could be taken as a basis for a group discussion. An increasing number of psychiatrists are becoming involved in this sort of work. They should find this book of considerable help. As an additional bonus there is, at the end, a bibliography of almost nine hundred recent relevant references.

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**Jungian Psychology in Perspective.** By MARY ANN MATTOON. New York: Free Press. 1981. Pp 334. \$21.95.

This book is advertised as an introduction to Jungian psychology—it is at once less and more than that. It reviews Jung's published work in some detail but it pays little or only passing attention to significant

developments made by other analysts that have taken place: for instance the "London school" is said to be neo-Jungian and we learn that its members have made "substantial and effective use of Klein's work". That gives a false impression because their investigations have been almost entirely clinical and these findings have led to work on child development based on Jung's thesis. That the results have been like those of Klein, Winnicott and Bion in England, or Jacobson, Erikson and Kohut in the States, amongst others, is valuable but secondary. Having noted that some Jungians have paid attention to childhood, as opposed to the majority, she claims to be half way between the two. It would appear that some Kleinian metapsychology would appear in the volume—I did not succeed in finding any. Another omission is that little attention is paid to research as a scholarly pursuit into myth and legend in the service of amplification, a noteworthy Jungian occupation.

Thus Mattoon's introduction is faulty and that is because her primary interest is to introduce the reader to the ways in which parts of Jung's thesis has been tested using experimental and statistical methods; her account is quite impressive. Nobody else has done this. There is a short chapter on research method indicating the ways in which psychologists could employ their skills. Mattoon's work is unique in this respect and gratitude is due to her for that considerable labour even though she neglects clinical observation as a research method in its own right—that after all was the basis on which Jung developed his studies.

The volume is readable. It is regrettable that the biased bibliography is headed 'Comprehensive' as it is more of an account of the author's particular interests.

I would not think the volume of much interest to psychotherapists, the chapter on that subject is too generalized, but I hope it will interest and stimulate psychiatrists and academic and clinical psychologists.

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**Forensic Psychiatry: An Introductory Text.** By K. L. K. TRICK and T. G. TENNENT. London: Pitman Books. 1981. Pp 207. £14.95.

Many trainees become anxious about the forensic psychiatry component of the M.R.C.Psych. examination, so a book aimed at meeting their needs is to be welcomed. Unfortunately the authors have chosen to extend their target audience to include lawyers, probation officers and other non-psychiatrists. The result is that over a third of the book is devoted to an undergraduate-level description of the major psych-

iatric syndromes and this is redundant material for candidates for the Membership. The book deals with specific offences in an examination-orientated style with an abundance of lists (e.g. 8 types of sex offender and 13 types of arsonist) and includes sensible references for further reading. The general relationship between law and psychiatry is well covered and the chapter on writing reports and giving evidence is full of wisdom, including sartorial advice for the psychiatric witness. Mental health legislation, admittedly a moving target these days, is only mentioned *en passant* so that the reader searching for Section 60 will find it incongruously placed in the chapter on psychopaths. This is a readable, but expensive, little book which I suspect will appeal to crammers. The discerning candidate could save money and find all he needs in good review articles.

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**Psychotherapy with Families: An Analytic Approach.** Edited by SALLY BOX, BETA COPLEY, JEANNE MAGAGNA AND ERRICA MOUSTAKI. London: Routledge & Kegan Paul. 1981. Pp 178. £5.50 (paperback).

**Developments in Family Therapy: Theories and Applications Since 1948.** Edited by SUE WALROND-SKINNER. London: Routledge & Kegan Paul. 1981. Pp 373. £8.95 (paperback).

The field of family marital therapy is a rapidly expanding one both in terms of the interest displayed amongst health care professionals and the flow of publications about it. A wide range of techniques have emerged, derived from a variety of different models, and at times practice seems to have outstripped the theoretical bases for formulation and understanding. Much of the published work has originated across the Atlantic, and these two books are an honourable addition to the British contribution and complement one another.

I enjoyed reading *Psychotherapy with Families: An Analytic Approach* whose contributors are associated with the Adolescent Department at the Tavistock Clinic. Eleven chapters examine the application of analytic concepts to work with families, using the object relations model. All the contributions are readable and lucid and the addition of a glossary defining the key concepts is most useful. They address themselves to both practical and theoretical issues and in doing so give a vivid picture of the object relations model, and its extension to the family.

*Developments in Family Therapy: Theories and Applications since 1948* is edited by Sue Walrond-Skinner who has previously published a useful