The final chapter, on ascertainment and incidence, contains many useful practical hints. The environmental conditions of the patient should be investigated in every instance. This implies the use of social workers. But the reports of these workers require very careful scrutiny, for they are inclined to confine their inquiries to the more patent, economic and social conditions of the home.

On every page of the book the reader whose work brings him into contact with the mentally subnormal (and whose work does not do so?) will find something worthy of his attention, something which will assist him in his daily duties. We seem to have waited a long time for this volume. Yet if waiting gives us something so good, we would fain wait.

M. Hamblin Smith.

Outlines for Psychiatric Examinations. Edited by Clarence O. Cheney, M.D. Utica, N.Y.: New York State Hospitals Press, 1934. Pp. 134. Price \$1.50.

The methods of psychiatric case-taking described in this volume are based on principles laid down by Prof. Adolph Meyer. They were originally collected under another title by Dr. George H. Kirby in 1921, and in the present edition

they have been revised and expanded.

In an introductory section Dr. Cheney justifies the use of guides in clinical psychiatry and meets criticisms, of which the most obvious, on a first perusal, is naturally, that the scheme recommended is too elaborate. He points out that the investigator's experience and judgment will help him to decide which particular lines of inquiry should be pursued in each case, and adds that "the fact that work must sometimes be done under conditions unfavourable for the best and most satisfactory results furnishes no valid reason for objection to a method which aims at a higher level of thoroughness and completeness".

The editor's experience has led him to abandon the special personality study as a separate part of routine case-taking, and to amplify the personal history to include matter throwing light on the patient's make-up. Thus in the case of events such as physical illnesses, inquiry is to be made into the patient's mental reaction and attitude to his experience, and into the counterreaction of those around him to this attitude. A scheme for more formal personality study is, however, included.

In addition to these sections, there are schemes for physical examination; a separate detailed scheme for body development and the endocrine glands; routine mental examination; hints on further mental exploration; examination of non-co-operative patients; and the psychiatric examination of children. The new classification of mental disorders adopted by the American Psychiatric Association is given in full. It differs from that adopted by the Royal Medico-Psychological Association in having a much larger number of headings, but these can readily be fitted into the broader groups recognized in the British classification, and hence the twenty pages of definition and explanatory notes will be found, with a little adaptation, equally useful in this country.

The book is of convenient size for use, if required, during actual examination. We have no hesitation in saying that every medical officer should be provided with a copy, and that there should be one in the clinical room of every admission unit.

A. WALK.