

views on the latter, and the syndrome of Gilles de la Tourette is placidly accepted as a psychological disorder, despite mention of the use of haloperidol. The dynamic interpretation of cases, in its most far-reaching form, is presented in an assured fashion without any sort of meaningful proof. Complex and peculiar hypotheses are maintained at a great remove from factual data.

Altogether, the book relies on authority more than proof and does not present a balanced account.

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Affective Disorders in the Elderly. Edited by ELAINE MURPHY. Edinburgh: Churchill Livingstone. 1986. 235 pp. £28.00.

This book is concerned with arguably the most important group of mental disorders to afflict the elderly, for while affective illnesses are amenable to treatment, too often they relapse and generate states of chronic invalidity.

Murphy has assembled 16 authors who between them contribute 14 chapters. Three are devoted to therapies covering psychological, physical, and drug treatments. That on psychological approaches is informative, well balanced, and extremely helpful; that on physical treatment is competent; that on drugs tells us little that is new and often assumes that simple therapies are likely to succeed in the majority of cases.

Chapters on biological and social factors in causation are each well written, but one on the relationship between physical illness and depression tends to cloud rather than clarify issues, with close inspection of the trees obscuring the forest of evidence that if you want to stay happy in old age, you should avoid major physical ill-health.

A chapter on course and outcome is presented with customary clarity of thought by Felix Post, who reviews recent evidence as well as his own definitive studies. A chapter on suicide gets my vote (and that of my Senior Registrar) for being "best contribution by any author" for not only assembling interesting facts, but drawing attention to aspects of suicide prevention.

The affective disorders of mania and the anxiety states are allocated a chapter each. The first is a model of information and coherent presentation, the second largely 'waffle' but with some helpful hints on treatment. Sketchy reviews of Freud's changing theories as to the causation of the psychoneuroses are not needed in this setting.

The distribution of affective disorder is well presented by Swartz & Blazer and the editor's obligatory 'concept' chapter is happily brief and to the point. Finally, there is a solidly competent chapter on characteristics (clinical features) and a rather better one on managing the depressed elderly person at home, addressed primarily to the general practitioner.

I started this book with a feeling of keen anticipation, and put it down feeling rather disappointed. As there are many excellent contributions therein, some explanation is necessary. There is far too little emphasis on the management of the difficult and frequently relapsing case, and I would have preferred a chapter devoted entirely to this topic. Again, some contributors padded out their offerings with data more appropriate to general psychiatry, and generated the suspicion that they were lacking in specialist knowledge. These deficiencies spoil an otherwise good book.

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Psychological Trauma. By BESSEL A. VAN DER KOLK. Washington: American Psychiatric Press. 1987. 237 pp. \$25.00.

The book aims to explore the human response to traumatic events – those that "overwhelm both psychological and biological coping mechanisms." The intention is to present a "general theory of the human trauma response". The author is Director of the Trauma Centre, Harvard Medical School. He argues that psychological damage resulting from uncontrollable terrifying life events has been relatively neglected in the past 70 years but that interest has revived following the Vietnam War, so that post-traumatic stress disorder (PTSD) has appeared in DSM-III. His approach is construed as psychobiological.

Features of PTSD are described and related theories briefly reviewed. The review also encompasses the experiencing of trauma by children, the Chowchilla kidnapping, and physical and sexual abuse.

The essence of the trauma response is seen to be the severance of affiliative bonds. The author's ideas are developed in relation to attachment theory and research into biological correlates of affiliative behaviour and the disruption of attachment. PTSD is argued to be associated with the loss of the ability to modulate arousal: traumatic events induce a biological vulnerability linked to endogenous opioid systems.

The scope of the book is evidenced by chapters on the effect of abuse on children's thought, trauma in the family, and on group, individual, and stress management orientations to treatment.

A book which draws attention to PTSD is welcome, but the theorising often seems loose and indiscriminating and the review of related research uncritical. European research related to the two World Wars is neglected. The approaches to treatment described are interesting and eclectic. It must be hoped that a more usefully articulated theory will evolve in due course.

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