the context of other disorders, and is given no space of its own. The same can be said of psychotherapy and historical aspects of psychiatry.

Standard reference tests tend to follow a similar structure, with early chapters on mental state examination, classification and phenomenology, followed by chapters discussing the main diagnoses and treatment issues, and concluded by an overview of the subspecialities of psychiatry. While this format is probably most comfortable for those starting to read around the subject, the novel structure adopted in this book allows concepts to be viewed from a rather different angle. Careful editing has ensured that information is not duplicated in different chapters or units.

In summary, this textbook has been an absorbing one for me to read, which is not a comment I would often make. It broadened my own perspective of a number of topics and while I don't think that it ought to be studied in isolation by those with limited experience in psychiatry, it would in my opinion be an excellent reference textbook for any medical or psychiatric library. It is a book which I intend to use often.

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Hypnosis in the Relief of Pain. By ERNEST R. HILGARD and JOSEPHINE R. HILGARD. New York: Brunner/ Mazel. 1994. 312 pp. US \$28.95 (pb).

One of the success stories of modern hypnosis is its application in pain control. That such is the case is due firstly to the establishment of plausible theoretical foundations, secondly to the accumulation of evidence from good quality clinical and non-clinical research, and thirdly to the development of effective procedures both for the management and amelioration of chronic organic pain and for the control of pain and discomfort resulting from certain medical and surgical interventions, childbirth and dentistry.

All of these areas of theory, research and practice are described in this book which first appeared in 1975; a second edition came out in 1983 with a forward by Patrick Wall and a supplementary chapter on developments since the first publication, the original text being unrevised. The only change in the 1994 edition is an additional forward by Joseph Barber. Those who are already familiar with this book may therefore have expectations which are not fulfilled. Indeed, even the addresses of organisations listed in the appendix on "The availability of hypnotic services" have not been updated.

One of the strengths of the book is that clinical practice is informed by sound theoretical concepts and extensive research literature. Two important theoretical underpinnings are Melzack & Wall's 'gate control' theory of pain and the influential neo-dissociation model of hypnosis due to Ernest Hilgard himself. The best known empirical work on the latter is Hilgard's demonstration of the 'hidden observer', where the volunteer subject, under conditions of hypnoanalgesia, is able to give an out-of-consciousness rating of the normal pain experience. Both the 'hidden observer' concept and the neo-dissociation theory itself have their detractors, but in my experience even the most radical debunkers of 'hypnosis' are able to recommend 'hypnotic' procedures as effective for pain relief.

All those claiming to be specialists in hypnotherapy for pain control ought to have read this book and be regularly consulting it. I have no doubt that they are, for it is a worthy classic in its field.

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Reconstruction in Psychoanalysis: Childhood Revisited and Recreated. By HAROLD BLUM. Madison, CT: International Universities Press. 1994. £21.00 (hb).

The subject of this book is of particular interest to interpretive psychotherapists, particularly psychoanalysts. It is a subject on which Freud wrote at some length throughout his career, and is of practical as well as theoretical concern. How much does the therapist depend for his method upon imaging in detail the early lives and situations of his patients, and upon sharing his imaginative constructions with them? How well can he know his patients' childhood and how can he assess the reliability of the information which he gathers? How important is it to his patients that their therapist gives time and attention to their versions of their childhoods? Blum has interesting and important things to say upon all these problems and related topics.

Clinical practice and theory have swung from one extreme to the other, from relying nearly entirely upon 'reconstruction' of patients' pasts, to dismissing reconstruction as unreliable and as avoidance of the important issue – namely, the quality of current relationships, in particular with their therapist. Interpretation has swung from sharing examination of the reported past to pronouncements about the patients' clinical transference. Blum's book is the fruit of chairing a research group of experienced psychoanalysts, all concerned to assess the importance of 'reconstruction' in their work. His own stance is to see reconstruction and interpretation of transference not as opposed alternatives in clinical work, but as requiring and reinforcing one another.

The research group seems to have worked by discussing cases on which the members were engaged either as therapists or as supervisors. Only three cases are presented in the book, two of them current or recent and one recalled after some years. These are the core of the book and they are interesting. One is of a man suffering both a neurosis, and a physical illness (Peyronie's disease) which developed in the course of the psychoanalysis. The analyst's reconstruction was of the circumstances in which the patient (antisemitic with a Jewish analyst) had been circumcised at five years of age. The group members clearly differed over the effects which the reconstruction had, and over the various meanings which they saw in the material presented; it would have been useful to have their opinions differentiated more clearly from one another and from the author's own comments.

The second case is of a woman in her twenties who, between the ages of seven and eleven, had had a secret sexual relationship with her father's best friend. The family relationships are described, the father's alcoholism and his bathing his daughter into her teens, and the mother's compliance, but they are incomplete: an elder sister is simply mentioned but not otherwise reported, even as observer.

The third case is the analysis of a child from five to ten years old. A convincing reconstruction was of her devastation at the birth of a younger sister when she was two, but, once more, the mix of group members' and author's ideas does not help the reader to decide the relative importance of intepretations.

The other five chapters are replete with wise generalisations from the author's long experience, His history of the concept is valuable, and also his examination of its practical use in clinical work. A careful re-reading might have saved more repetition.

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Healing Homosexuality: Case Stories of Reparative Therapy. By JOSEPH NICOLOSI. Northvale, NJ: Aronson. 1993. 230 pp. Price not listed.

The material for the larger part of this book is drawn from tape-recorded therapy sessions conducted by the author. Each of the first eight chapters of this book is devoted to one of his clients, in terms of the individual's presenting problems, his history and his subsequent management. Each of the clients was dissatisfied in some way with his homosexual way of life, and benefited from the psychotherapy offered by Dr Nicolosi.

The author points out that in 1973 the American Psychiatric Association deleted homosexuality from its list of diagnostic categories, and this decision was significantly influenced by the personal testimony of homosexual men who felt that their sexual orientation should not be regarded as pathological. Dr Nicolosi is clearly anxious to draw attention to the fact that many homosexual men are not comfortable with a homosexual identity, and in seeking help to change are in fact identifying their sexual orientation as being an undesirable condition. Issues surrounding homosexuality continue to provoke lively argument. Publications in this area over the past 20 years have tended to be heavily weighted in favour of the 1973 decision of the American Psychiatric Association. Dr Nicolosi's book, which should be read in conjunction with his earlier publication, *Reparative Therapy of Male Homosexuality*, does something to redress this balance. I would recommend its addition to the Psychiatry Section of any medical library.

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Affirmative Dynamic Psychotherapy with Gay Men. Edited by CARLTON CORNETT. Northvale, NJ: Aronson. 1993. 264 pp. US \$35.00 (hb).

In the nine chapters of this book, the contributors have presented arguments and much anecdotal evidence in support of a therapeutic approach to the psychologically distressed homosexual man, which aims to encourage such a patient to see his sexual behaviour as a normal variant of human sexual expression, other than a pathological phenomenon. The title of the book emphasises this positive approach, which is firmly based in psychoanalytic theory. From the outset, emphasis is placed upon the role that is played by society in the aetiology of the homosexual man's psychosocial difficulties. As the editor points out, "consistent emphasis is placed on the roles that homophobia and intolerance play in creating and continually renewing shame, guilt and other distressing symptomatology in the gay man". Traditional psychoanalysis is seen as a major offender in this area, since it views homosexuality as fundamentally pathological.

The theme is developed that the homosexual man should be encouraged to see himself and his sexual orientation in a more positive light, and that psychoanalytic treatment can help in this way provided therapists are willing to give up their reductionist views of seeing certain patterns of sexual behaviour in terms of good or bad and healthy or sick.

Homophobia, and the role played by society in generating hatred and fear of the homosexual community, form the single most prominent theme of this book. Great importance is attached to the degree to which the homosexual man internalises the homophobia that he encounters in the society in which he grows and develops. It is claimed that this internalisation results in shame and that this in turn generates selfcontempt and self-loathing. Techniques are discussed whereby the homosexual man may be helped in developing a more positive view of himself and his sexual orientation. Emphasis is also placed on the fact that a patient may be afraid of personal change, and the importance of the therapist's role in facilitating such a change.