BOOK REVIEWS 285

stigmatisation. Clearly, the classical psychoanalytic approach is seen as antitherapeutic.

Two papers seem somewhat out of place. The first is a fascinating case study of a paedophilic murderer, and the second is a paper aiming to show that borderline personality disorder is a social dilemma resulting from the changing social norms of the 20th century. I am not really convinced by the arguments, nor by the excellent case history of a homosexual man which is used to substantiate it. One is, however, left wondering whether it does not undermine the central tenet of the book.

ROBERT HALE, Consultant Psychotherapist, Tavistock Clinic, London

Research, Comparisons and Medical Applications of Ericksonian Techniques. (Ericksonian Monographs. No. 4). Edited by Stephen R. Lankton and Jeffrey K. Zeig. New York: Brunner/Mazel. 1988. 130 pp. \$34.00.

Here is yet more from the followers of the late Milton Erickson. The first four chapters of this slim volume report the results of research studies. Topics include the relative effectiveness of direct and indirect suggestions, the value of 'hypnotic-relaxation' cassettes in a gynaecologic-obstetric ward, and whether the capacity to undergo hypnosis is innate or learned.

The next two papers are theoretical discussions comparing Erickson's techniques with, respectively, cognitive therapies and redecision therapy. They argue that Erickson's methods had more in common with the other therapies than might appear at first sight.

The final three articles – on medical applications – are a mixed bag. That on the "application of Ericksonian principles to the use of medication" I found superficial and unsatisfactory. In one case, the prescription of alprazolam was continued for strategic therapeutic reasons related to the family dynamics. The dangers of prolonged administration of benzodiazepines were apparently not considered. Juliet Auer gives us some anecdotal, although quite interesting, accounts of how she uses techniques derived from Erickson's work in the renal unit of a hospital. Perhaps the best paper in this section is that by Bob Britchford, on the use of the 'tenminute-trance' in general practice.

While there is material of interest here, it is difficult to see why it needed to be published in this rather expensive form. Most of the articles would probably have been accepted by one of the regular journals in the field, and the others did not need publishing at all. I expect that the libraries of hospitals and clinics in which hypnotherapists work, and some 'hardcore' Ericksonians, will want to buy the book. For others there is better value elsewhere in the Ericksonian literature.

PHILIP BARKER, Professor of Psychiatry and Paediatrics, University of Calgary Going Somewhere: People with Mental Handicaps and their Pastoral Care. By SHEILA HOLLINS and MARGARET GRIMER. London: SPCK. 1988. 121 pp. 64 95

Radical changes in patterns of care during the past two decades have both increased the overall numbers of mentally handicapped people in the community and also considerably raised their profile. This has left many people, both lay and professional, exposed to their own personal inadequacies of training and understanding in this area. Many who want to help will find a lack of suitable literature on the subject. This book, which was stimulated by a one day conference on pastoral care, helps to fill the gap. It provides answers in plain English to the common questions likely to arise in the minds of those who come new to the subject, setting out the basic facts clearly and sensitively, and advising on the everyday situations likely to be encountered, such as sexuality, personal relationships, bereavement, and dealing with parents. With its sensible straightforward approach it can confidently be recommended to a wide range of workers. Although specifically aimed at those outwith the mentally handicap services, many within will benefit from the perspective offered. My only criticism of this otherwise excellent little book is the rather uncritical embrace of the concept of community care which pervades the text. One wishes that the authors had found the space to point out and discuss some of its attendent problems.

KENNETH DAY, Consultant Psychiatrist, Northgate Hospital, Morpeth, Northumberland

Receptors and Ligands in Psychiatry. Edited by A. K. SEN and T. LEE. Cambridge: Cambridge University Press. 1988. 604 pp. £75.00.

The theme of this series on intercellular and intercellular communication is the analogy between cellular communication and language. The mechanism by which neurones communicate with one another is largely through chemical signals. This resembles a language, whose vocabularly is the interaction of individual neurotransmitters or neuromodulaters (the 'ligands') with neuronal membrane structures (the 'receptors'). Psychiatric disease can be analysed in terms of abnormalities in the vocabularly, leading to inappropriate messages and inappropriate responses.

The central neurotransmitters about which most is known are dopamine, noradrenaline, acetylcholine, and serotonin. The main pathways for neurones using these transmitters are now fairly well defined. Much more complicated is the variety of receptors for each of these transmitters, but this is gradually becoming elucidated. The development of new drugs that bind specifically to separate classes of each receptor (for instance DA1 and

286 BOOK REVIEWS

DA2 receptors) should lead to new understanding of mental disorders, and their treatment and pathogenesis. More obscure and not really addressed in the volume is the way in which changes in one transmitter-receptor class affects other transmitters and receptors.

Here, 25 leading authorities review topics covering particular transmitters in relation to schizophrenia, affective disorders, anxiety, and stress. In addition to chapters on the transmitters mentioned above, here are others dealing with benzodiazepine receptors, the neuropeptides, CCK and neurotensin, and their ligands. There are also good reviews of endocrine studies of schizophrenia, of animal models of mental illness, and of the neuropathology of schizophrenia.

There is little mention of GABA and none of adenosine, both of which are likely to be important in the pathogenesis of anxiety, nor of glycine and the excitatory amino acids.

The volume is attractively printed, and the reviews are well written and as up to date as could be expected. It is a helpful source book for research workers in biological psychiatry.

J. C. COOKSON, Consultant Psychiatrist, The London Hospital

Psychotherapy and the Creative Patient. Edited by E. MARK STERN. New York: The Haworth Press. 1988. 174 pp. \$24.95.

This is a multi-author American textbook, apparently part of a series on special types of patient. The authors are mainly psychologists. The chapters cover various aspects of therapeutic techniques, and empirical research is also reported. Although the book purports to be about the "creative patient", in fact it ends up being rather muddled between patients whose profession is in the arts, psychotherapy as a creative process, and the therapist's own creativity.

Some of the individual chapters are good. In particular, the account by Natchez of the lives and marriage of the Mexican artists Diego Rivera and Frida Kohl makes poignant and fascinating reading. Unfortunately, the weak chapters predominate. There is a report of research into hemispheric specialisation, from which broad generalisations are made. However, there is no mention in the discussion of the possible implications of the fact that most of the subjects were Catholic priests. The opening chapter consists of a dialogue between Mark (the editor) and Virginia Stern, on creativity. It is replete with indigestible jargon and grammatical errors. Worst of all is the chapter by Zaraleya-Harari. She describes a patient doing secretarial work for her, a patient who gave her daughter a bizarre name which incorporates the therapist's surname, and becoming involved in the patients' professional lives. This sort of work should not merit a place in a textbook on psychotherapy.

There is much that needs to be said about the ways in which therapy can foster creativity, about the creativity of the process itself, and about the pleasures and pitfalls of working with patients who have special talents. This book does not do justice to the subject, and cannot be recommended.

MARK BERELOWITZ, Senior Registrar in Child Psychiatry, The Maudsley Hospital

New editions

Handbook of Clinical Psychopharmacology (2nd edn). Edited by J. P. Tupin, R. I. Shader and D. S. Harnet. Northvale, NJ: Jason Aronson. 1988. 486 pp.

This edition of the *Handbook* contains 17 chapters by 23 contributors, and it is an exceptional volume. Far from being unemotionally chemical, it emphasises a broad view of psychopharmacology, the importance of precision in clinical practice, and the practical and caring management of patients. In keeping, plenty of space is given to diagnosis and differential diagnosis. The use of drugs is described with a sense of precise application, expectation, and outcome. Limitations are not concealed, but in the light of recent general experience more could be included about what might be called the natural history of using benzodiazepine compounds and about the substances which can alter the effectiveness of antidepressants.

The style of each of the chapters is similar. They are organised clinically, space being allotted according to prevalence in practice. The early sections cover psychoses, depressive disorders, fear and anxiety, and mania. Modern classification is used and explained. The chapters which follow provide an answer for many of the present-day practical pharmacological problems of the clinic and acute ward. Violence is considered as a possible product of the use of drugs, and then the chemical management of violence is described. Substance abuse is fully covered, and among the range of special problems discussed are memory disturbance and cognitive impairment in the elderly, children's disorders, eating disorders, atypical depression, adult hyperactivity, and treatment resistance. Further detailed help is given in chapters devoted to drug combinations, the use of serum levels, and the combination of psychotherapy with psychopharmacology. The latter is introduced with intriguing skill. The quotation "the implication is that psychotherapy joins pharmacotherapy in the ranks of biological therapies" should be read in context, and gives an indication of the breadth of view of the work as