

All through the book there is an emphasis on a humane and caring outlook towards retarded individuals, which tempers the scientific and the critical discussion and search for increased knowledge which provides the main strength of the text.

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**The Royal College of Psychiatrists.** By HENRY R. ROLLIN. London: The Royal College of Psychiatrists. 1987. 15 pp. £2.00.

History becomes alive when it brings insights into present day practice, as admirably demonstrated by this booklet.

A graceful view of Belgrave Square invites us to the Post-Regency mansion that houses the College for a meeting with the author, one scholar Librarian who dedicates his work to another. In tracing the history of the oldest psychiatric professional body in the world, Rollin presents a valuable brief background account of psychiatry in Britain since the 18th century. His history demonstrates that the main professional issues have not changed: each succeeding challenge was met by the foundation of Parliamentary Committee, Council, Divisions, Court of Electors, Journal, Library, etc.

However, two major pieces of unresolved business are exposed by his account. The first, from the last century, left the profession's examination, and thus its standards, in the hands of others. It was rectified by the foundation of the Royal College in 1971. This was what the halting, tortured quest was about. The second remains an issue. As the author points out, from the First World War emerged the psychopathologists. Arising from this, some day an uncomfortable decision will have to be made: should the psychiatrist find fulfillment in a biological approach in his field, or does his true vocation lie in psychopathology, as his title implies – "healer of the psyche"?

The appeal of this elegant work to Fellow and Member is evident, but the most harassed Inceptor should not fail to put a few minutes aside to enjoy this compelling account of the antecedents and functions of his professional body.

JOHN HOWELLS, *Formerly Director, Institute of Family Psychiatry, Suffolk*

**Brain Injury Rehabilitation: A Neurobehavioural Approach.** By RODGER LI. WOOD. Beckenham: Croom Helm. 1987. 196 pp. £17.95.

The author was until recently the senior psychologist at the Brain Injury Rehabilitation Unit at St Andrew's Hospital, Northampton. The main substance of the book is a series of vignettes and single-case studies illustrating the management of aggression and other inappropriate activities with behavioural techniques in a token economy setting. Flanking this core of material is a discussion of the nature and value of a 'neurobehavioural' approach. These chapters are disappointing – particularly the final one, where it is difficult to follow the author's arguments.

It is clear that the unit is managing a highly-selected group of severely brain-damaged individuals. This point is not emphasised by Wood, who fails to extend the discussion to the rehabilitation of the more mildly-afflicted majority. Also, the stressing of behavioural aspects leads to a neglect of other aspects of management such as drugs (except for carbamazepine in aggression).

The book could not be recommended to the generalist or the trainee, as better reviews can be found elsewhere (those of Miller or Levin *et al*, for instance). The clinical sections are probably of value to those involved in related work.

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## A HUNDRED YEARS AGO

The Superintendent of the Royal Edinburgh Asylum deals in a very practical manner with many points bearing on insanity in its social relations. Dealing with the question of the nature of the habitation which an asylum ought to provide for its inmates, he says: "It is now generally admitted that for a number of patients we cannot get classification and individualisation enough, if the whole institution is under one roof. We need distinct homes, and houses of different kinds. Many of the patients are capable of living ordinary lives in ordinary houses, plus

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medical supervision and skilled attendance. We need all through the *hospital* and the *home* idea — the hospital and its special arrangements predominating for patients in one state of mind, and the home for others in a different state." The death-rate was 7.7 per cent; and the recovery-rate on admissions was 38.5 per cent.

### Reference

*The Lancet*, 31 December 1887, 1341.