but well-written case histories, which bring the patient to life and yet present all the salient features giving the whole with the utmost economy, without, however, sacrificing anything of importance.

There are points which could be debated. For instance, the possibility of two psychiatric disorders co-existing is not discussed, yet it is an extremely common occurrence to find, e.g. a depressive psychosis and a personality disorder, or a schizophrenia and an acute organic psychosyndrome, say a delirium, in the same patient at the same time. In fact Weitbrecht explains what he calls a "hierarchy" of symptoms, i.e. if organic symptoms are found the possibility of a "functional" psychosis should be dropped. This does not seem to meet the clinical reality.

One also misses reference to objective diagnostic procedures, in particular psychometric testing. But perhaps this omission was intentional, trying to leave the diagnosis at the level of general practice.

Whatever one may feel about this, there can be no doubt that this book will help the non-psychiatric practitioner to become acquainted with this most difficult field of psychiatric diagnosis and will raise co-operation between him and the psychiatrist to a higher level of effectiveness.

J. HOENIG.

2. CHILD AND ADOLESCENT PSYCHIATRY

The Aphasic Child. A Neurological Basis for his Education and Rehabilitation. By ALICE CALVERT ROBERTS. Springfield, Illinois: Charles C. Thomas. 1966. Pp. 84. Price 36*s*.

The ability to use symbols for building concepts and communicating with others is the most important attribute which distinguishes humans from other animals. The loss or impairment of this skill following a brain lesion in an adult seriously interferes with the ability to cope with life, but the consequences are even more disastrous if the handicap is congenital. The development of speech is affected, and therefore the ability to learn academic skills, to make social relationships, also to see some purpose in life and to work for future goals. Childhood autism is one example of this kind of handicap in its most severe form.

Although Dr. Roberts calls her book "The Aphasic Child" she is in fact concerned with four different kinds of deficiencies of symbolization—aphasia, alexia, agraphia and acalculia. These may occur alone or in any combination, and in differing degrees of severity, but the presence of any one of these handicaps means that the general ability to handle symbols is impaired.

The first part of the book sketches in the neurophysiological basis of speech and communication, and discusses methods of psychological testing. This section is extremely brief, but serves to introduce non-medical readers to three useful ideas—firstly that problems of communication can have an organic basis; secondly that intelligence may not be a unitary function, but that some aspects of intellectual functioning can be impaired while others remain relatively intact; and thirdly that the results of psychological tests may be more useful in indicating areas of handicap than in measuring an abstract intelligence quotient.

The second part of the book deals with treatment, which is, in Dr. Roberts's view, essentially education. The children described were taught to read and write, and at the same time to speak and develop ideas as far as they were able. Five basic principles for remedial teaching are ably illustrated and driven home. These are: individual attention until the child can profitably be taught with others; confidence, patience and determination to carry on until the child begins to learn, however long this may take; breaking down the learning task into ths smallest possible steps, each one of which has to be mastered before the next one is attempted; constant practice, especially in the areas where the child's perceptual difficulties are most severe; and involvement of the child's family in the teaching programme.

Unfortunately, a sixth principle is hardly mentioned at all. This is the scientific application of theories of learning and perception—for example the use of very large letters and pictures; allowing the child to read with his book in a vertical position instead of placing it flat on the desk; the use of extra cues to assist the learning of a difficult discrimination; the place of teaching machines, and of special operant conditioning techniques. None of these can be substituted for a good teacher, but all can be called into use to make the child's task easier and to stimulate his interest.

The results of concentrated teaching are not only the acquisition of some academic skills and improvement in speech but also an easing of the social and emotional problems and the frustrations from which the children suffer as a result of their primary handicaps.

A number of case histories are given, and it is interesting to note that two of the children had previously been diagnosed as "schizophrenic". All the children described were found to be deficient in thyroid. The author believes this to be significant, but since she worked in a "goiter belt" it seems likely that hypothyroidism was just one more handicap on top of the children's communication difficulties, rather than a primary cause.

This book is a useful introduction to an important problem, which, because of the insight it gives into the role of speech in personality structure, social relationships and emotional difficulties, concerns psychiatrists as much as it does teachers.

LORNA WING.

Children of Time and Space, of Action and Impulse. By RUDOLF EKSTEIN. New York: Appleton-Century-Crofts. 1966. Pp. 466. Price $8.75.

The author of this book, a psychoanalyst and clinical psychologist, is Director of a Project on Childhood Psychosis at the Reiss-Davis Child Study Centre, Los Angeles, California. The subject matter is derived from out-patient work at that Centre and also from previous investigations at the Southard Residential School for disturbed children. In collaboration with, and with contributions by, psychoanalytically orientated psychiatrists, psychologists social workers and teachers, a remarkably lucid portrayal of the investigation and treatment of psychotic and borderline psychotic children and adolescents has been achieved. Much of the subject matter has appeared previously in the form of separate publications, the purpose of the book being to collect together such work for its appraisal in the light of other literature relevant to this difficult and somewhat controversial subject. To quote Dr. Ekstein: "We must all admit that we are hardly more than beginners. We work by trial and error. Each case for us is a new scientific experiment."

The work does not pretend to be a textbook on psychoanalysis as related to the forms of psychosis which occur before adulthood. It is a group of case histories, critically examined, which has been collected over a period of twenty years, during which time a programme of training of therapists in the techniques relevant to such problems has been devised and evaluated. It is refreshing to see that the author and his co-workers have at no time dealt in positive but unsupported assertions: they accept that such children are poor treatment risks. There are few pointers to indicate that success is to be achieved in any individual child. It is accepted that many years may be spent striving for an unachievable goal. No "fixed therapeutic prescription" is offered, the stimulus for continued interest being found in the following of each case to its eventual conclusion whether or not it be successful.

In each chapter of this book one discovers fascinating new aspects of situational responses previously discussed. In some instances, in view of the period of time covered, one is able to see the successful outcome of therapy as shown by relatively good emotional adjustment in adult life.

The difficulties of accurate initial diagnosis are discussed, "borderline" being a term used to describe severe neurotic disorder simulating a true psychosis. The problem of counter-transference as seen in the residential situation is considered critically, and a useful section on the nature of the interpretative process is included.

The book is attractively written and includes a reference list of some 200 items. It is anticipated that, as a valuable contribution to child psychotherapy, it will promote discussion and thereby further advancement in this field of research. To quote the author: "We like to communicate our findings . . . we hope that they will inspire communication which will lead toward the improvement of our training methods."

G. W. FISHER.

Griefs and Discontents. By GREGORY ROCHLIN. London: J. & A. Churchill. 1965. Pp. 403. Price £3 5*s*. 0*d*.

This book is a psychoanalytical study of childhood and its problems. The author has brought together a series of earlier medical lectures and modified them into a coherent whole. It seems as if he is aiming his book at a much wider public than that of the exclusively practising psychoanalyst. Anyone with a simple knowledge of Freudian theory should be able to comprehend the book, and it should be of considerable value to many English psychiatrists who themselves may not even practise psychotherapy.

The author is an orthodox Freudian who claims to owe a great deal to the teachings and the writings of Helene Deutsch and Ives Hendrick. He rejects the teaching of Mrs. Klein, and uses the older model of ego psychology in terms of the pressures of super-ego and id, as is the usual practice in America. The language of the book has all the difficulties (or advantages) of standard American, which to the English reader means heavy and laboured reading. The bibliography is in the form of "references" at the end of each chapter, which makes for clumsiness in checking references from the text. The index is adequately done and the book is well produced.

He sets out to demonstrate that our early griefs and discontents, and our reactions to them, have a life-long effect on the psychology of our everyday life. His hypothesis is that these disappointments and losses generate dynamic force with a powerful impetus which can effect either a pathological state or a very high achievement. This latter result is too often overlooked. Development of character and appeasement of original loss by substitution of success in